

EFFECTS OF PROGRAM DESIGN AND IMPLEMENTATION FACTORS ON  
CAMPERS' SENSE OF DAY CAMP AS A CARING COMMUNITY

by

Laurie P. Browne

A dissertation submitted to the faculty of  
The University of Utah  
in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

Department of Parks, Recreation, and Tourism

The University of Utah

May 2011

Copyright © Laurie P. Browne 2011

All Rights Reserved



## ABSTRACT

Caring communities support the healthy growth of young people by fostering caring one-on-one relationships as well as a sense of connectedness to the overall community. Through these mechanisms, caring communities are critical contexts for positive youth development. Day camps may be uniquely situated serve as caring communities, particularly through effective program design and staff implementation. Little is known about the ways these processes foster positive youth outcomes, especially youths' perceptions of a caring community. Therefore, the purpose of this study was to examine the effects of program design and staff implementation on campers' sense of day camp as a caring community.

A quasi-experimental, mixed repeated-measures design was used to assess the impact of program design and staff implementation on campers' sense of caring community. Caring one-on-one relationships between campers and camp staff facilitate a positive camper climate which in turn promotes an overall sense of connectedness to camp. Caring and connectedness, then, were the dependent variables in this study. The independent variables were a staff training targeting program design and a training targeting implementation. The design-based training oriented camp staff to a set of Caring Activities that staff members incorporated at camp. The implementation-based training focused solely on staff members' ethic of care. Three municipal day camps participated in this study, two of which received the trainings and one was a comparison

condition. Campers from all three sites completed the instrumentation three times during the summer: Time One assessed baseline levels of caring and connectedness and Times Two and Three assessed the impact of each of the training sessions.

Analysis of the dependent variables revealed three notable findings. First, a profile analysis of caring revealed a significant time by treatment interaction, which suggested that campers' sense of camp as a caring community depends on whether their counselors received staff training or not. A follow-up planned comparison on caring revealed a significant difference between treatment and nontreatment conditions at Time Two but not at Time Three. Profile analysis of connectedness revealed a significant but negative trend over time in both treatment and nontreatment conditions. The findings and their implications for caring communities are discussed.

To Logan, Emilia, and Elliott: for giving life to the concept of caring.

## TABLE OF CONTENTS

ABSTRACT.....	iii
LIST OF TABLES.....	viii
LIST OF FIGURES.....	ix
ACKNOWLEDGMENTS.....	ix
Chapter	
I. RATIONALE.....	1
II. LITERATURE REVIEW.....	8
Caring One-on-One Relationships.....	15
Connectedness.....	25
Program Design and Implementation Factors.....	40
Summary.....	60
III. METHOD.....	63
Setting.....	63
Participants.....	65
Measurement.....	66
Procedures.....	68
Data Analysis.....	79
Summary of Methods.....	82

IV.	RESULTS.....	84
	Data Cleaning and Screening.....	85
	Descriptive Statistics.....	86
	Assumption Testing.....	87
	Hypothesis 1.....	89
	Hypothesis 2.....	95
	Analysis of Treatment Fidelity.....	96
	Summary of Results.....	100
V.	DISCUSSION.....	102
	Summary of Key Findings.....	104
	Implications for Caring Communities.....	105
	Limitations.....	116
	Future Directions.....	119
	Implications for Practice.....	120
Appendices		
A.	TYPICAL DAILY CAMP SCHEDULE.....	122
B.	CAMP INSTRUMENTATION.....	124
C.	TREATMENT TIMELINE.....	127
D.	CARING ACTIVITY CARDS.....	129
E.	OUTLINE OF STAFF TRAINING SESSIONS.....	136
F.	STAFF INTERVIEW SCHEDULE.....	139
G.	CAMPER AND STAFF CONSENT DOCUMENTS.....	141
H.	STAFF INSTRUMENTATION.....	149
	REFERENCES.....	154



## LIST OF TABLES

Table		Page
1.	Intervention Timeline.....	75
2.	Breakdown of Sex by Site.....	86
3.	Breakdown of Ethnicity by Site.....	87
4.	Breakdown of Age and Years at Camp by Site.....	87
5.	Pearson Correlations Among Dependent Variables.....	88
6.	Descriptive Statistics for Means by Site.....	89
7.	One-Way ANOVA Results: Time By Treatment on Caring.....	91
8.	Results of Planned Comparisons: Comparing Treatment and Non-Treatment Conditions on Caring at Times 2 and 3.....	92
9.	One-Way ANOVA Results: Time By Treatment on Connectedness....	94
10.	Results of Planned Comparisons: Comparing the Two Treatment Conditions on Caring at Times 2 and 3.....	96

## LIST OF FIGURES

Figure		Page
1.	Profiles of Treatment and Nontreatment Conditions for Caring.....	92
2.	Profiles of Treatment and Nontreatment Conditions for Connectedness.....	94

## ACKNOWLEDGEMENTS

Graduate school is a lot like camp: it is an immersive experience that is, in some way, separable from normal life. Like camp, graduate school is rich in opportunity to explore, test, fail, and triumph. Graduate school is altogether trying and rewarding, much like a high ropes course or a wilderness canoe trip. We subsist on substandard food in graduate school, and, like at camp, poor health habits simply serve to lend color to the drama unfolding in the foreground. Camp friendships are the most poignant feature in this display and graduate school provides no less fodder for meaningful connections. So, it is with great sentiment that I now catalog graduate school as an experience akin to camp.

Thanks first to my family, namely my husband Chris and our three children, Logan, Emilia, and Elliott. I doubt you'll ever find reason to brag about the fact that you were all born while I was in graduate school, but I do hope that you will forgive the countless days and evenings when mommy was buried in work or too tired to play. I started and ended this project with you in mind and I look forward to applying what I've learned along the way to your own camp experiences. Chris, you are my foundation and my one and only camp love. I can only hope to support you in the ways you have supported me throughout this process. I must also thank my own mom and dad, for fixing my gaze on the very highest of accomplishments when I was very young. It is now my task to instill a similar commitment to excellence in my own children.

And then there are my cabin mates: Melissa, Melissa, Keri, Jeff, Adrienne, Jeremy, and the other phenomenal graduate students I have come to love during this process. You are dear friends and colleagues, and I look forward to writing, researching, teaching, and maybe even recreating with all of you even after we've parted ways. I was always a wreck boarding the bus at the end of the camp session, and I feel much the same way now. So, like we say when we leave camp, "This is not good-bye, it is so long for now."

My committee provided a remarkable degree of enthusiasm and genuine interest in this study, and for that I am truly grateful. Drs. Sibthorp, Paisley, Dustin, and Bialeschki are the camp counselors I will remember for their support and mentorship. I especially appreciate your willingness to consider me a peer rather than a student. Drs. Newton and Ellingson brought great expertise and even a bit of levity during the tense moments of the dissertation process. Thanks to each of you; I hope to carry forward your mentorship in my future academic work.

I owe tremendous thanks to YouthCity, namely Andrew, Steve, and John, as well as their exceptional summer staff for participating in this study. Salt Lake City is a better place because of the work you do, and I was honored to be granted access to your programs and processes during this study. Your participation throughout this project is a model for community-based research and it is my hope to continue to build collaborations with outstanding programs such as YouthCity in the years to come. Thank you for your openness and for serving the youth of Salt Lake City in a truly meaningful way.

## CHAPTER I

### RATIONALE

Caring communities support the healthy growth of young people by fostering caring one-on-one relationships as well as a sense of connectedness to the setting as a whole. Through these two mechanisms, caring communities are critical contexts for positive youth development. Early in life, the positive relationships that comprise a caring community support the child's natural growth trajectory, providing social and emotional nutrients that affect development throughout the lifespan. There are several factors that determine the extent to which a child feels cared for in contexts such as school and community programs, and chief among them is the connection between the child and adult. Caring youth-adult relations begin when a care-giver desires to adopt the other's needs as his or her own (Noddings, 2003). This desire then forms an ethic of care that guides a bidirectional exchange of positive affect, and when this exchange results in a caring relation, the care-giver and recipient benefit in unique but equally impactful ways. Contexts characterized by an ethic of care foster supportive youth-adult relationships which, in turn, set the stage for positive interactions among the young participants themselves. Positive adult- and peer-relationships are one route by which youth may become connected to the pro-social norms of a given setting (Libbey, 2004).

Caring communities, then, promote positive youth development both through caring one-one relationships as well as through connectedness to the setting as a whole.

Caring relationships and overall connectedness positively affect youth at each developmental stage (e.g., Resnick, Bearman, & Blum et al., 1997; Rice, Kang, Weaver, & Howell, 2008), and the importance of caring communities, which encompass both caring and connectedness, in adolescence is particularly notable. In the school setting, for example, fourth grade students who feel cared for by their teachers report lower trait anxiety, anger, and higher coping skills than their peers who do not feel cared for by a particular teacher (Rice et al., 2008). Connectedness to school similarly contributes to desirable outcomes such as improved mental health (Shochet, Dadds, Ham, & Montague, 2006), avoidance of health-risk behaviors and behavioral problems (Loukas, Ripper-Suhler, & Horton, 2009; McNeely & Falci, 2004; Resnick et al., 1997), and academic achievement (Catalano, Haggerty, Oesterle, Fleming, & Hawkins, 2004) among middle school children. Given the breadth of evidence linking caring and connectedness to positive youth outcomes, it is not surprising that caring communities are contexts that protect youth from negative environmental influences (Resnick et al., 1997).

Summer camp is a setting comprised of unique relationship-building opportunities and is therefore ideally situated to serve as a caring community. First among these unique opportunities are the small camper groupings which, in many camp settings, offer ample time for positive interactions between the camper and the counselor, as well as among campers within the group (Gillard, Witt, & Watts, 2009). Small groups, such as cabin groups, are considered an important feature of positive youth development settings in general (Roth & Brooks-Gunn, 2003). The second relationship-building feature unique

to camps is the nature of the camp staff, many of whom are young and, as such, share common interests with the campers they serve (Paisley & Powell, 2007). Given these features, campers often report that they relate to their counselors differently than they do to teachers or parents (Gillard et al., 2009). In addition to relationship-building opportunities, many camps have overarching traditions and norms that may further characterize camp as a standalone community (Garst, Franz, Baughman, Smith, & Peters, 2009). Opportunities to form meaningful relationships within a camp community, together with a host of other features of the camp setting, represent the unique way camp might foster caring community.

