

A Place to Feel at Home? An Exploratory Study of the Perceived Living Environment in Home-Like Groups, Family-Style Group Homes, and Traditional Residential Youth Care

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ABSTRACT

Traditionally, residential youth care (RYC) in the Netherlands has been characterized by short-term placements, groups with relatively large numbers of youth (8–12), often located on a campus with several RYC units. Recently, alternative RYC settings have been developed to create a home-like environment and promote stability. These alternative settings are characterized by long-term care, smaller groups (typically 6), and placements within the community. Examples of alternative RYC settings are home-like groups and family-style group homes (with live-in professionals). We aimed to gain insight into the perceived living environment in different RYC settings from the perspectives of 26 youth, 14 parents, and 35 professionals. Quantitative data were collected using q-methodology. To deal with the small sample size, we used a triangulation of techniques: the Mokken scale, Mann-Whitney, and by-person factor analyses to explore differences in perceived living environments between RYC settings. We found that participants in home-like groups experienced significantly more sensitivity from professionals than did participants in traditional RYC. Participants in alternative RYC tended to emphasize sensitivity, while participants in traditional RYC tended to emphasize factual conditions. Alternative RYC may provide more opportunities than traditional RYC for youth to experience an environment with sensitive professionals and a positive group atmosphere.

KEYWORDS

Family-style group homes; Home-like groups; Living environment; Q-methodology; Mokken scale analysis

Highlights

- Youth in home-like groups tend to perceive more sensitivity from professionals than do youth in traditional RYC.
- Home-like groups and family-style group homes appear to provide more opportunities for youth to feel at home.
- Policymakers and practitioners are encouraged to invest in alternative RYC settings that focus on providing a home-like environment.

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As recognized by the United Nations General Assembly (1989): “Every child has the right to a standard of living adequate for the child’s physical, mental, spiritual, moral and social development.” When parents cannot provide adequate care, the state should provide alternative care (United Nations General Assembly, 2009). Alternative or out-of-home care ranges from foster care to secure residential youth care (RYC). To date, RYC encompasses a heterogeneous range of settings with different populations and numbers of youth and varying youth-professional ratios (James et al., 2022). RYC is often considered as a “last resort” for youth with the most severe problems (Leloux-Opmeer et al., 2016; United Nations General Assembly, 2009). These youth suffer from complex problems, such as chronic health problems, difficulties in social relationships, and emotional and behavioral problems. They have often been exposed to traumatic events in the past, including neglect, abuse, or parental mental illness (Leloux-Opmeer et al., 2016). In addition, youth in RYC have more prior placements than youth in foster care (Leloux-Opmeer et al., 2016). In some studies, prior out-of-home placement is related to more placement instability in RYC (e.g., Farmer et al., 2003; Riemersma et al., 2023). In recent years, alternative RYC settings have been developed in the Netherlands to provide long-term and home-like care for these vulnerable youth. However, knowledge about the perceived living environment is limited. The aim of this study was thus to investigate and compare the living environment in different RYC settings.

Although a positive living environment (e.g., therapeutic relationships) is related to better developmental outcomes (Leipoldt et al., 2022; Southerland et al., 2009), there are several challenges to providing an adequate living environment for youth in RYC (De Valk et al., 2019; Levrouw et al., 2020; Nijhof et al., 2020; Thoburn, 2016). Professionals find it challenging to ensure the safety of youth living in large residential groups (e.g., 12 youths) who experience multiple difficulties (Levrouw et al., 2020). Studies show that professionals struggle to find a balance between flexibility and being in control when interacting with youth. This is particularly an issue when they experience high levels of stress due to conflict, which results in an emphasis on enforcing rules or avoiding conflict (De Valk et al., 2015, 2019; Knorth & Harder, 2021; Levrouw et al., 2020; Nijhof et al., 2020). Research suggests that several countries face a shortage of qualified care workers in RYC, as well as a high turnover due to poor pay and inadequate support from organizations (James et al., 2022). In contrast to the high turnover of professionals, youth report that they are able to form relationships of attachment with professionals who see them most often, work in the home the longest, and spend one-on-one time with them (Rabley et al., 2014).

Initially, RYC placements serve as a short-term measure, with the goal of returning youth to parents, foster parents, or independent living (Knorth & Harder, 2021). This is in line with the perception that the best solution for youth in out-of-home care is to be raised in a family environment (De Valk et al., 2016; Thoburn, 2016). In practice, however, youth remain in RYC for many years (Christiansen et al., 2010; James et al., 2022) due to their complex needs and inability or unwillingness to return to their own or foster families. The short-term placement policy results in a high rate of youth turnover during their stay in RYC (Knorth & Harder, 2021; Nijhof et al., 2020). In addition to the short-term placement policy, traditional RYC settings are characterized by a relatively large number of youth (i.e., 8 to 12) in residential groups and are located on a campus with multiple residential units (Knorth & Harder, 2021).

Due to the complexity of the problems of youth in RYC and their long history of care, there are suggestion that we should reconsider the view of traditional RYC as a “last resort” and focus on RYC as a permanent option (Holmes et al., 2018; James et al., 2022). According to the UN Guidelines for Alternative Care (2009), standards should be established to ensure the quality of care and contribute positively to youth development. Specifically, member states should invest in the provision of individualized and small group care (United Nations General Assembly, 2009). As a result of this deinstitutionalization strategy, traditional RYCs have been revitalized in many countries in recent decades, moving from large-scale institutions to small family-like settings; for example, in countries such as Italy, Denmark, and the Netherlands (Knorth & Harder, 2021; Whittaker et al., 2022). In other countries, such as Finland and Norway, small-scale care is already the standard type of RYC, with a maximum of three to seven youth per unit and an emphasis on regular living conditions (Whittaker et al., 2022).