The beneficial effects of the camp experience include intra- and interpersonal camper outcomes, several of which may result directly from the unique relationship-building opportunities at camp. Strengthened moral values and social competence, for example, are among the documented outcomes of the camp experience (Bialeschki, Henderson, & James, 2007; Thurber, Scanlin, Scheuler, & Henderson, 2007) that are also important facets of caring relationships (Noddings, 2003). With respect to connectedness, research identifying camper outcomes such as self-esteem (Marsh, 1999), teamwork (Toupençe, 2003), and social skills (Dworken, 2001; Sharilla, Gass, & Conlon, 2008) lends support to the notion that camp might be an ideal site for both caring and connectedness. To date, though, much of the extant literature specific to camp focuses on camper outcomes; therefore, little is known about the camp mechanisms that foster camper growth.

A positive youth development perspective offers insight into the mechanisms by which youth programs might promote intended outcomes. As a conceptual framework,

positive youth development refers most broadly to the assumption that youth are inherently prone towards healthy growth and development (Gambone, Connell, Klem, Sipe, & Bridges, 2002; Pittman, Irby, Tolman, Yohalem, & Ferber, 2005). This assumption, which contrasts with the traditional “youth at-risk” orientation, serves as a basis from which youth-serving programs can design experiences that foster healthy growth. Developmental researchers generally agree that effective youth programs include a variety of features in the areas of program goals, atmosphere, and activities (Roth & Brooks-Gunn, 2003). Eccles and Gootman (2002) identify seven specific program features that stem from these broad categories, each of which can be described as a program design factor (e.g., stated goals and skill-building activities), or a factor related to ways staff members implement the program (e.g., organizational climate). Put together, design and implementation factors represent two mechanisms that impact positive youth development in a given setting.

Design factors represent the overarching goals and the structured activities within a positive youth development program. Goals and activities, particularly activities that are designed specifically to achieve a developmental outcome, are critical aspects of a positive youth development program. In addition to providing a link between program goals and the participant, structured activities also form a program framework that should remain consistent across individual staff implementation styles (Roth & Brooks-Gunn, 2003). The Caring School Communities Program (CSC), for example, is a curriculum designed to promote caring both within one-on-one relationships and within the overall school climate (Battistich, Solomon, Watson, & Schaps, 1997). This program, which is based largely on Noddings’s (2003) care theory and the positive youth development



framework, facilitates caring community through classroom, school, and home-based activities that foster positive interactions between students and their peers, teachers, and families. Since its initial application, researchers have demonstrated numerous positive effects of the CSC program, including student growth in the areas of social and personal skills (Battistich, Schaps, & Watson, 2004), moral and ethical development (Battistich, Solomon, & Watson, 1998), avoidance of risky and maladaptive behaviors (Battistich, Schaps, Watson, Solomon, & Lewis, 2000), and overall connectedness to school (Battistich et al., 2004). Furthermore, the CSC demonstrates a high degree of implementation fidelity (Domitrovich & Greenberg, 2000), which suggests that the curriculum is somewhat robust to individual implementation styles. Given the success of the CSC in schools, it is likely that a similarly designed camp program might offer a means by which a camp might foster a sense of camp as a caring community.

Despite their robust nature, design factors may depend on the ways individual staff members implement the structured activities. Frontline staff, such as camp counselors, interact closely with youth during structured and unstructured time in a youth program, yet each individual staff member brings personal attributes that characterize the ways they connect to program participants. Staff implementation styles, then, are likely to offer additional implications for campers' perceptions of camp as a caring community. Specifically, implementation factors refer to those qualities of a program that depend on the individual staff member, such as the social norms and organizational climate within the program (Eccles & Gootman, 2002). When a staff member implements an activity, he or she contributes to an overall program atmosphere which serves as a lens through which youth experience the structural aspects of the program

(Roth & Brooks-Gunn, 2003). For this reason, Caldwell (2005) contends that staff training is essential to ensuring that design factors are implemented in a positive and supportive way. Therefore, training staff in the mechanisms of care, such that they will implement camp activities in a caring way, may be a promising approach to creating a sense of camp as a caring community.

Despite the demonstrated successes of a caring community curriculum such as the CSC, it is possible that neither design factors nor implementation factors are effective mechanisms for promoting caring at camp. Two sources of ineffectiveness are possible. At the person level, the degree to which a young person might recognize and respond to the ethic such as care must be considered. Kohlberg (1984) suggests that youth are capable of engaging in cognitive processes of increasing complexity as they mature, and moral reasoning, or the ability to adopt and engage a personal sense of right and wrong, is only possible in the later adolescent years. Noddings's (2003) conception of care, however, contends that care is not an act of reason or cognitive will, but rather an emotional sense of duty towards a related other; thus, young people can and should learn how to give and receive care. At the context level, on the other hand, camp might represent a discreet experience in which the time frame is simply too short to engender a perception of care and connectedness in young people. Camp programs can range from a few days to several continuous weeks and are therefore likely to offer a wide range of adult-youth contact opportunities that impact the degree to which meaningful connections form (Roth & Brooks-Gunn, 2003). Furthermore, the extent to which camp experiences transfer to the home environment is a common concern in camp and related outdoor settings (Bialeschki et al., 2007; McKenzie, 2000) and it is possible that developmental

gains at camp are too situationally-defined to effectively impact youth's long-term development. Sufficient evidence exists, however, to support the notion that camp learning is lasting (e.g., Henderson, Whitaker, Bialeschki, & Thurber, 2007), even when the camp experience is as short as one week. Given the oftentimes short nature of the camp experience, it might be especially critical to identify strategies by which camps can promote caring communities in a short amount of time. Regardless of the length of the experience, caring communities in general support growth that transfers across developmental contexts (Wentzel, 1997). The purpose of this study, then, was to examine the effects of program design and staff implementation factors on campers' sense of day camp as a caring community.

## CHAPTER II

### REVIEW OF THE LITERATURE

Caring communities support the healthy growth and development of young people, yet changing home and school contexts may fail to foster the caring connections between youth and adults that are essential to these positive environments. The Forum for Child and Family Statistics (2009) reports that 33% of children live with either one or neither natural parent and the percentage of children living with married parents has declined dramatically in the last 20 years. The number of homes maintained by two working parents, on the other hand, continues to increase, suggesting that children today spend less time with their parents than in the past. Changing classroom environments might likewise inhibit opportunities for meaningful child-adult interactions. The National Center for Educational Statistics (2009) reports that the average public school class size in the United States is roughly 23 students for every one teacher, a number that is expected to rise as schools face greater budget restrictions in the years to come (Quaid, 2009). Increased class sizes place a substantial demand on teachers, limiting their ability to interact meaningfully with each individual student and promote positive interpersonal connections. Considered together, decreased child-adult interaction at both home and school suggests that today's children simply may not have adequate opportunities to feel part of a caring community.

The beneficial effects of caring communities appear to extend across each developmental stage (e.g., Resnick et al., 1993; Rice, et al., 2008); however, the importance of caring child-adult relationships and interpersonal connectedness is particularly notable in the early to mid-adolescent years. In the school setting, for example, fourth grade students who feel cared for by their teachers report lower trait anxiety, anger, and higher coping skills than students who do not feel cared for (Rice et al., 2008). Later, in the middle school, connectedness in general positively affects students' mental health (Shochet et al., 2006), minimizes health-risk behaviors and behavioral problems (Loukas et al., 2009; McNeely & Falci, 2004; Resnick et al., 1993), and contributes to overall academic success (Catalano et al., 2004). Interestingly, interventions designed to foster caring student-teacher relationships specifically appear to be less effective among populations with a history of problem behaviors, poor mental health, or experiences with victimization (McNeely & Falci, 2004; You, Furlong, Felix, Sharkey, & Tanigawa, 2008), which suggests that caring relationships may fail to impact students who have already engaged in (or been the recipient of) harmful behavior. Given this evidence, the close relationships and overall interpersonal connectedness that characterize caring communities are considered factors that protect youth from undesirable outcomes (Resnick et al., 1993).

With these outcomes in mind, many researchers and school administrators focus on the ways caring communities promote youth development. Two facets of caring communities appear to contribute to youth's experiences within these positive environments. When young people feel cared for in their one-on-one interactions with adults, they are more likely to exhibit motivation in school (Wentzel, 1997, 1998) and

overall academic success (Klem & Connell, 2004) and are less likely to engage in unhealthy behaviors (McNeely & Falci, 2004). Caring communities, on the other hand, which are settings characterized both by caring youth-adult relationships and by interpersonal connectedness, are also known to promote developmental outcomes. In the sport setting, youth who feel like they are a part of a caring community are more likely to report domain-specific motivation (Newton, Watson, Gano-Overway, Fry, Kim, & Magyar, 2007); likewise, caring school communities promote social adjustment (Battistich, Solomon, Kim, Watson, & Schaps, 1995) and discourage problem behaviors (Battistich et al., 2000). Caring School Communities targets this end through one-on-one relationship-building activities as well as through whole school culture-building activities. This combination of intentionally designed activities represents one way school and out-of-school settings might create a caring community.

Summer day camps represent an out-of-school-time setting that may be uniquely-suited to creating a caring community. Camps in general comprise a variety of features that differentiate them from traditional out-of-school time settings such as after school programs and sports leagues. Most basically, camp is a “sustained experience, usually in a natural setting that promotes a ‘sense of community’ or ‘family’” (Bialeschki, Henderson, & James, 2007). However, the degree to which a specific camp is a sustained experience or based in nature often depends on whether it is a day camp or a resident camp.

Day and resident camps are often combined when discussing the overall camp experience, yet the differences between these two settings are worth consideration. The primary feature separating day camps from resident camps is the length of time a camper

spends at a given camp. Day camps, unlike traditional resident camps, operate exclusively during weekday hours and do not typically include the nighttime and mealtime experiences that characterize residential camps. Evidence suggests that informal time, such as the time spent with peers and counselors during meals and in the evening, is a key mechanism in the camp experience (e.g., Gillard, Witt, & Watts, 2009; Hough & Browne, 2009;), which suggests that the temporal structure of day camps may limit the development of camper outcomes. In addition to providing ample informal time, many resident camps are also located in natural settings that are located some distance away from the campers' home environment. While nature is often identified as an important feature of the camp experience (e.g., Browne & Bialeschki, 2000), it is a feature that is not ubiquitous across all camps. Many day camps, for example, are based in urban settings and campers in these settings likely interact with nature differently than campers in resident camp settings. Day camps, given their physical location and typical timeframe, may represent a different form of a camp experience; however, the extent to which these differences foster unique youth outcomes is unknown.