The Netherlands has a long history of residential care for young people, but there has always been a debate about this type of care versus more family-oriented care (Knorth & Harder, 2021). Recently, alternative RYC settings have been developed in the Netherlands that are designed to create a home-like environment, provide individualized care, involve parents, and promote stability and permanence for youth with complex behavioral problems (Ammerlaan et al., 2022; Jongepier & Struijk, 2008; Knorth & Harder, 2021; Nijhof et al., 2020; United Nations General Assembly, 2009; Van Schie et al., 2020). These alternative RYC settings differ in size and the ratio of youth to professionals, and are often located in a regular residential neighborhood rather than on a RYC campus. Examples of alternative RYC settings include *family-style group homes* and small-scale group homes. In the Netherlands, family-style group homes are small-scale settings (with six youth on average) with live-in, group-home parents (often life partners) who are pedagogically trained (Leloux-Opmeer et al., 2016).

Whether an RYC setting can be defined as a small group home (without live-in professionals) depends on the number of youth (with a maximum of four to six) and on the ratio of youth to professionals (1:4) (Van Schie et al., 2020). However, not all characteristics of alternative RYC are consistent with the definition of small group homes. We use the term *home-like groups* to refer to RYC settings that are located in neighborhoods (i.e., not on separate campuses), that provide long-term and individualized care, and that have a maximum number of eight youth per house (usually six youth). The main difference between family-style group homes and home-like groups is that in a family-style group home, the professionals care for the youth in their own homes and, as a result, the team of professionals is smaller. To date, very little is known about the perceived living environment in home-like groups and family-style group homes in the Netherlands and whether it differs from traditional RYC settings.

However, research has shown that an RYC living environment that meets the needs of youth includes supportive and sensitive professionals, stimulates the growth and development of youth, provides appropriate structure and rules, facilitates a positive group atmosphere with peers, involves parents, and provides a home-like, family-style, and safe environment (De Lange et al., 2017; Levrouw et al., 2020; Ten Brummelaar et al., 2018; Whittaker et al., 2016). Multiple concepts of such a living environment have been mentioned in the context of RYC, including social or group climate (Leipoldt et al., 2019; Van der Helm et al., 2011). These terms mainly focus on the residential group climate and include key aspects such as support, autonomy, repression, growth, and group atmosphere (Leipoldt et al., 2019; Van der Helm et al., 2011). Youth's needs for stability and permanence are often overlooked in these conceptualizations, although the UN Guidelines of Alternative Care emphasize the value of ensuring a stable home and continued attachment to caregivers (United Nations General Assembly, 2009: Art. 12). This is supported by research showing that continuity of relationships is essential for youth development (Thoburn, 2016). In our study, the term "living environment" in relation to an RYC setting concerns the sensitivity of professionals, structure and rules, autonomy, group atmosphere, involvement of parents, stability, permanence, and opportunities for normalization (regular living conditions).

Preliminary research on alternative RYC care suggests that the provision of long-term care and small groups create opportunities for youth to build relationships with professionals and other youth, which leads to more possibilities to create a home-like environment and regular living

conditions (Ammerlaan et al., 2022; Huefner et al., 2018; Nijhof et al., 2020; Van Schie et al., 2020). Youth indicate that they are able to feel at home in small-scale care, rather than seeing the place as a temporary option (Nijhof et al., 2020). Moreover, professionals are able to set individual rules and young people experience more calmness in the residential group (Ammerlaan et al., 2022). In addition, youth who stay longer (more than six months) in a family-style setting are more likely to be employed or to graduate from high school compared to youth who stay for a shorter period of time (less than six months) (Huefner et al., 2018).

Given the promising role that alternative RYC settings can play in promoting positive development for youth with complex problems, it is critical to gain more knowledge about the quality of the living environment in these settings, as this is likely to be a key element of success in RYC (Knorth & Harder, 2021). In our study, we distinguished between traditional RYC and alternative RYC (i.e., family-style group homes and home-like groups). We addressed the following research questions:

- 1a. To what extent do youth, parents, and professionals identify elements of a positive living environment in traditional and alternative RYC settings?
- 1b. Do traditional and alternative RYC settings differ in the perceived living environment?
- 2a. Can the perceived living environment be distinguished by specific elements from the perspective of youth, parents or professionals?
- 2b. If so, are participants who distinguish similar elements of the living environment associated with a particular RYC setting?

Based on previous research, we expected to find a higher quality of the living environment for alternative RYC compared to traditional RYC. Due to knowledge gaps, we did not have specific hypotheses for the remaining research questions, therefore; these questions were exploratory in nature.

Methods

Design

This study is part of a larger longitudinal study of RYC in the Netherlands which started in 2019. The longitudinal research project was approved by the ethics committee of the University of Groningen in 2020. The current study is cross-sectional in nature, with an observational design, and a focus on the identification of elements underlying a positive living environment.

Table 1. Characteristics of the RYC settings that are included in the study.

Facility	Target group	Length of stay	Location	Village or City	Live-in professionals	Youth-professional ratio
A Home-like group	8 youth between 4 and 23 years old	Youth can stay up to the age of 23	Neighborhood	Village	Yes; with additional shift by other professionals	3:8
B Home-like groups ¹	3–6 youth per house per setting for youth between 12 and 18+ years old	Youth can stay until they are 18+ years old	Neighborhood	City	No	2:6
C Home-like group	5 youth between 12 and 18 years old	Youth can stay up to the age of 18	Neighborhood	City	No	1:5
D Home-like groups/family-style group home ²	4–6 youth per unit between 10 and 25 years old	Youth can stay up to the age of 25 (dependent on indication of care)	Neighborhood	Village	Yes; only in family-style group homes	1:6
E Family-style group home	4 youth between 8 and 18 years old	Youth can stay until they are 18 years (longer if necessary)	Neighborhood	Village	Yes	1/2:4
F Traditional RYC	10 youth between 6 and 12 years old	Youth can stay until they are 12 years old.	Residential terrain	City	No	2:10
G Traditional RYC	8 youth between 12–18 years old	Youth can stay 6 till 12 months (6 months on average), up to the age of 18	Residential terrain	City	No	2:8

^aThis facility contained two units: one for youth between 12–18 years old (1). There are four places for youth in the house and two places next to the house to prepare youth for independent living. The other facility focuses on 16+ youth (2). The youth-professionals ration is lower due to independent living.