In general, though, the camp experience is known to foster an array of positive youth development outcomes. Descriptive studies of the camp experience depict camp as a place of comfort and self-discovery (e.g., Brannan & Fullerton, 1999; DeGraaf & Glover, 2002; Scanlin, 2001), while experimental investigations report that camp experiences contribute towards campers' self-concept (Chenery, 1981), self-esteem (Marsh, 1999), social skills (Dworken, 2001; Sharilla et al., 2008), and teamwork (Toupençe, 2003). In 2005, the American Camp Association embarked on a large-scale attempt to capture the outcomes of the camp experience. Over 80 day and resident

camps across the United States participated in this study, resulting in approximately 5,000 youth, staff, and parent participants, each offering their perceptions of the ways campers grow from the camp experience. Like the smaller studies preceding it, the ACA outcomes study (2007) documented camper growth in both intra- and interpersonal domains, such as personal responsibility and friendship. In addition to supporting previous camp-related research, this study also helped situate day and resident camps within the larger context of positive youth development programs (Bialeschki et al., 2007). Given its history as a youth development setting, then, camp is well-situated to promote the meaningful relationships that are central to a caring community.

In the effort to better understand the mechanisms by which camps promote positive youth development, camp researchers now focus on the features of camp experience that contribute toward camper outcomes. For example, Gillard, Witt, and Watts (2009) used in-depth interviews and observations in order to examine the change processes within a camp for youth with HIV/AIDS. Caring relationships with counselors and unstructured “hang-out time” were among the camp features campers identified as central to their growth at camp. Prior to this study, De Graaf and Glover (2002) suggested that camp fosters growth simply because it is different from typical home environments, specifically with respect to youth-adult relationships, the natural environment, and learning opportunities; which, according to these authors, give campers the freedom to be themselves. Researchers in similar settings, such as wilderness therapy (e.g., Nadler, 1993) and adventure education (e.g., Walsh & Golins, 1976) propose similar participant-, staff-, and setting-level mechanisms that foster growth in young people.



One particularly notable mechanism consistently identified in literature specific to these settings, as well as in the literature related to out-of-school-time settings in general, is the small youth-adult group. Unlike the typical classroom, which can contain twenty or more students under the supervision of a single teacher, camp and related youth program groups often limit group size to 8 to 12 campers with one or more counselors (Grossman & Bulle, 2004). Small groups at camp allow greater opportunities for meaningful interaction among campers and with a camp counselor which, in turn, contributes toward campers' perceptions of social capital (Colyn, DeGraaf, & Certan, 2008; Yuen, Pedlar, & Mannell, 2005), social skill development (Sharilla et al., 2008) and overall sense of community (Colyn et al., 2008). In the youth development literature, interpersonal outcomes such as these are often defined similarly as connectedness, or one's relationship to the setting as a whole (Blum & Libbey, 2004). Feelings of belonging to a small group also appear to mediate a positive connection to context in general (Battistich et al., 2004); therefore, small camp groupings represent a mechanism through which campers are likely to develop a sense of caring community.

Much of the literature on caring communities identifies the importance of both youth-youth as well as adult-youth relationships (e.g., Battistich et al., 2004; Klem & Connell, 2004; Libbey, 2004); however, the connections between youth and adults may be particularly meaningful (McNeely & Falci, 2004). Adult mentors, especially the mentors with whom young people perceive to be similar in some way, help them to explore personal interests and navigate complicated peer relationships (Larson, 2006; Rhodes, 2004). "Very important nonparental adults," when they support youth's personal interests and developmental needs, play an important role in a young person's life, and,

perhaps for this reason, young people tend to seek and form close relationships with adults on their own volition (Greenberger, Chen, & Beam, 1998). At camp, many staff members serve as very important nonparental adults to the campers they serve, as evidenced by the volume of camp research focused solely on camp staff. Boffey and Overtree (2002), for example, capture that centrality of camp staff in their article “Life Changers.” Camp staff members, to these authors, change campers’ lives when they offer love, humor, forgiveness, honesty, humility, encouragement, generosity, and integrity; in other words, camp counselors promote growth by extending care to their campers. Together with small camper-staff groupings, then, close camper-staff relationships represent another camp mechanism likely to foster a caring community.

These features work in concert with other unique camp mechanisms to promote a sense of caring community; yet, day camps in particular tend to be short-term experiences that might not allow enough time for caring communities to develop. This feature might have particular implications for caring youth-adult relationships. Research in the area of mentorship suggests that youth-adult relationships sustained over time effectively buffer negative pressures more so than less consistent or short-term relationships (Rhodes, Spencer, Keller, Liang, & Noam, 2006). In her qualitative investigation of parents’ and students’ perceptions of caring teachers, Tarlow (1996) found that time (e.g., teachers who are available for one-on-one interactions) and “being there” (e.g., teachers who are receptive to and committed to meeting the students’ needs) were among the most common characteristics identified by both parents and students. Caring, by Noddings’s (2005) definition, is a relational ethic that forms over time: “Children need time to settle in, to become responsible for their physical surroundings, to take part in maintaining a

caring community” (p. 66). The discreet nature of the camp experience, especially the day camp experience, might simply not allow enough time for this to occur.

On the other hand, the condensed timeframe makes day camp an accessible option for a large number of children each year and, furthermore, camp has several inherent features that may promote caring community particularly well. If day camp is to be a caring community, it is critical that day camp researchers and administrators understand the factors that influence the ways campers interact with their counselors and connect to the setting as a whole.

In the following section, the notion of caring community is explored through its two primary mechanisms. First, Noddings’s (2003) notion of caring will serve as the theoretical basis that explains the nature of caring youth-adult relationships. Connectedness is then reviewed, particularly with respect to a young person’s relationships to a setting as a whole. These concepts are then combined to construct a conceptual framework for caring community. Following a review of the literature related to this concept, two mechanisms, program design and staff implementation, are explored in an effort to better understand the ways day camps might effectively foster a sense of camp as a caring community.

### **Caring One-on-One Relationships**

Caring communities are characterized, in part, by the close connections between youth and adults. From the first moments of life, caring relationships are among the critical nutrients supplied by the external world to support innate growth trajectories. Person-to-person interaction is widely accepted as a key source of healthy developmental

support, especially when these interactions are warm and supportive. Caring, to theorist Nel Noddings (2003), is the ethic that guides and propels the bidirectional exchange of warmth and support between two people. Caring, from this perspective, is also critical for the healthy growth and development of young people, and research specific to school and out-of-school settings supports this claim.

In the school setting, students who describe their teachers as caring are more likely to demonstrate increased motivation (Wentzel, 1997, 1998), academic success (Klem & Connell, 2004), and healthy behaviors (McNeely & Falci, 2004). More broadly, caring climates, or settings characterized by an overarching culture of care, support youth's domain-specific motivation (Newton et al., 2007) and social adjustment (Battistich et al., 2004), while discouraging problem behaviors (Battistich et al., 2000). Within a caring climate, caring relationships with adults specifically may protect young people from negative environmental influences (Reznick et al., 1997). In the following section, Noddings's (2003) ethic of care and its relation to youth development is explored through the interrelated processes of giving and receiving care. This review of the philosophical underpinnings of both processes will serve for construct one of the key facets of caring community.

### **Giving Care**

Caring is an interpersonal exchange and an understanding of the psychosocial concept of human relation is a necessary before examining the ethic of care. The focus of the current section is to address the following questions: What, specifically, compels the care-giver to enter into relation with one in need of care? Secondly, what binds a care-

giver to the one cared-for such that this behavior is compelled by a genuine desire to care? In short, relatedness, or the basic human need for interpersonal relation, may provide a foundation from which the mechanism of extending care can best be understood.

The factors that compel a care-giver to extend care are often likened to the mother-child relation, a relation that forms because the mother has an innate biological and psychological connection to her child. Nonfamilial relations might mirror the mother-child relation, yet the reasons why teachers, mentors, and adult program leaders enter into a caring relation with a child are less intuitive. Noddings (2003) suggests that the magnet drawing a care-giver to the one to receive care is a basic human need for interpersonal connection. Like the physical needs of food and shelter, psychological needs are those nutriments thought to facilitate optimal human functioning (Deci & Ryan, 2002). The need for connectivity is described both as relatedness (Deci & Ryan, 2002) and belonging (Baumeister & Leary, 1995), both of which similarly describe peoples' innate social tendency. Relatedness is specifically defined as a person's basic human need to achieve a balanced exchange of affect with people who are thought of as similar and important (Deci & Ryan, 2002). From this perspective, teachers and other non-familial care-givers enter into a caring relation with the one in-need in order to satisfy this proclivity which, in effect, provides a foundation for the caring relation.

In addition to satisfying this need, the care-giver extends care also because he or she desires to do so, a phenomenon described by Noddings (2003) as an *ethic of care*. An ethic, on its own, represents a personal belief, or, in Noddings's (2003) words, "a moral sense of duty." From this perspective, caring is compelled by the desire to do what

is *right* but not necessarily *just*. The distinction between the concepts of *right* and *just* is important. Actions done for the good of the one-cared for do not necessarily adhere to the rules of justice, which require acting for the good of the greater order. In other words, caring for one person might not be right for all people. Noddings (2003) refers to the justice orientation as *aesthetical caring*, or “caring about things and ideas” (p. 21).

Hult (1979) takes a similar approach by differentiating between “caring about” and “caring for.” Like Noddings’s notion of *aesthetical caring*, Hult contends that one might *care about* an idea or person. Hult, however, further differentiates between these concepts by assigning feeling, or emotional investment, exclusively to the process of caring about. In other words, one might *care about* a person just as he might *care about* an idea for, in both cases, care is rooted in an emotional commitment to the person or idea. *Caring for*, on the other hand, requires some degree of action originating in the emotional valuation that characterizes *caring for* (Hult, 1979). One cares for a person (or idea or even an object, according to Hult) by acting on the feelings that compel the caregiver to care about.

Of further importance here is the universal nature of the aesthetic and ethical orientations. Whereas *aesthetical caring*, or *caring about*, applies across time and circumstance, ethical caring may not necessarily apply from one person to the next or even from one moment to the next. Here in lies Noddings’s (2003) assertion that women, by their nature, employ ethical caring more readily than men who tend more towards a universal or generalized form of *aesthetical caring*. This distinction was first made by Gilligan (1982), who claimed that women engage a sort of *moral feeling* that differs from the masculine tendency towards *moral reasoning*. Moral reasoning, from Gilligan’s

perspective, is the antithesis of Kohlberg's (1984) stages of moral development, which centralize reasoning as the foundation of morality. Noddings does not delineate forms of caring along gendered lines; however, from her perspective, caring may be more innate for some than for others.

Based largely on Gilligan's work, Noddings (2003) separates caring into natural caring (e.g., the caring innate to mothers) or an ethic of care. Ethical caring, specifically as it relates to teachers and other nonfamilial adults, is the primary focus of Noddings's work. Fundamental to ethical caring, just as natural caring, is a moral commitment to the one in-need rather than to justice or rule. In other words, the ethic of care compels the care-giver to desire to do what is best for the one in need rather than to do what is best for the greater good. To Mayeroff, (1971), this commitment to the one in need (instead of the greater good) is compelled by the care-giver's "trust in the other's capacity to grow" (p. 468).

From this ethical desire to do what is best for the one in-need, the care-giver engages two simultaneous caring processes. First, the care-giver receives the needs of the other through open and unbiased pathways; a state Noddings (2003) refers to as *engrossment*. Central to engrossment is the degree to which the other's needs are received in their authentic state; in other words, the care-giver must be "sufficiently engrossed in the other to listen to him and to take pleasure or pain in what he recounts" (Noddings, 2003, p. 19). Insufficient attention, on the other hand, results in a biased vision of the other's needs which may result in a failure to truly receive those needs. To Hult (1979), though, the intimate knowledge necessary to receive the needs of the one in-need is unrealistic in most non-familial settings, such as a typical school classroom.

Engrossment is achieved more realistically when it is founded in the teacher's trust in students in general rather than a focus on an individual student. Either way, genuine presence and receptivity deliver the other's needs into the very being of the care-giver such that the other's needs displace any preconceived judgments the care-giver may hold.

Displacement represents the second mechanism essential to an exchange of care. Once the care-giver becomes sufficiently engrossed in the other, she may then adopt the other's needs as her own. In Noddings's (2003) words, *motivational displacement* results when the care-giver's "motivational energies flow toward the one in need" (p. 33). An engrossed care-giver directs thought and action toward the cared-for believing that "when the other's reality becomes a real possibility for me, I care" (Noddings, 2003, p. 14). Propelling this shift in motivational flow is the ethic of care, or the sense of duty toward the one in-need. Through displacement, the ethic here extends not only to the one cared-for but flows back again to the care-giver. The care-giver might say: I want to care because, in doing so, not only will you realize your potential, but I too may realize my own (Noddings, 2003). In combination, engrossment and motivational displacement work simultaneously to open the pathways of receptivity through which the care-giver may enact the moral desire to satisfy the other's needs.

The desire to care, as it passes through the pathways opened by engrossment and motivational displacement, results in a caring action that must be perceptible to the one cared-for. Two points require emphasis here. First, caring, according to Noddings (2003), always begets *action*, yet this action is not necessarily visible or physically observable. Although Hult (1979) contends that the act of caring must positively affect the person, object, or idea in some way, Noddings focuses more on inner commitment in



which the care-giver resolves to satisfy the other's needs for their benefit. This commitment need not physically demonstrate caring but will, in some way, reflect the care-giver's *attitude of care*. This attitude is the second point of emphasis. The caring attitude tells the one cared-for that the care-giver comes in warmth and love rather than judgment or motive. From the care-giver, this attitude emerges from the caring ethic described earlier, allowing the cared-for insight into the care-giver's intention. Together, the care-giver's inner commitment toward the one in need and the cared-for's subsequent perception of a caring attitude form the action that binds the caring relation.

The caring relation may resemble empathy in several ways and it is important to consider the ways caring and empathy differ. Both care and empathy, at their core, require a certain degree of relation between two people and, furthermore, emerge from what Noddings (2003) refers to as an asymmetric relation. In other words, both require some degree of need in one party and the desire to help (and a capacity to help) in the other. Empathy, however, requires the act of perspective taking, which involves, as Noddings (2003) describes, "stepping into the other's shoes" (p. 30). An empathic person might ask how the other person (the one in need) might respond to the given situation and employ the other's perspective to guide action. Caring, on the other hand, does not cause the care-giver to adopt the other's perspective, but rather asks the care-giver to absorb the other's needs as his or her own. In Noddings's (2003) words, "I receive the other unto myself, and I see and feel with the other. I become a duality" (p. 30). Empathy, from this perspective, might be a reasonable practice for non-familial care-givers because it does not require the care-giver to feel (in the emotional sense), but rather asks the care-giver simply to think (in the logical sense) of how the one in need

might feel. Empathy is best likened to Hult's (1979) concept of *caring about* because it represents simply a feeling whereas natural and ethical caring subsumes both feeling as well as action. It is this combined act of feeling and acting, according to Noddings (2003), which deepens the bond between two people, fostering a reciprocal exchange in a seemingly asymmetric relation.

### **Receiving Care**

Thus far, the caring relation emerges exclusively from the care-giver, yet caring, as defined by Noddings (2003), is an interpersonal exchange benefiting the cared-for and care-giver alike. The following section reviews the role of the one cared-for specifically and describes the ways caring positively affects both parties. Like the previous section, the rationale for coming into relation is examined, but now from the perspective of the one in-need rather than the one extending care. Then, the processes by which the one cared-for receives, acknowledges, and finally adopts the caring ethic are described.

Like the care-giver, the one cared-for comes into relation in an effort to satisfy a basic human need. The one in-need, however, comes into this relation for more than human connectivity alone. Whether the need is explicit, such as a child's need for food and protection, or more subtle, the one to be cared-for has some degree of need that then characterizes the caring relation as "an unequal meeting" (Noddings, 2003, p. 65). Further drawing the one in-need to the care-giver is the attitude of care, an attitude that emits "warmth acceptance" (Noddings, 2003, p. 65) and tells the one in-need that the care-giver genuinely desires to help. Here the caring exchange occurs: the care-giver extends care and the one cared-for receives that care by way of the care-giver's attitude.

This exchange, to the extent that it is compelled by an ethic of care, satisfies the needs not only of the one cared-for, but satisfies the needs of the care-giver as well. The care-giver needs connectivity and relies on the cared-for to affirm her caring intention and the one cared-for likewise needs some degree of help and relies on the care-giver to extend the attitude of care. Caring, in this way, is a mutually beneficial relation in which the unequal meeting is reshaped into a reciprocal exchange (Noddings, 2003).

Here caring might appear to overlap with the concept of attachment. Bowlby's (1982) classical conception of attachment depicts the biological and intensely emotional bond between two people, most typically between an adult (the attachment figure) and child. Bowlby (1982) posits that attachments form readily in childhood as children rely on attachment figures for physical and emotional safety. These bonds then form a framework from which the child learns how to form relationships over the life course, a perspective that compels many to claim that attachment is critical to development (Prior & Glaser, 2006). Like caring, the "affectional bonds" of attachment require relational commitment from both adult and child. Unlike caring, attachment considers the bond solely from the child's perspective. Adults do not become attached to children in the same way that an adult care-giver might rely on the one-cared for (Prior & Glaser, 2006). Thus, whereas attachment adequately explains why a young person might come into relation with an adult, it fails to address the needs and motives of the care-giver. In fact, although Prior and Glaser (2006) refer to the adult attachment figure as "caregiver" (p. 58), they depict attachment as a unidirectional human relation.

As a unique construct, caring represents a bidirectional exchange benefiting care-giver and the one cared-for in unique ways. The caring action extends from the care-

giver's receptive engrossment and motivational displacement resulting in a commitment that is, in some way, perceptible to the one-in need. From this, the one cared-for perceives this action as an attitude of care and comes into relation in response to the invitation of trust the attitude conveys (Noddings, 2003). In receiving care, the one in-need benefits most directly when his or her needs are met and once these needs are met, the one-cared-for extends some acknowledgement, that, when received by the care-giver, completes the cycle of reciprocity fundamental to caring.

Of particular importance, here, is the way this acknowledgement binds the one-in-need to the care-giver. In Noddings's (2003) words:

The one to-be-cared-for turns about and responds to the needs of the one-caring. In doing this, he consciously gives up his status as cared-for and, out of concern for the one-supposed-caring, behaves as cared-giver.  
(p. 77)

The care offered by the one cared-for completes the caring exchange, affirming the care-giver's ethic that served to adopt the need of the one in-need. Here the ethic of care begins to resemble a need in itself, a need in which the care-giver seeks the response of the cared-for as an affirmation of his or her belief in the duty to care. Caring, then, is a cycle: the care-giver adopts the other's needs, extending care to fill a deficit or offer a benefit, and the one-cared-for perceives the care-giver's attitude of warmth and acceptance and responds, extending care and nurturing the once-vulnerable caring ethic. The cycle does not stop here; rather, it spirals in a direction in which the one cared-for at last begins to learn and adopt an ethic of care (Noddings, 2003).

This ethic of care is attained through experiences with care that are characterized by several specific pedagogical features. The ethic takes root when a person is cared for and engages in the reciprocal exchange described above. From here, the one cared-for

begins to learn the ethic of care when it is modeled by others (Noddings, 2003). Care is best modeled at multiple levels, including within one-on-one relationships (e.g., between a teacher and a student) as well as within the community at large (e.g., a community of care at school) (Noddings, 2003). Through modeling, the mechanisms of caring are observed such that the one cared-for can now practice caring in a safe and supportive environment (Noddings, 2003). Bolstering the effects of practice is constant and open dialogue which may foster the learner's "respect for and attribution of [the care-giver's] motive" (p. 123). Finally, caring must be affirmed by knowledgeable others, who, in doing so, support the learner's intentions for care and nurture the growing ethic (Noddings, 2003). Put together, the intertwined processes of modeling, practice, dialogue, and encouragement foster the development of an ethic of care among people not necessarily prone to natural caring. This pedagogical process presents one additional possibility. By promoting an ethic of care in others, care-givers might also impact the ways care-receivers interact with others, which, if this is the case, has important implications for the broader concept of caring community.

### **Connectedness**

Caring communities integrate caring one-on-one relationships within a larger context characterized by positive connections between all members. Connectedness, like caring, emerges from interpersonal relationships, yet there are several important distinctions that require attention. First among them is the notion that connectedness, unlike caring, does not necessarily promote positive ends (see Dishion, McCord, & Poulin, 1999; Gardner & Steinberg, 2005; McNeely & Falci, 2004). The purpose of the

following section is to review the psychosocial theory and supporting literature that specifically explain the ways connectedness to a given context might positively contribute to a young person's sense of a caring community.