^bThis facility included multiple units. In this study, one family-style group homes and two home-like groups (one for 16+ youth) were included. One family-style group house became a home-like group (with different professionals) during the study. This family-style group home is considered as home-like group.

Setting

Seven open RYC facilities were included in this study (see Table 1). The facilities were categorized into three settings: home-like groups, family-style group homes, and traditional RYC facilities. One organization facilitated both home-like groups and family-style group homes (Facility D). Alternative RYC settings included both home-like groups and family-like group homes.

Sample

The current study included 26 youth participants, along with 14 parents and 35 professionals (care workers and behavioral scientists) (Table 2). One young person participated twice, once when living in a traditional RYC setting and once in a home-like group. On average, youth in traditional RYC ($M = 13.80$) were younger than youth in home-like groups ($M = 16.06$) and family-style

Table 2. Participant characteristics for home-like groups, Family-style Group Homes and Traditional RYC.

Setting	Traditional RYC	Home-like groups	Family-style group homes
	Youth		
<i>n</i>	5	17	4
M age (<i>sd</i>)	13.80 (3.11)	16.06 (2.05)	15.25 (1.26)
Sex % female	40	52.9	75
First placement % yes	80	41.2	0
M length of stay (<i>weeks</i>) at start data collection (<i>sd</i>)	18.20 (5.97)	26.53 (17.55)	22.75 (10.34)
% facility Table 1	40 F 60 G	41.2A 17.6B(1) 17.6B(2) 11.8C 11.8D	100E
	Parents		
<i>n</i>	7	6	1
M age (<i>sd</i>)	38.57 (7.28)	48.60 (6.58)	35
% facility Table 1	81.4F 28.6 G	83.3A 16.7B(2)	100E
	Professionals		
<i>n</i>	10	22	3
M age (<i>sd</i>)	29.30 (6.36)	30.62 ^b (6.27)	51.67 (6.81)

^a*n* = 5.^b*n* = 21.

group homes ($M = 15.25$). Most parents were affiliated with facilities A (home-like group) and F (traditional RYC).

Youth were included if they lived in one of the participating RYC facilities, but they were excluded if they were unable to complete a questionnaire independently. In addition, older youth between the ages of 18 and 20 were only invited to participate in the study if the professionals expected these youth to need some type of care for at least the next year. This was the only way to obtain information on the quality of care over a longer period of time. In addition, youth were excluded from the current living environment study they could not fully participate because of their young age or lower intellectual capacities/concentration. Their parents and professional carers were still able to participate in the current study.

Measures

Living Environment

Participants were asked to divide 27 statement cards about the perceived living environment in one facility into three groups; “This is often true,” “This is partly true,” “This is less true” (Dataset 1: free distribution). After the first choice, participants were asked to place the cards on a magnetic whiteboard along a spectrum bounded by “This is the least true,” on one side, and “This is the truest,” on the other (Dataset 2: forced choice distribution, the “grid”). Participants could rank

statements on a grid with five categories (with 4, 6, 7, 6, and 4 statements respectively per category). The data collection was in line with Q-methodology, which aims to reveal patterns of similar views or options by sorting statement cards (Watts & Stenner, 2012).

The operationalization of the statement cards was based on Dutch Residential Care Guidelines (De Lange et al., 2017) and the features of the alternative RYC settings as mentioned in their program manuals (e.g., home-like environment and care as long as needed). To develop the set of statements, two young people with experience in youth care were involved in the development process. These young people selected most relevant cards and added cards (e.g., “I do fun activities with the professionals”). This process resulted in a set of 27 statements. Youth below the age of 12 or with lower intellectual capacities/concentration had the opportunity to work with a set of 20 statement cards, but were excluded from the current study. During the Q-study, youth could indicate that they would like to rank more statements.

Demographics

Data on other characteristics (sex, age, previous placements) were collected at the beginning of the longitudinal study by asking youth or caregivers these questions.

Procedure

Data for the current study were collected from June 2020 to December 2022. At the start of the study, RYC facilities were contacted via e-mail (e.g., by using a network of alternative settings) or phone and were invited to participate in the study. After receiving permission from RYC facilities, a mentor asked the youth if they were willing to participate during one of the first moments of contact at the RYC facility. Before youth started to participate in the study, the researcher explained the study to youth and parents. All participants were required to sign an informed consent form. For youth below the age of 16, the permission of legal parents or guardians was sought. If a youth was willing to participate, a parent and a professional (i.e., mentor) involved in their care were also invited to participate in the study. Data for the current study were collected from youth who had been in an RYC setting for two months or longer. If a youth's mentor was replaced, the new mentor was invited to participate in the present study during the first 15 months of placement (until December 2022). The researcher visited the participants at the RYC facility or at home. Participants received chocolate for their contribution to the current study.

Data Analysis

We performed a Mokken Scale Analysis (MSA) and by-person factor analysis to analyze the data. MSA looks for correlations between items (statement cards) across a sample of participants (Molenaar & Sijtsma, 2000), while by-person factor analysis looks for correlations between participants with the same ranking of items (statement cards) based on a boundary (Watts & Stenner, 2012).

Mokken Scale Analysis

To answer the first research question (1a), MSA was used to provide information on the identification of items that underlie a positive living environment. MSA provides information on whether these items share the same underlying construct (Sijtsma & Molenaar, 2002). To determine which items were interrelated and measured the same construct, data indicating the perceived living environment were used, which ranged from less true (1) to often true (3). If MSA assumptions were satisfied, mean scores could be calculated and used for further analyses to test for differences between RYC settings (Question 1b). For more information on the assumptions of the MSA, we refer to [Appendix A](#).