Connectedness refers to linkage between a person and a given setting, which is a conceptualization that embeds connectedness within two theoretical domains. The first theoretical domain features the family of psychosocial theories that attempt to explain why and how people form relationships with one another. Classic conceptions of human connectivity include Freud's "pleasure principle" and Maslow's hierarchy of needs, both of which describe interpersonal relations as a motive that compels human behavior. Bowlby's (1973) notion of attachment mirrors these seminal theories and also centralizes the role of close, affective bonds with the maternal figure. More recent perspectives, such as Deci and Ryan's (2002) self-determination theory (SDT) and Baumeister and Leary's (1995) belongingness hypothesis, consider human connectivity slightly differently. Interpersonal connectedness, to these theorists, is a motive that compels people to seek and form close relation with people, yet this need may be satisfied through positive relations with people outside of the familial context. Furthermore, human connection, although an innate tendency, results only when certain conditions are met (Baumeister & Leary, 1995), which suggests that connectedness may only occur under specific conditions.

Self-determination theory and the belongingness hypothesis offer similar yet notably different explanations of the conditions necessary for the formation and maintenance of connectedness. Baumeister and Leary (1995), in their work on the belongingness hypothesis, state that "human beings have a pervasive drive to form and

maintain at least a minimum quantity of lasting, positive, and significant interpersonal relationships” (p. 497). These interpersonal relationships must have two qualities in order to satisfy the need of belonging. First, the opportunities to connect with others must be frequent and “affectively pleasant” and, second, connections must be stable in terms of both time and quality (Baumeister & Leary, 1995). Deci and Ryan (2002) construct much of the self-determination framework on the belongingness principle, yet these theorists define human connectivity instead as relatedness. Only slightly different from belongingness, relatedness is the “need to feel oneself as being in relation to others” (p. 7). The emphasis here is on the notion of congruence: relatedness requires not only frequent and emotionally stable interactions, but also a felt sense of shared interests, goals, or perspectives (Deci & Ryan, 2002). Together, the belongingness hypothesis and SDT suggest that the conditions essential to human connectedness include frequent and affectively positive interactions, as well as a certain degree of interpersonal similarity.

While these conditions help explain the mechanisms that drive people together, they do not illuminate the role a given setting may play in fostering a sense of connectedness. As stated earlier, connectedness encapsulates the human relationships within a given context, such as at home or school. Much of the literature related to school connectedness defines connectedness to include not only interpersonal relationships, but also the bonds one may form to the organizational structures and norms (e.g., Catalano et al., 2004; You et al., 2008). Hirschi’s social control theory (1969) offers insight into the ways a young person in a school or out-of-school-time setting might recognize and adopt the positive norms of that setting. Young people, according to Hirschi, rely on social structures to guide their development, and in doing so, become

attached to the goals and norms of the setting. Although Hirschi's (1969) theory focuses primarily on the ways a setting might control deviant behavior among youth, several studies support the theoretical connection between a participant and organizational norms in positive youth development settings (e.g., Duerden, Harrist, & Witt, 2009; Hawkins, Catalano, Arthur, Egan, Brown, Abbott, & Murray, 2008; Hawkins & Weis, 1985). With this in mind, it is possible that the setting itself plays an important role in fostering (or thwarting) participant's feelings of connectedness.

School is one setting frequently applied to the study of connectedness and, within the literature specific to this setting, several related concepts appear to impact connectedness and are worth exploring. The first concept is related to a student's sense of community, which, like connectedness, is defined to include both interpersonal and contextual features. A sense of community, according to Bryk and Driscoll (1988), results when a person feels like they belong to group of people who share common goals and support common norms, a definition that aligns with the aforementioned notion of interpersonal connectedness. Sense of community differs, however, by emphasizing the role of the setting in facilitating interpersonal connections. Within the school setting, sense of community might result when a student, through his or her relationships with others in the school, adopts the goals and norms of the school whereas a student may feel connected to her peers at school, but not necessarily because of the goals and norms of the school.

School climate is a construct that considers, almost exclusively, these overarching characteristics of the typical school setting (Libbey, 2004) and, like community, climate and connectedness are used interchangeably in the literature. Climate, which refers to the



combined nature of a school's goals, norms, and practices, is a perceptible feature of a school setting that does not necessarily depend on the relationships between the students at the school. Wilson's (2004) comparison of school climate and school connectedness provides evidence of the ways these phenomena differentially affect student outcomes. Both school climate and school connectedness contributed to desirable outcomes in this study; however, connectedness, which was defined to include positive relationships with peers and teachers, served as a buffer against negative peer influences more so than climate alone. Given these findings, this author concluded that school climate included "informal social norms" that, in poor climates, promoted negative behaviors but appeared to be mitigated among students who felt connected to their teachers and peers (Wilson, 2004). It is possible, on the other hand, that the climate of a school might include norms related to positive relationships among students and teachers. Vieno and his colleagues (2005) determined that school climate serves as a predictor of students' sense of community. Climate, to the extent that it refers entirely to the goals and norms of a setting, overlaps somewhat with connectedness; however, climate alone does not capture the close interpersonal relationships that are central to the concept of connectedness.

Given the centrality of these relationships, it is at last important to consider the similarities and differences between Noddings's (2003) ethic of care and the concept of connectedness as it is described here. Many scholars focus solely on one-on-one relationships, such as the relationships between parents and children (e.g., Boutelle, Eisenberg, Gregory, & Neumark-Sztainer, 2009) and teachers and students (McNeely & Falci, 2004; Voisin, Salazar, Crosby, Diclemente, Yarber, & Staples-Horne, 2005). Although there is evidence to suggest that parent and teacher connectedness affects youth

in different ways (Resnick, Harris, & Blum, 1993), it is generally accepted that close relationships with both parents and teachers form the foundation for overall feelings of connectedness (Witherspoon, Schotland, Way, & Hughes, 2009). Across these settings, these relationships are consistently described as caring (e.g., Boutelle et al., 2009; Resnick et al., 1993; Voisin et al., 2005), suggesting that Noddings's (2003) ethic of care may effectively bind people together, which include, in this case, the youth and adults in a given setting. In doing so, care and connectedness share the quality of interpersonal relation, yet the precise nature of this relation differs between these two concepts.

Two points of departure capture the differences between care and connectedness, the first of which extends from the motive drawing the two individuals together. To Noddings (2003), this motive is an ethic (from the care-giver) and a need (from the one to receive care). At its core, the caring relation is driven by a human need for connectivity, yet the ethic, or the moral desire to do what is right for the one in-need, represents an additional force that forms the relation. Connectedness, on the other hand, results primarily from the basic human need for relation (Baumeister & Leary, 1995) and, when this need is met, the individual becomes connected to the context as a whole (Hirshi, 1969).

The second point of departure emerges from the bidirectional nature of caring. To feel connected, one must feel a shared and reciprocated affect with another person; in other words, two connected people might simply like one another. Positive connections such as these are undeniably good, but they might not necessarily result in mutual benefit. Caring necessarily requires some degree of personal betterment- for both the one in-need and the care-giver. Considered differently, caring is an "unequal meeting" in which both

parties reciprocate care (and, in doing so, both parties benefit in some way), whereas feelings of connectedness emerge from a balanced exchange of positive affect that may or may not benefit either party in any way.

Despite these differences, caring and connectedness may together form the building blocks of a caring community. Close, one-on-one relationships are critical to feelings of connectedness and Noddings's (2003) ethic of care explains why and how adults in a given setting might form these relationships with youth. Care theory illuminates not only the formation of these connections, but also the ways in which the ethic of care may compel youth to become care-givers themselves, as well as the ways an entire setting may be characterized by an overarching culture of care. As a process, the ethic of care may at first be limited to a certain number of people within a given setting until the ethic begins to characterize all interpersonal relations. Connectedness, on the other hand, is simply a felt sense of belonging to a given setting, and, as such, is fueled by the basic human need for relation. It is possible that connectedness, in some circumstances, forms a platform from which caring relations emerge. Conversely, caring one-on-one relations may direct more distal interactions, thereby fostering an overall sense of connectedness within a setting. A caring community, then, is a setting in which a participant feels both a sense of caring with primarily adults and a sense of connection to the setting as a whole.

### **Applications of Caring Communities**

A caring community, given the ways it represents positive connections and caring relations, represents a promising context for positive youth development. The following

discussion examines the ways in which caring, connectedness, and caring communities are applied and measured within larger community contexts. First, a review of Noddings's (2005) approach to caring community will identify the key characteristics that are essential to the construction and maintenance of a caring community. With these features in mind, a targeted analysis of several caring-based applications will provide insight into the ways camps specifically might create caring communities.

Caring communities are built on both one-on-one interactions and an overarching culture of care. According to Noddings (2005), two conditions must be met in order for both of these features to flourish: continuity and interconnected centers of care. Continuity refers to the sustained nature of a person's experience within the context and can be found in those aspects of the context that are related to purpose, place, people, and curriculum (Noddings, 2005). To Mayeroff (1971), the depth and sustained nature of the caring relation is paramount to establishing the innate knowledge essential to the caring connection between two people. Themes of "time" and "being there" were among the most commonly identified qualities in Tarlow's (1996) qualitative investigation of students' and parents' perceptions of caring teachers, suggesting that continuity in people and place allow the time necessary for connections to form. Noddings (2005) asserts that discontinuity is a paramount problem in today's schools. Schools that focus solely on academic achievement and utilize efficiency systems to target this goal fail to provide students and teachers the time necessary to form and nurture warm and supportive relationships (Noddings, 2005).

Continuity in people and place fosters caring by allowing the time necessary for caring connections to form. Beyond this, continuity in purpose emerges from

environments that explicitly uphold care as their central and guiding purpose and employs this purpose to structure opportunities for caring interactions. Continuity in purpose and place together foster caring because, in Noddings's (2005) words, "Children need time to settle in, to become responsible for their physical surroundings, to take part in maintaining a caring community" (p. 66). By providing an environment that is consistent and reliable, young people need not worry about physical safety but can rather learn to care and be cared for. Continuity in curriculum, on the other hand, represents learning opportunities in several concentric circles of care, such as care for the self, care for others, and care for the natural world. Together, continuity across people, place, purpose, and curriculum allows the time necessary for caring connections to form and promote opportunities to learn how to care, thus continuity is a critical aspect of a caring community.