We started with the default search procedure in the MSP program (version 5), a program for MSA, and used 27 items (statement cards) (Molenaar & Sijtsma, 2000). Participants with missing data on one or more of these items were excluded from the analyses. To check whether the scales were sample-independent, we tested whether the same order of items applied across settings (traditional RYC, home-like groups, and family-style group homes) and perspectives (youth, parents, or professionals). Only satisfactory strong and reliable scales checked by satisfactory diagnostic criteria for the MSA assumptions such as H-coefficients (>0.3), crit-values for item-invariant ordering across groups (below 80), and rho-scores (above 80) were tested for sample independence for different subgroups.

Testing for Differences Between Traditional and Alternative RYC

Regarding research question 1b, once we found reliable and sample-independent scales, we calculated mean scores and we tested for differences between care settings (e.g., traditional RYC, home-like groups, and family-style group homes) on these mean scores by using nonparametric tests.

By-Person Factor Analysis

To gain a detailed understanding of the elements distinguishing groups of participants, summarized in question 2a, we applied a by-person factor analysis in PQmethod (Schmolck & Atkinson, 2002). We used data from the forced choice distribution, which ranged from -2 (least true) to 2 (most true). Missing data were excluded from the analysis. We then performed a Principal Component Analysis (PCA) with varimax

rotations (Watts & Stenner, 2012). When using the varimax rotations, PQmethod rotates the factors following statistical criteria that account for the maximum amount of study variance. The factor selection was based on eigenvalues (which should not be below 1), the experienced variance of a single factor (as much as possible), a low correlation between factors, the number of participants significantly related to a factor (criteria: at least two participants, significant factor loading for our study $> .49$), and the content of a factor (factors as a viewpoint) (Watts & Stenner, 2012). Distinguishing statements (significantly different, $p < .01$) and characterizing statements (higher or lower ranking) were used to interpret the factors. To answer research question 2b, characteristics of the groups of participants (i.e., care setting, age, sex) that loaded on a particular factor (viewpoint) were summarized.

Results

Recognizing the Elements of a Positive Living Environment

Table 3 shows items measuring the same construct according to the Mokken model. This scale can be interpreted as a measure of professionals' sensitivity to and support for the young people, the relationship between youth and professionals, and the perceived group atmosphere. We called this scale the *sensitivity scale*. The mean item scores were mainly above two, meaning that on average the items were identified as at least "partly true" or "often true." The items regarding sensitive and supportive behavior of professionals were the easiest to recognize (e.g., "Professionals listen to me"), which means that it is very common to experience, while items regarding the group atmosphere were

Table 3. Results of mokken scale analysis (MSA) following the test procedure: sensitivity and group atmosphere (scale: sensitivity).

Item	<i>M</i>	H-coefficient
The professionals think how I am doing is important	2.85	0.54
My friends and family are welcome	2.82	0.42
The professionals listen to me	2.71	0.48
The focus here is on my needs	2.71	0.42
I can discuss everything with the professionals	2.68	0.47
The professionals help me with school/work/daytime activities	2.60	0.39
I can participate in the process of making important decisions in my life	2.59	0.40
I do fun activities with the professionals	2.48 ^a	0.39
The main focus here is on what I do well	2.41	0.48
I believe the professionals help me to communicate with friends	2.07	0.45
I see this place as home	2.04	0.43
I think the atmosphere here is the same as at a friend's house	1.73	0.47
		H = 0.43, rho = 0.86

Note. The scale ranges from 1 (this is less true) to 3 (this is often true), with a higher score indicating that the statements were easier to recognize (to be experienced more often), based on a free distribution. Based on the dataset with 27 items ($n = 73$).

^aitem with the highest crit-value (46).

Table 4. Means per item for each subgroup, and the sample independence.

Item	Y	Par	Prof	HG	FGH	TRYC
	n = 25	n = 13	n = 35	n = 44	n = 8	n = 21
	M	M	M	M	M	M
The professionals think how I am doing is important	2.72	2.77	2.97	2.91	3.00	2.67
My friends and family are welcome	2.76	2.69	2.91	2.95	3.00	2.48
The professionals listen to me	2.44	2.92	2.83	2.73	3.00	2.57
The focus here is on my needs	2.52	2.62	2.89	2.77	2.88	2.52
I can discuss everything with the professionals	2.40	2.69	2.89	2.73	2.88	2.52
The professionals help me with school/work/ daytime activities	2.56	2.38	2.71	2.75	3.00	2.14
I can participate in the process of making important decisions in my life	2.36	2.69	2.71	2.80	2.75	2.10
I do fun activities with the professionals	2.28	2.69	2.54	2.57	2.62	2.24
The main focus here is on what I do well	2.16	2.46	2.57	2.50	2.75	2.10
I believe the professionals help me to communicate with friends	1.84	2.46	2.09	2.16	2.25	1.81
I see this place as home	1.76	2.31	2.14	2.18	2.50	1.57
I think the atmosphere here is the same as at a friend's house	1.72	2.23	1.54	1.91	1.75	1.33
H	0.38	0.42	0.42	0.33	0.06	0.39
Rho	0.83 (207)	0.90 (134)	0.82 (105)	0.76 (140)	0.39 (383)	0.86 (146)
lowest H (item)	0.21 (2)	0.28 (1)	0.22(1)	0.03 (12)	-0.33 (1)	0.14 (17)
Highest crit item invariance (item)	83 (26)			76 (11)		

Note. Based on the dataset with 27 items ($n = 73$). The scale ranges from 1 (this is less true) to 3 (this is often true), with a higher score indicating that the statements were easier to recognize (to be experienced more often), based on a free distribution. Bold text indicates a differentiation from the overall population (Table 3). Y= youth, Par=parents, Prof=professionals, TRYC=Traditional RYC, HG=home-like groups, FGH=Family-style group home.

the most difficult to recognize (e.g., Considering the place as home). The sensitivity scale consisted of 12 items which formed a moderate and reliable scale (H-coefficient = 0.43, rho = 0.86).

Item Ordering Between Subgroups

We found a difference in the item ordering between the perspectives of youth, parents, and professionals (see Table 4). For example, the item related to professionals' helping with school, work, or daily activities was easy for youth to identify but more difficult for parents. This means that this item was frequently mentioned by youth as something they experienced, while it was identified by parents as something that was less common for youth (given the other items). We found weak to moderate scales for separate subgroups (perspectives and care settings). The reliability for the family-style group homes was low (.39), so no further analyses were conducted on the overall sensitivity scale for family-style group homes. Item crit-values above 80 were found in all subgroups, meaning that a person with a high score on a difficult item did not evidently recognize an easy item.

Table 5. Statements and mean scores per item.

	Statement	M Overall n = 69	M TRYC n = 20	M HG n = 42	M FGH n = 7
1	I can discuss everything with the professionals	2.70	2.55	2.74	2.86
2	I do fun things with the professionals	2.48	2.55	2.55	2.71
3	I think every week here has about the same scheme	2.45	2.70	2.38	2.14
4	I see this place as home	2.06	1.60	2.19	2.57
5	The professionals listen to me	2.72	2.60	2.74	3.00
6	The professionals are my role models	2.38	2.30	2.38	2.57
7	I know the rules to follow here	2.67	2.75	2.60	2.86
8	I think the atmosphere here is the same as at a friend's house	1.72	1.35	1.88	1.86
9	The professionals think how I am doing is important	2.86	2.70	2.90	3.00
10	I have a good relationship with the other children who live here	2.20	2.05	2.21	2.57
11	The main focus here is on what I do well	2.41	2.05	2.52	2.71
12	My friends and family are welcome	2.81	2.45	2.95	3.00
13	I get support from professionals with my hobbies	2.45	1.95	2.67	2.57
14	I believe my parents are involved in making important decisions	2.52	2.50	2.57	2.29
15	I believe the professionals help me to communicate with my parents (or other important people)	2.54	2.70	2.43	2.71
16	I believe that professionals help me to communicate with friends	2.04	1.85	2.12	2.14
17	I can participate in the process of making important decisions in my life	2.62	2.15	2.81	2.86
18	I am being prepared here to become more independent	2.65	2.70	2.57	3.00
19	I always know who is looking after me	2.57	2.40	2.62	2.71
20	I have a place here where I can be alone	2.81	2.90	2.74	3.00
21	The focus here is on my needs	2.71	2.55	2.76	2.86
22	I have enough to eat and drink	2.88	2.80	2.90	3.00
23	I live near important people in my life	2.45	2.05	2.64	2.43
24	The professionals also help my parents with their problems	2.07	2.00	2.10	2.14
25	I can stay here as long as I need to	2.43	1.90	2.64	2.71
26	The professionals help me with school/work/daytime activities	2.59	2.15	2.64	3.00
27	I can choose what to do here in my free time	2.55	2.25	2.64	2.86

Note. The scale ranges from 1 (this is less true) to 3 (this is often true), with a higher score indicating that the statements were easier to recognize (to be experienced more often), based on a free distribution. TRYC=traditional RYC, HG=home-like groups, FGH=family-style group homes.

Table 6. Factors based on participants who ranked 27 statements.

Statements youth version	Youth 1	Youth 2	Parents A	Parents B	Parents C	Prof I	Prof II	Prof III
1 I can discuss everything with the professionals	<u>-1</u>	1	<u>-2</u>	<u>-1</u>	<u>2</u>	1	1	1
2 I do fun things with the professionals	-1	0	<u>-2</u>	-1	1	<u>-1</u>	0	1
3 I think every week here has about the same scheme	-1	-1	<u>-2</u>	<u>-1</u>	1	<u>2</u>	<u>-2</u>	<u>-1</u>
4 I see this place as home	<u>-2</u>	1	-1	<u>0</u>	-2	-1	-2	<u>-1</u>
5 The professionals listen to me	<u>-1</u>	1	1	<u>2</u>	0	1	1	<u>1</u>
6 The professionals are my role models	<u>-2</u>	-1	1	<u>-2</u>	1	<u>0</u>	0	-1
7 I know the rules to follow here	<u>1</u>	0	<u>2</u>	<u>0</u>	<u>2</u>	<u>1</u>	<u>-1</u>	<u>0</u>
8 I think the atmosphere here is the same as at a friend's house	<u>-2</u>	-1	<u>0</u>	<u>-2</u>	-2	<u>-2</u>	<u>-2</u>	<u>-2</u>
9 The professionals think how I am doing is important	2	2	1	1	1	2	2	2
10 I have a good relationship with the other children who live here	<u>0</u>	0	-1	-2	-1	-1	-2	-1
11 The main focus here is on what I do well	<u>-1</u>	2	1	1	<u>-1</u>	<u>0</u>	2	1
12 My friends and family are welcome	<u>1</u>	1	1	-1	<u>-1</u>	<u>1</u>	0	<u>0</u>
13 I get support from professionals with my hobbies	0	-1	-2	<u>0</u>	-2	-1	0	<u>-1</u>
14 I believe my parents are involved in making important decisions	<u>1</u>	-2	0	1	-1	0	<u>2</u>	0
15 I believe the professionals help me to communicate with my parents (or other important people)	<u>-1</u>	-2	<u>-2</u>	1	1	1	1	<u>-1</u>
16 I believe that professionals help me to communicate with friends	-2	-1	-1	-1	0	-2	-1	-2
17 I can participate in the process of making important decisions in my life	1	0	2	2	<u>-1</u>	<u>0</u>	<u>1</u>	<u>2</u>
18 I am being prepared here to become more independent	1	1	-1	1	0	<u>0</u>	<u>-1</u>	<u>2</u>
19 I always know who is looking after me	<u>0</u>	-2	<u>2</u>	0	0	0	<u>1</u>	0
20 I have a place here where I can be alone	<u>1</u>	0	<u>1</u>	1	2	1	<u>-1</u>	2
21 The focus here is on my needs	<u>0</u>	2	0	<u>2</u>	0	2	<u>2</u>	1
22 I have enough to eat and drink	<u>2</u>	0	-1	<u>-1</u>	<u>2</u>	<u>2</u>	0	0
23 I live near important people in my life	<u>2</u>	-1	<u>-1</u>	1	<u>1</u>	<u>-2</u>	<u>1</u>	-2
24 The professionals also help my parents with their problems	<u>0</u>	-2	<u>0</u>	<u>-2</u>	-1	-1	<u>-1</u>	-2
25 I can stay here as long as I need to	0	0	0	0	0	<u>-2</u>	0	0
26 The professionals help me with school/work/daytime activities	<u>0</u>	2	0	0	<u>-2</u>	0	0	<u>1</u>
27 I can choose what to do here in my free time	<u>2</u>	1	0	<u>-1</u>	0	-1	-1	0
% explained variance	22	21	20	16	18	22	20	18
Total explained variance		43			54			60