Centers of care, on the other hand, represent the resources with which people exchange care and, to Noddings (2005), these circles are concentrically fixed on the individual. With self-care at the center, circles of care for intimate others, the natural world, objects and ideas each represent different opportunities for the exchange of care. Interconnectedness across these circles, however, allows a person to test and develop her ethic of care more broadly than when the circles remain disconnected. A young person, for example, might develop a caring relation with a peer while engaging in a service learning project, thereby connecting the circle of care for intimate others with the circle of care for the natural world. Caring communities organize themselves around these centers of care rather than around other mutually exclusive "subjects," and, in doing so, place caring at the root of all learning (Noddings, 2005). By centralizing caring in this

way, caring communities not only foster an ethic of care among youth, but also create an overarching culture of care. Together, the qualities of continuity and interconnected circles of care form the foundation for a community of care, which is a broad concept that has been applied and measured in a variety of ways.

Measures of caring community vary between those specific to the one cared-for (e.g., the student), those specific to the care-giver (e.g., the teacher), and those that attempt to capture members' sense of the overall climate (e.g., connectedness) within a given setting (e.g., the school). At the child level, caring is typically measured either observationally or by a self-report that asks the child to reflect on his or her perceptions of care. Observational measures, for example, have revealed connections between classroom climates and students' own caring behaviors (Solomon, Battistich, Kim, & Watson, 1997; Serow & Solomon, 1979); however, observational measures are limited to behaviors that serve as proxies to caring, such as "general positive interaction" and "joint effort" in peer work groups (Serow & Solomon, 1979, p. 671). Therefore, additional measures of caring community are often necessary to further examine the child's perceptions of the setting.

Child self-reports allow insight into personal perceptions of caring and connectedness that might not be accessible by observation alone. In one study, students' perceptions of school as a caring community were measured using a multidimensional scale that included items related to students' sense of school as a community, student attitudes toward school, motives to engage in classroom learning, and behavior at school (Battistich et al., 1997). Newton and colleagues (2007) assessed youth's perceptions of caring in a similar way in a sport setting. Their measure, the Caring Climate Scale

(CCS), assesses perceptions of caring climate, which they define similarly as caring community, along a unidimensional scale that includes items specific to youth-youth and youth-adult interactions.

With respect to connectedness specifically, Libbey (2004) identifies nine themes she claims contribute toward a student's overall relationship to school: academic achievement, belonging, discipline/fairness, extracurricular activities, likes school, student voice, peer relations, safety, and teacher support. Of note here are the interpersonal domains and the extent to which they capture feelings of connectedness versus an ethic of care. Across the commonly used measures of school connectedness, belonging, for example, typically refers to the "students' sense of being a part of the school" (p. 278). Peer relations, on the other hand, are assessed in terms of their qualitative value, not necessarily in terms of the bidirectional exchange of care. Measures of teacher support indeed target students' sense of support and care from teachers, yet Libbey (2004) observes that teacher support is conceived as a unidirectional, rather than bidirectional, relation. Measures of connectedness, like measures of caring, may use self-report to assess individual's perceptions of the presence and quality of interpersonal relations in a given context; however, it is important to consider how measures of caring and measures of connectedness might work together to capture an overall sense of caring community.

Many measures of caring and connectedness similarly consider changes in students' feelings over time; thus caring community might likewise benefit from a longitudinal approach. Noddings's (2005) notion of continuity is critical to caring relations and suggests that perceptions of caring develop over time, and, with this in

mind, many measures (e.g., Battistich et al., 1997; Battistich et al., 1998; Solomon et al., 1997) assess caring and connectedness at several points throughout elementary and middle-school years. In these, growth in students' perceptions of caring and connectedness is linked to youth outcomes such as social and ethical development (Battistich et al., 1998) and reduced drug use and problem behaviors (Battistich et al., 2000). Longitudinal investigations such as these support the notion that caring communities develop over time and, in the school setting specifically, time appears to be a critical element in the development of caring community (Battistich et al., 1998, Battistich et al., 2004).

Despite the breadth of measures available to assess young people's perceptions of connectedness, it is important to note the ways these measures may differ from a school setting to a nonschool setting. Time and the compulsory nature of school are two school-specific factors that may affect how youth in nonschool settings assess their perceptions of connectedness. As noted above, many measures of connectedness assess this variable longitudinally, which suggests that connectedness is an interpersonal phenomenon that takes time to develop and to be felt by members within a given setting. The traditional school year (9 months) is indeed significantly longer than the typical camp session (8 weeks); however, the camp session contains many features that may expedite feelings of connectedness among campers. Camps, for example, typically contain more informal time than schools and informal time is known to foster relationship-building between campers and camp staff (Gillard et al., 2009; Hough & Browne, 2009). It is possible that camps may be able to promote connectedness in a shorter time-frame than schools; therefore, the school-based measures of connectedness will likely capture campers'



perceptions of connectedness at camp despite the shorter timeframe of the camp experience.

The compulsory nature of school is another way the effectiveness of school-based measures of connectedness may vary between school and nonschool settings. In general, the benefits of school connectedness are well known (cf., Libbey, 2004; McNeely & Falci, 2004) and it is possible that these outcomes are especially important in a setting where students have little choice regarding their classroom community, its activities, members, and leadership. Camp, on the other hand, is not a compulsory context like school, yet many young people attend camp for reasons other than their own choosing. Furthermore, choice is a central component of connectedness (Libbey, 2004), and volition is critical to positive youth development in general (Larson, 2000); thus, the school-based measures of connectedness, despite differences in these settings, should effectively capture campers' sense of connectedness at camp.

The common measures of connectedness also vary between observational, self-report, and longitudinal assessments. Several studies (e.g., Battistich et al., 1997; Serow & Solomon, 1979; Solomon et al., 1997) examine the behaviors and practices of the care-giver, which, in the school setting specifically include outward displays of warmth, acceptance, supportive feedback, and promoting an overall caring climate. Furthermore, observations in the school setting tend to assess teachers' change in caring behaviors over time. Self-reports specific to the care-giver and the overall caring climate likewise assess the care-giver's perceptions of caring behaviors and the rate of change in these perceptions over time (e.g., Battistich et al., 1998; Battistich et al., 1997; Solomon et al., 1997).

With respect to caring specifically, one common approach has been to measure the care-giver's moral orientation. Gilligan's (1982) delineation of care-based morality and justice-based morality (which is commonly associated with Kohlberg's moral stages) fueled interest in the ways care-givers may differ simply by their moral orientation. Here (e.g., Liddell, Halpin, & Halpin, 1992), caring is assessed as an intrapersonal frame from which an individual navigates day-to-day dilemmas and it is assumed that some people operate from a caring perspective while others operate from a justice perspective (Gilligan & Attanucci, 1988). The assumption that a care-based orientation belongs exclusively to women no longer holds, yet many agree that gender (i.e., femininity or masculinity) may be related to an individual's general moral orientation (Jaffee & Hyde, 2000; Juuvari, 2006). Noddings's (2003) ethic of care pertains to men and women alike by focusing on the mechanisms underlying the caring exchange rather than a predisposed moral orientation, yet this conception of caring assumes that the care-giver places the needs of the one-to-be-cared-for ahead of the needs of the many. From this perspective, a care-giver's moral orientation is likely to influence the ways they care for young people in need. On their own, however, measures of individual moral orientation fail to capture caring practices that foster connectedness, thereby overlooking one of the routes by which young people feel a part of a caring community.

In sum, caring and connectedness are observable both directly and indirectly and both perspectives offer unique insight into an individual's experience with these phenomena. Caring communities, however, are defined both by an individual's perceptions of care as well as an overarching climate of care, thus measures of this construct must focus on participants' perceptions both of caring relationships as well as

caring-based norms and goals. Self-reporting is an effective way to assess one's perceptions of caring and a form of measurement that is successfully applied in school and out-of-school-time settings. The temporal nature of caring also suggests that caring is best measured over time in order to capture growth in one's awareness and appreciation of the features that foster a caring community.

Caring communities include both caring one-on-one relationships as well as an overall sense of connectedness to the setting as a whole. Caring, the first major feature of a caring community, is a bidirectional exchange between two people that results in some sort of mutual benefit. More specifically, caring is an ethic, a moral stance that compels the one-giving-care to become engrossed in the one-in-need and absorb that person's feelings and desires. Through identification with these feelings, the care-giver acts in a way that alleviates the need and the one-then-cared-for receives this act as the care-giver's attitude of warmth and genuine acceptance. Finally, the one-cared-for acknowledges the caring act in some way perceptible to the care-giver, thus confirming that person's moral orientation and satisfying the care-giver's need for human relatedness (Noddings, 2003). When caring interactions occur in an organizational setting such as a school, they are often thought to foster a caring community (Newton et al., 2007). Caring relations also serve to bind youth to the given setting, a process that represents the second major feature of a caring community. Connectedness represents one's relationship to the setting as a whole. Together, caring and connectedness work in concert to foster an overall sense of caring community.

## **Program Design and Implementation Factors**

The interpersonal experience of caring, as defined here, is influenced at both the person level and the context level. Noddings (2003) describes the mechanisms necessary for an exchange of care between two people as well as the environmental conditions likely to foster a caring community. In the following section, the specific characteristics of person- and setting-level influences on caring are reviewed from both a theoretical and an empirical perspective. Put together, these perspectives form a framework from which to identify and define the ways summer day camps might promote campers' sense of camp as a caring community.

Theoretical and empirical perspectives offer several mechanisms by which young people might feel cared for at camp which might be categorized as either program design factors or implementation factors. Design factors refer to processes facilitated through structures such as organizational goals and activities whereas implementation factors include those processes specific to camp counselors' interactions with youth participants, such as the quality of a counselor's ethic of care. Noddings's (2003) care theory and the theories and concepts that form the positive youth development (PYD) framework together offer both design-oriented and implementation-oriented mechanisms that may influence how young people feel cared for at camp. These perspectives, as well as the related empirical evidence, are reviewed below.