Note. The scale ranges from -2 to 2, where -2 means "this is the least true" and 2 means "this is the truest" within a weighted average forced distribution. Bold and underlined numbers indicate $p < .01$ and mean that these statements significantly distinguish within one perspective (i.e., viewpoints). The number of participants with a significant loading on a factor: youth:15/21, parents:32/34: 12/13, Professionals: 32/34. The correlations between factors within a perspective are overall relatively low: for youth 0.07, for parents between 0.02 and 0.12, and for professionals between 0.36 and 0.55.

Sensitivity Scale Differences Between Home-Like and Traditional RYC

The Mann-Whitney test results showed significantly higher sensitivity mean scores for people involved in home-like groups (HG) compared to those involved in traditional RYC (TRYC). These results hold for each perspective, namely youth (med = 22 in TRYC versus med = 29 in HG, $z = -2.57$, $n = 21$, $p < .05$), parents (med = 27 versus med = 35, $z = -2.27$, n

= 12, $p < .05$), and professionals (med = 28.5 versus med = 32.5, $z = -3.48$, $n = 32$, $p < .05$). Mean scores per setting for all statements are shown in Table 5.

Distinguishing Elements and Related Sample Characteristics

In order to gain insight into the elements distinguishing the participants' experiences of the living environment, the weighted average rankings (e.g., factors, viewpoints) were calculated. These rankings provide an overview of the arrangement of statements for each factor, and the distinguishing elements (statements) were used to interpret the factors (see Table 6).

Factors from the Youth Perspective

The first factor ($n = 8$), a weighted average ranking, conveyed a focus on elements of stability, autonomy, and daily structure (see Table 6; e.g., statement 23: position 2). Youth identified these elements as most true. For example, they emphasized the elements of living near important people in their lives, being prepared to become more independent, having parents involved in decision-making, and having enough to eat and drink. Most of the elements regarding the sensitivity of professionals were less recognizable for these youth (i.e., least true). Most of these youths were male (66.5%) and lived in home-like groups or traditional RYC (see Table 7). In general, 66.6% of all youth associated with traditional RYC belonged to this factor compared to 40% of youth in the home-like groups.

The second factor ($n = 7$) concerned the relationship of attachment with professionals and the group atmosphere. Youth emphasized elements such as feeling the place was a home, the professionals listened to them, and that professionals helped them with school, work, or daily activities. Less emphasis was placed on elements about parental involvement in decision-making. The youth related to this factor were mainly girls (83.3%) and lived in home-like groups or family-style group homes. Most of these youth had previous placements (71.4%). Of all youth in home-like groups and family-style group care, 33.3% were related to this factor, compared to none of the youth in traditional RYC.

Factors from the Parental Perspective

The first factor from a parental perspective ($n = 3$) highlighted certain elements of structure and sensitivity; for example, focusing on elements about their child knowing the rules to follow and professionals listening to their child. Autonomy was emphasized by these parents. The parents recognized, for example, that their children could participate in the process of making

Table 7. Descriptive statistics per factor.

	<i>n</i>	Sex % female	First Placement yes %	M Age (<i>sd</i>)	RYC settings: %TRYC %FGH	% Of total group (setting) %TRYC %HG %FGH
Youth						
Total Group	21	66.7	38.1	16.00 (1.95)	14.3 71.4	
Factor 1 Stability	8	37.5	50	15.38 (2.07)	14.3 25.0 75.0	40 66.7
Factor 2 Sensitivity	7	83.3	28.6	17.83 (1.33)	0 0 83.3 16.7	0 0 33.3 33.3
Parents						
Total Group	13		38.6	41.58 ^a (8.47)	46.2 46.2 7.7	
factor A Autonomy	3 ^b		0	44.00 (8.19)	33.3 33.3 33.3	16.7 16.7 100
Factor B Sensitivity & parental involvement	3		50	41.50 ^c (14.85)	33.3 66.7 0	16.7 33.3 0
Factor C Daily structure	5		40	38.80 (7.53)	80 20 0	66.7 16.7 0
Professionals						
Total Group	34			32.15 (8.86)	29.4 61.8 8.8	
Factor I Daily structure	11			28.45 (6.22)	72.7 27.3 0	80 14.2 0
Factor II Stability	9			32.11 (7.91)	10 90 0	10 42.8 0
Factor III: Autonomy	9			36.89 (12.69)	0 66.7 33.3	0 28.6 100

Note. TRYC=traditional RYC, HG=home-like groups, FGH=family-style group homes.

^a*n* = 12.

^bOne person is excluded from this descriptive analysis, as that person loaded significantly but negatively on this factor.

^c*n* = 2.

important decisions in life. Parents came from traditional RYC, a home-like group, or a family-style group home.

The second factor (*n* = 3) concerned the sensitivity of professionals and the perceived atmosphere. More than parents who were related to other factors, these parents emphasized that their children saw the place as home (most true). Furthermore, parental involvement in care was also emphasized. However, the structure of a care setting was not accentuated by these parents. Of all parents involved in home-like groups, 33.3% were associated

with this factor, compared to 16.7% of the parents involved in traditional RYC.