### **Theoretical Framework**

**Care theory.** Caring, to Noddings (2003), is an exchange between two people that is mutually beneficial, specifically the care-giver and the one to be cared for. The

caring exchange begins when the care-giver identifies and adopts the other's needs through the simultaneous processes of engrossment and motivational displacement. Both processes originate in the care-giver's ethic of care, which Noddings's (2003) describes as a moral desire to do what is right for the one in need. Some contend that this ethic may vary according to gender (cf., Gilligan, 1982), yet, despite evidence suggesting that innate differences exist between male and female morality (Gilligan & Attanucci, 1988; Juujarvi, 2006), it is more likely that moral reasoning relates to individual differences more so than gender alone (Galotti, 1989; Jaffee & Hyde, 2000; Turiel, 1976; Woods, 1996). Others suggest that people operate from either a care-based (e.g., do what is best for the individual) or a justice-based (e.g., do what is best for the greater good) moral orientation and morally mature people oscillate between these poles in response to the situation at hand (Gilligan, Ward, & Taylor, 1988). Noddings (2003) suggests that, for some, namely women, caring is a natural and innate proclivity, yet any person can adopt and apply an ethic of care. There is sufficient evidence to suggest that an ethic of care, whether learned or innate, is likely to vary across individuals and, as such, play an important role in determining a young person's experiences within interpersonal relationships.

In addition to a foundational ethic of care, Noddings (2003) outlines several caring practices that foster a sense of caring among those who would be cared-for. *Modeling*, the first practice, allows young people to visualize the caring exchange from an external vantage point and, furthermore, modeling conveys the care-giver's ethic in a concrete and observable way (Noddings, 2003). Furthermore, caring interactions should be modeled at all levels (e.g., peer-to-peer, adult-child, administrator-administrator) in

order to convey a broader sense of the caring ideal within the given setting. *Dialogue* is the second practice and is the most effective route by which the care-giver receives the needs and desires of the one to be cared for. In other words, genuine discourse fosters trust and comfort between two or more people, thus setting the stage for genuine caring relations. *Practice* then permits caring exchanges in a safe and supportive environment that is guided by a caring adult. In school, for example, young people might practice caring for a class pet, a garden, or through a service learning project. Finally, a caring adult *confirms* the caring intentions and actions of the young person and, in doing so, that adult “reveals [to the student] an attainable image of himself that is lovelier than that manifested in his present acts” (Noddings, 2003, p. 193). Together, modeling, dialogue, practice, and confirmation represent care-giver actions that contribute to the ways young people perceive, experience, and understand the ethic of care and are thus mechanisms that may influence campers’ perceptions of camp as a caring community.

Whereas a care-giver’s tendency for a caring ethic and the practices outlined above suggest ways an individual might influence a young person’s sense of caring, Noddings (2005) asserts that continuity in purpose, place, people, and curriculum is critical if young people are to experience care in organizational settings. Continuity across each of these facets serves several purposes. First, continuity of purpose, and, more specifically, continuity of a *caring* purpose, provides a framework that directs and informs interpersonal processes within a given setting. Second, continuity of place invites young people to take ownership over the physical space and, third, continuity of people grants the time necessary for warm and trusting connections to form among individuals in a community. Continuity of curriculum pertains most directly to schools,

yet it is important to note the ways caring might serve as a common theme across activities and experiences in an organizational setting (Noddings, 2005). Simply put, continuity across each of these facets fosters caring by allowing time, space, and opportunity for young people to develop caring relations and learn about caring processes in an environment guided by a common purpose of care.

In sum, Noddings's (2003, 2005) care theory offers several mechanisms that may influence how young people feel cared for in an organizational setting. Each of these mechanisms might also relate either to the design of a program or to the implementation of activities and processes that comprise the design. For example, an individual's ethic of care represents a personal attribute that likely affects how that person interacts with young people (Noddings, 2003) and is therefore an implementation-related mechanism that may influence how young people experience care. Modeling, dialogue, practice, and confirmation are also implementation related processes that likely vary with respect to an individual's interpersonal style and intrapersonal moral orientation (Noddings, 2003; Bergman, 1997). Continuity across program aspects, such as people, place, purpose, and curriculum, on the other hand, represents a program structure that is formulated by program administrators that do not, typically, implement the actual activities (Noddings, 2005). As such, continuity across these domains represents a design factor rather than an implementation factor. Clearly, influences on a child's sense of caring in a particular setting depends on both design factors and implementation factors, yet little is known about the relative contribution of design and implementation factors on youth outcomes, such as perceptions of a caring community, in a program setting.

**Positive youth development.** The positive youth development (PYD) perspective offers insight into the interplay between design and implementation factors in youth programs. As a conceptual framework, PYD rests on the assumption that youth are innately prone to healthy and adaptive development given supportive and engaging developmental contexts (Damon, 2004). This view of youth, commonly referred to as the strength-based perspective, emerges from several psychosocial theories of human development, including Ford and Lerner's (1984) Developmental Systems Theory (DST). According to this theory, a young person sits at the center of an interwoven set of developmental contexts such as home, school, and out-of-school-time environments and, from this central vantage point, the developing individual engages in mutual exchanges with these enmeshed contexts in order to create and adapt to changes both within the individual and in the external environment (Ford & Lerner, 1984). The PYD perspective further integrates theories of human psychological needs such as the need for interpersonal relatedness (Baumeister & Leary, 1995; Deci & Ryan, 2002), the need for cognitive complexity and challenge (Csikszentmihalyi & Rathunde, 1998), and lastly, the need for agency and influence (Larson, 2000). Together, these theories, and the underlying strength-based conception of youth, comprise a framework that informs the design and implementation of programs intended to foster positive youth outcomes.

Positive youth development programs in general are programs that intentionally promote desirable youth outcomes through structured and unstructured experiences (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2004; Roth & Brooks-Gunn, 2003). These activities foster youth development by providing support for youths' innate developmental processes as well as by providing opportunities to learn new skills,



connect with others, and engage in important decision making (Gambone et al., 2002). PYD programs offer developmental supports and opportunities through a variety of mechanisms. Roth and Brooks-Gunn (2003) categorize these mechanisms into program goals, atmosphere, and activities and, by doing so, infer that the interplay among these broad mechanisms within a PYD program facilitates positive development among youth.

However, the precise relation between program goals, atmosphere, and activities is largely unknown (Roth & Brooks-Gunn, 2003). Program goals, or the outcomes a program strives to achieve by providing positive experiences for youth, typically represent a mandate or mission established by an organization's board or administration. In their comprehensive review of highly-regarded PYD programs in the United States, Roth and Brooks-Gunn (2003) found notable variance across program goals ranging from problem-focused goals (i.e., drug prevention) to developmental goals (i.e., leadership skills). Interestingly, these authors also identified a disparity between many of the programs' goals and their activity offerings; in other words, many programs fail to offer activities that intentionally target specified goals. Generally, activities include the structured and unstructured time in which youth learn interesting and useful skills. Despite the disconnect between these activities and the stated goals of the program, activities, like goals, are a key feature of PYD programs.

Program atmosphere is a far less explicit feature than either goals or activities and plays a central role in characterizing a participant's experience within the program (Roth & Brooks-Gunn, 2003). The extent to which youth participants perceive a youth program as physically and emotionally safe, for example, determines their ability to engage in activities and form positive connections with others, thus an atmosphere characterized by

desirable social norms is essential for positive youth development. In the school setting, an overall atmosphere that supports positive social norms has been shown to positively affect students' adoption of pro-social norms (Leming, 1993). Structures such as the program's daily schedule, physical space, and activity options also contribute to the overall "feel" of a program yet the one-on-one interactions between staff and youth participants are considered a key determinant of atmosphere (Roth & Brooks-Gunn, 2003). In other words, program atmosphere relies on the unique ways staff members interact with youth and facilitate activities rather than on explicit program structures, such as program goals or activity options alone. Atmosphere, simply put, relates more so to implementation whereas goals and activities relate to program design.

Thus far, Noddings's (2003, 2005) care theory is delineated into factors relating to the program design (e.g., continuity in purpose, people, place, and curriculum) and those specific to the implementation of a particular program (e.g., a staff member's ethic of care and the ways in which that staff member models, engages in dialogue, encourages practice, and confirms caring intentions in others). A PYD framework supports this classification by outlining program features that foster positive youth development. Roth and Brooks-Gunn (2003) categorize these features into program goals, atmosphere, and activities, suggesting that the interplay among these domains facilitates positive youth development in these settings. Despite the assumption that all three domains contribute to these ends, it is possible that program goals, atmosphere, and activities foster youth outcomes differentially; unfortunately, the relative importance of these domains remains unknown (Roth & Brooks-Gunn, 2003). However, research in the area of youth programming offers some useful empirical insight into the ways program features,

separated here into design factors and implementation factors, influence youth development in the program setting.

### **Program Design Factors**

Design factors include aspects of a program that are intentionally designed to meet an identified youth development outcome and, at camp specifically, are likely to influence campers' sense of camp as a caring community. Research in the childcare field, for example, links several design factors to desirable program outcomes, including adult-to-child ratios, teacher training, and group size (Phillips, Mekos, Scarr, McCartney, & Abbott-Shim, 2000), as well as planned activities and physical space (Ghazvini & Mullis, 2002). Roth and Brooks-Gunn (2003) delineate program features similarly, suggesting that the most effective programs have goals targeting youth development rather than problems, they are small enough to foster close staff-youth relationships, and they offer activities that facilitate growth toward the program's stated goals. Furthermore, these programs have an atmosphere characterized by pro-social norms which, to these authors, results from both program design factors as well as staff implementation factors (Roth & Brooks-Gunn, 2003). At camp, then, the design factors that might influence campers' sense of camp as a caring community likely include program goals, activities, and an overall caring atmosphere.

Youth development programs in general are organized programs whose goals target youth outcomes that will engage participants in their communities and prepare them for a productive adulthood (Catalano et al., 2004; Pittman et al., 2005; Roth & Brooks-Gunn, 2003). Goals provide critical direction and intention to program processes

like activities or atmosphere and, in doing so, allow youth programs to effectively promote positive youth development (Eccles & Gootman, 2002). Noddings's (2005) likens the concept of program goals to a program's purpose, which, in environments that aspire to foster caring and connectedness, must focus solely on warm and supportive relationships among youth and staff. Furthermore, a caring purpose must be consistent and inform all other program processes if the organizational climate is to foster a sense of interpersonal connection. A camp's goal, or purpose, is a design factor that should, ideally, guide the design of all other camp features, such as activities and atmosphere and, by doing so, influence the extent to which campers perceive camp as a caring community.

Activities, like goals, include aspects of the youth development program that are intentionally designed to foster the identified goals. Youth development programs, including most camps, offer both structured and unstructured activities and effective programs allocate the majority of the time youth spend at the program to structured activity (Roth & Brooks-Gunn, 2003). Skill-building activities are an example of structured time that is used to promote feelings of competence, a commonly identified youth development outcome (Pittman et al., 2005). The Caring School Communities (CSC) curriculum (Battistich et al., 1997) includes a set of activities designed specifically to promote caring and connectedness in school settings. One such activity promotes peer-to-peer connections through cross-age buddies, or the pairing of older students with younger students for a specific task (e.g., reading a story together). In its entirety, the CSC curriculum reflects Noddings's (2005) assertion that caring environments must promote continuity in curriculum if young people are to feel cared for at school.