The third factor ($n = 5$) concerned a focus by parents on the structural elements of the care setting. These parents stated that there was enough to eat and drink in the care setting and that their children had a place to be alone. They further emphasized a few elements of sensitivity; for example, the statements “My child can discuss everything with professionals.” In addition, these parents did not emphasize their own involvement in care. Most of these parents belonged to the traditional RYC group, that is, 66.6% of the total group of parents who were associated with traditional RYC loaded on this factor, compared to 16.7% of parents associated with the home-like groups.

Factors from the Professional Perspective

The first factor from the professional perspective ($n = 12$) highlighted the structural elements of the care setting. For example, professionals indicated that young people had enough to eat and drink and that they had a place where they could be alone. In addition to the structure, some elements of sensitivity were highlighted, such as youth being able to discuss everything with them. Stability elements were less prioritized by these professionals. Of all the professionals involved in traditional RYC, 80% related to this factor, compared with 14.2% of the professionals from home-like groups.

The second factor ($n = 9$) was most associated with elements of sensitivity and stability; for example, elements about youth living close to important people in their lives. Elements of the structure were not emphasized by these professionals. Of all professionals involved in the traditional RYC, 10% loaded on this factor, compared to 42.8% of the professionals involved in home-like groups.

The third professional factor ($n = 9$) related to elements of sensitivity and autonomy, such as statements about youth being able to participate in the process of making important decisions in life and youth being prepared to become more independent. Elements related to parental involvement and structure were less prioritized. In general, 28.6% of the professionals involved in home-like groups and 100% of the professionals involved in family-style group homes loaded on this factor. None of the professionals who were on staff at the traditional RYC loaded on this factor.

Discussion

We found that youth, parents, and professionals identified, at least in part, most of the elements associated with a positive living environment in both alternative and traditional RYC settings. In support of our hypothesis, this study found that youth, parents, and professionals perceived more sensitivity

from professionals and experienced a more positive group atmosphere in home-like groups than in traditional RYC. This finding is consistent with previous findings that suggest small groups and long-term care contribute to a home-like environment and create opportunities for regular living (Huefner et al., 2018; Nijhof et al., 2020; Van Schie et al., 2020). For example, the home-like environment in alternative RYCs can be explained by the smaller number of young people in a facility which can lead to good relationships between young people because they move less (Ammerlaan et al., 2022; Nijhof et al., 2020). It can also be explained by more attention from professionals, as it is easier to focus on individual needs with a small number of young people in an RYC facility (Ammerlaan et al., 2022; Van Schie et al., 2020; van Schie et al., 2023). Traditional RYC is perceived as a temporary option, and this can create barriers for youth to develop relationships with professionals (Moore et al., 2018; Pinheiro et al., 2022; Rabley et al., 2014). Youth have indicated that a longer stay was needed to make the house their home and to develop relationships with professionals (Moore et al., 2018). This may explain the more positively perceived sensitivity and group atmosphere in home-like groups compared to traditional RYC, with home-like groups often characterized by an intention of long-term placement. Youth tend to form relationships of attachment with the professionals with whom they spend the most time (Rabley et al., 2014). These relationships may be subject to change over time; relationship building is a long-term process (Manso et al., 2008).

We were unable to examine statistical differences between family-style group homes (alternative RYC) and traditional RYC on the mean sensitivity scores because of an unreliable scale for the family-style group homes. In addition, we found that parents' ratings of the sensitivity elements were different from those of youth and professionals. This may be related to a gap in knowledge that parents may have while their child is living in RYC. Some aspects that may influence parental involvement and knowledge include parents' feelings (e.g., feeling bad during the visit), their relationship with their children, their opinion of the caregivers, and the limited time they spend with their children (Dalügge et al., 2021).

Another finding, which relates to the second research question, is that the living environments experienced were primarily differentiated by an emphasis on either sensitivity and group atmosphere, or on factual conditions, such as daily structure or stability. We found relatively consistent results for youth, parents, and professionals in this respect. Regarding the final research question, youth, parents, and professionals involved in traditional RYC tended to emphasize factual conditions, such as the daily structure, while people involved in alternative RYC tended to emphasize sensitivity, such as a sense of attachment provided by professionals. However, these findings did not apply to all individuals involved in home-like groups, family-style group homes or traditional RYC.

According to our findings and in light of Maslow's (1943) theory of human motivation, higher order needs (belongingness and psychological needs) were more often emphasized in alternative RYC settings, whereas youth, parents, and professionals in traditional RYC focused more on lower order needs (e.g., daily structure, stability, i.e., factual conditions). As stated by Maslow's framework, basic needs (physiological needs and safety needs) must be met before people can satisfy higher level needs (love and belonging, self-esteem, self-actualization). Thus, alternative RYC settings appear to provide more options for youth to meet higher order needs, such as greater sensitivity and group atmosphere, which may possibly lead to greater opportunities for youth to reach their full potential. Contrary to the traditional view of RYC (e.g., as only a temporary and undesirable option), these youth may view the RYC unit as their home.

Strengths and Limitations

There is a risk of overinterpretation of these findings, and the results should be considered preliminary, given the small sample size. This small sample size was due to the complex issues of youth in RYC (e.g., attachment issues) and the small number of youth in alternative RYCs (Leloux-Opmeer et al., 2016). A longitudinal design with multiple case studies was chosen to facilitate the researchers' ability to connect with youth and increase the willingness of youth to share their stories (Kendrick et al., 2008). To address the small sample size, we used a triangulation of techniques (MSA, Mann Whitney tests, and by-person factor analysis). The results were not contradictory but complementary, suggesting that alternative RYC settings provide more opportunities to experience a positive living environment than do traditional RYC. The emphasis on elements concerning the relation between professionals and youth seems promising, given that youth in RYC often suffer from complex problems, including attachment issues (Leloux-Opmeer et al., 2016).

In our sample youth in alternative RYC settings were older and had more out-of-home placements than youth in traditional RYC. The effects of the type of care are likely to be confounded by characteristics of the sample, including age and prior placements. Younger children may perceive their living environment more negatively than older youth; for example, they may be less likely to report having someone to talk to or having as much phone/e-mail contact with family as they would like (Southwell & Fraser, 2010). This may explain the lower sensitivity score for youth in traditional RYC, but these effects could not be examined due to the small sample size.

However, when focusing on parents and professionals, similar results were found. Previous research has also shown that having five or more previous placements is associated with negative perceptions of the living environment,

such as receiving less positive attention from professionals (Leipoldt et al., 2019). Youth with a long care history may feel rejected. These youth are more likely to be placed in alternative RYC. It seems promising that youth with a history of out-of-home care who are primarily placed in alternative RYC report more positive ratings of professionals' sensitivity and group atmosphere than youth without a history of out-of-home care who are primarily placed in traditional RYC.

Another limitation is that youth and parents were interdependent. We therefore conducted separate analyses, but the effects may be overestimated. For example, parents may have based their information on what they heard from their child. Another limitation is that the number of parents participating in the study was low, which may be due to the emphasis on parental involvement in only some facilities, as the percentage of the parents belonging to two specific facilities was rather high. The participation rate of parents in this study may be a result of the policy of the facility and the quality of cooperation with parents, and therefore, the results for parents may be biased.

Furthermore, multiple care facilities were combined into three care groups (settings); the traditional RYC, home-like groups, and family-style group homes, as the samples for each facility were too small to conduct analyses at the single facility level. However, these care facilities may differ in characteristics and quality of care, even for those grouped into the same settings. Some facilities accounted for more than 50% of the total group (e.g., home-like groups). Therefore, the effects of specific facilities may account for the overall effects of a care setting.

In addition, our study focused mainly on one concept of the living environment (sensitivity) whereas the living environment is a broader concept and includes elements such as parental involvement, autonomy, and stability (Ammerlaan et al., 2022; Jongepier & Struijk, 2008; Knorth & Harder, 2021; Nijhof et al., 2020; Ten Brummelaar et al., 2018; United Nations General Assembly, 2009; Van Schie et al., 2020).

This study, nevertheless, has several strengths. We used a multi-informant approach to explore experiences in RYC settings from the perspectives of youth, parents, and professionals. This study was also one of the first quantitative comparisons of alternative and traditional RYC settings in the Netherlands (Nijhof et al., 2020). Moreover, we used a triangulation of techniques to analyze our data, namely, the MSA, Mann-Whitney tests, and a by-person factor analysis. Together, these strategies led to complementary conclusions suggesting that alternative RYC settings provide opportunities to experience a positive living environment with sensitive professionals and a positive group atmosphere for youth with a history of out-of-home care.

Implications for Research and Practice

Future research should focus on qualitative information, especially from young people themselves, to further clarify the differences in experiences between alternative and traditional RYC settings. Possible differences between home-like groups and family-like group homes should also be considered. In addition, the qualitative information can be used to gain a deeper and more comprehensive understanding of the perceived living environment, that is, in terms of multiple living environment concepts (e.g., parental involvement). Additional elements that may explain differences across RYC settings, including organizational conditions (e.g., staff turnover, youth care policies), should be included in future research in order to explain youth experiences and differences across care settings.

The results of the current study may have implications for practice. The results support the idea that home-like groups and family-style group care can create circumstances that reflect home-like living in RYC, such as building sensitive relationships with caregivers. Our findings suggest that this may be possible even for youth with prior out-of-home placements, who may have more severe problems, may be more likely to experience a breakdown, and who in our sample are more likely to be placed in alternative RYC. One explanation for this may be that smaller groups may increase the amount of attention that youth have from professionals (Ammerlaan et al., 2022). Furthermore, the permanence may also be an explanatory factor. As recognized in the United Nations Guidelines for Alternative Care for Children (2009), when considering out-of-home care, due consideration should be given to ensuring a stable home and continuing relationships (Art. 12). The provision of individualized, long-term and small-scale residential care can be seen as a tool to achieve a positive living environment. We therefore recommend that policymakers and practitioners invest in alternative RYC settings that focus on providing a home-like environment, individualized care, and permanence for all youth in RYC.

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Appendix A

Method Mokken Scale Analysis

MSA is based on the following assumptions:

- (1) *One-dimensionality* means that items measure the same latent trait and indicates that items in a set share a common construct. In our study, the latent trait was the perceived quality of the living environment.
- (2) *Local independence* means that a participant's response to one of the items is independent of the responses to the other items conditional to the participant's position on the latent trait.
- (3) *Monotonicity of item response functions* means that the responses on the living environment dimension are a non-decreasing function of the latent trait. For example, if young people, Rick and Emily, differ on their perceived living environment, the person with the highest position on the perceived living environment has the greatest chance of scoring positively on an item (e.g., "I see this place as home").
- (4) *Non-intersection of response functions* means that participants with a low total score on the scale will positively respond to the easiest items on one latent trait. In our study, this meant that if a young person, Emily, scores positively on a difficult item (e.g., "I see this place as home"), there is a greater chance that Emily will also score positively on an easier item (e.g., "The professionals think how I am doing is important"), and this order of chances holds for all persons.

We constructed one or multiple scales measuring the living environment dimensions based on the evaluation of the H-coefficients, rho-scores, and crit-values. The H-coefficient for each item indicates whether the items satisfy the assumption of monotonicity (*Assumption 3*). The H-coefficient for the entire scale indicates the strongness of the scale. A H-coefficient below 0.3 indicates a poor scale, a coefficient between 0.3 and 0.40 indicates a weak scale, and above 0.4 a moderate scale. The item crit-values are diagnostic criteria and were used to evaluate the non-intersection of the response function (*Assumption 4*). Crit-values below 40 are satisfactory and indicate no violation of the assumption, between 40 and 80 are doubtful, while above 80 indicates a violation of the assumption. Once the item crit-values are satisfied, the reliability, rho, can be interpreted as Cronbach's alfa. A rho between 60 and 80 percent is considered a scale with low reliability and a rho higher than 80 percent indicates a reliable scale.