Continuity, according to Noddings (2005), refers to the consistent focus on caring across all learning activities and evidence suggests that CSC activities effectively promote caring in the school community (e.g., Battistich et al., 1998; Battistich et al., 2000; Watson, Battistich, & Solomon, 1997;). It is also important to note here that the implementation of CSC activities appears to remain consistent across implementer styles (Domitrovich & Greenberg, 2000). Given the evidence supporting the effectiveness of the CSC activities, it is possible that similarly-designed activities will help campers feel like they are part of a caring community at camp.

Atmosphere, or the general “feel” of a program, likewise influences participants’ experiences within the program, yet through far more implicit means than goals or activities. Whereas goals and activities are typically clearly stated and visible, atmosphere encompasses program features such as staff-youth interactions and the overall climate, or culture, of the program (Roth & Brooks-Gunn, 2003). The extent to which staff implementation styles contribute to atmosphere is reviewed below, thus of particular interest here is the organization’s overall climate or culture. A variety of studies highlight the importance of climate in youth settings (e.g., Catalano et al., 2004; Grossman & Bulle, 2006; Rhodes, 2004), including the studies specific to caring in school. For example, classrooms characterized by a caring climate demonstrated more positive peer interactions (Serow & Solomon, 1979) and schools that students perceive as caring communities contribute to students’ academic, social, and developmental outcomes (Battistich et al., 1998). Newton and colleagues (2007) found similar results in a youth sport context that participants perceived to be a caring climate. Although it is assumed that camps typically promote an atmosphere that is different from school and

typical out-of-school-time settings, little is known about the ways a camp's atmosphere might influence campers' experiences at camp. Given evidence from the school setting, it is likely that camps that intentionally design and promote a caring atmosphere will also facilitate campers' sense of camp as a caring community.

It is possible that design factors might play an especially notable role in fostering youth outcomes at camp. As structural features that are typically designed by program administration, design factors (e.g., goals and activities) should stay consistent despite individual staff members' styles and day-to-day fluctuations in the program. In other words, design factors are important because they lend structure to the program because they are robust to staff characteristics (Rhodes, 2004), a notion that is particularly interesting given the nature of typical youth program staff. In their in-depth study of several youth programs in Chicago, Halpern, Barker, and Mollard (2000) found that program staff members were most often college-aged and in their first job; additionally, these authors observed several instances when staff members were overly emotional, inconsistent, or unable to uphold program policies. Programs like these also typically struggle to retain quality staff from season to season (Robertson, 2007). At camp, evidence suggests there is often a discrepancy between staff intention to and actual implementation of important program features (e.g., guided reflection at the end of a teambuilding activity; Schaumleffel & Payne, 2007) suggesting that explicit design structures might offer more support for staff during camp.

One possible explanation for the disconnect between structured activities and the ways staff actually implement those activities might be that staff are, by and large, actively involved in their own personal development while at camp (Schubert, 2003). As

such, young staff members might face with new challenges and stressors while working at camp (Paisley & Powell, 2007). Camp employment is also typically low-paid and seasonal, resulting in a high level of staff turnover from year to year. Given this challenge, camp administrators may be well-served to develop program designs that withstand the flux in staff members over time. Design factors such as group size and planned activities contribute to quality in the daycare setting (Ghazvini & Mullis, 2002) and are typically central features in youth program settings (Roth & Brooks-Gunn, 2003), thus design factors such as activities may play an important role in influencing youth outcomes at camp.

### **Implementation Factors**

Despite the many benefits of program design, the ways staff members actually implement the program have considerable implications for youth outcomes. Implementation factors, or the quality of staff-youth interactions in a youth program, are separable from design factors because they vary across staff members whereas design factors remain consistent throughout the program. Some researchers contend that staff-youth interactions, defined here as implementation factors, not only characterize youth's experiences in a program but determine the extent to which youth participants achieve developmental gains in the program (e.g., Rhodes, 2004; Smith, Devaney, Akiva, & Sugar, 2009; Yohalem, Granger, & Pittman, 2009). Point-of-service is a term used to capture the nature of staff-youth interactions and Yohalem and colleagues (2009) claim that:

...specific interactions between and among young people and adults during programs are more powerful predictors of effectiveness than are

broader structural features such as staff qualifications and staff-student ratios. (p. 131)

Research in the area of mentoring supports this notion based on the idea that youth naturally form close and impactful bonds with adults as a naturally developmental process (Greenberger et al., 1998). Young people, from this perspective, seek out adults in order to gain new adultlike skills; which, in the case of camp, suggests that adult staff members' personal characteristics are likely to have a considerable impact on the developing young person.

Intrapersonal attributes, which include features such as a person's personality, demeanor, and character, assumedly affect program implementation, yet little is known about how much and in what ways. With respect to mentor relationships, Rhodes and colleagues (2006) suggest that intrapersonal attributes influence these connections yet in different ways depending on the individual young person. To these authors, the quality of a youth-adult relationship largely depends on the degree to which the young person and the mentor "click." Grossman and Bulle (2006) likewise contend that similarities among youth and adult attributes and interests serve as the basis for meaningful relationships. Seligson and MacPhee (2004), on the other hand, contend that the intrapersonal skill of emotional intelligence among staff serves as the foundation of positive youth-staff relationships. Emotional intelligence, or a skill related to self-awareness, is an intrapersonal attribute that might help staff members implement programs in a consistent and effective manner despite unexpected changes and challenges (Larson, Rickman, Gibbons, & Walker, 2009). Noddings's (2003) ethic of care might also be considered an attribute specific to an individual person and, furthermore, one that likely affects the ways a staff member implements youth programs. Despite this



possibility, researchers and program administrators alike know little about the ways specific intrapersonal attributes, like emotional intelligence or an ethic of care, influence staff members' implementation styles.

Unlike dispositional traits like an ethic of care, specific implementation practices are commonly studied and accepted in the youth development literature. Grossman and Bulle (2006), for example, found that effective staff members engage informally with youth, take genuine interest in participants' desires and needs, and treat youth respectfully. Tarlow's (1997) investigation of teachers revealed several practices thought to foster caring connections with students, including emotional availability, genuine interest, and modeling of caring behavior. An ethic of care includes specific practices (modeling, dialogue, practice, and confirmation) that, according to Noddings (2003), may be learned and applied by any person wishing to adopt an ethic of care. Rhodes's (2004) findings on adult mentors support the notion that intrapersonal attributes and specific practices play an important role in youth programs, leading her to conclude that:

Although some measure of structure is necessary and beneficial, close adherence to packaged programs can short-circuit staff members' spontaneity, empathy, and judgment in ways that undermine the formation of close ties. (p. 154)

Therefore, it is possible that, at camp, the combined effects of staff attributes, such as an ethic of care, and staff practices, such as modeling, dialogue, practice, and confirmation, influence campers' sense of camp as a caring community.

There is, however, reason to doubt that staff implementation factors consistently foster positive youth development in program settings. In their ethnographic investigation of one specific youth program, Halpern, Barker, and Mollard (2000) found that staff implementation factors indeed played a central role in characterizing

participants' experiences, yet the youth-staff interactions also varied with respect to staff members' age, experience level, and personality. The young staff members of this particular program struggled to balance their roles as leaders with their desire to be accepted by the youth in the program. New and young staff members also displayed an inability to adapt to unexpected change and challenges in the program, leading these authors to conclude that program design factors, such as daily schedules and planned activities, provide much needed support to the less competent staff members.

In addition to variance in staff members' age and expertise, researchers identify program implementation as a process that is highly susceptible to the unpredictable nature of youth programs in general. Dariotis, Bumbarger, Duncan, and Greenberg (2008) identify organizational, program, and personnel characteristics that affect the quality of program implementation, suggesting that flux at each of these levels often prevents optimal program implementation. Of particular note, here, are the personnel factors thought to affect program implementation. Staff buy-in, or their personal motivation to deliver a program as planned, plays a critical role in implementation yet, according to these authors, this motive remains an elusive staff attribute. Halpern and his colleagues (2000) observed similar degrees of variance in staff members' buy-in, but concluded that buy-in was not necessarily related to formal training or professional expertise. Despite the clear centrality of youth-staff relationships in youth programs, the factors related to staff implementation are variable and may often be out of the program administrator's control.

### **Additional Influences on Program Quality**

The camper also contributes to the nature of the camp experience, specifically through the personal attributes and behaviors that he or she brings to the camp program and the ways that camper interacts with others to create a camp community. Antecedent factors, which include the attributes or behaviors a participant brings to the program (i.e., age or prior expectations of the program), have been found to affect participant outcomes in recreational settings (Sibthorp, 2003). A child's ability to engage in caring relations with adults, as well as to form positive relations with peers, are processes heavily rooted in past experience and social competencies and, as such, likely impact the way a camper interacts with camp staff.

**Individual factors.** Time spent at camp, on the other hand, allows the camper increased opportunities to form meaningful connections with adults and peers and has been shown to contribute to the development of desirable outcomes (Roark, 2009). With respect to caring specifically, Noddings (2003) suggests that caring communities develop over time and children are more likely to develop caring connections when they are part of a consistent setting; therefore, past experience within the camp program is likely to affect campers' sense of camp as a caring community.

Age is another factor known to affect youth's tendency toward close relationships with others; as young people mature, they become increasingly aware of others and develop a need to belong to a community (Baumeister & Leary, 1995). Much of the school-based literature (e.g., Libbey, 2004; Resnick et al., 1993; Rice et al., 2008;) documents a relation between students' age and their perceptions of connectedness, which suggests that age may affect the ways campers perceive the camp environment.

The caring relation, to the extent that it is guided by an ethic of care, may be especially impacted by a campers' age, or, more specifically, by their degree of moral development.

**Moral development.** Classic conceptions of moral development represent either a staged approach (e.g., Kohlberg, 1984) or a nonstaged, more fluid approach (e.g., Ford & Lerner, 1984). To Kohlberg (1984), young people between the ages of 6 and 12 typically engage pre-conventional reasoning to guide day-to-day decisions. At the youngest ages of this spectrum, moral decisions are guided by a simple, hedonic adherence to certain choices because of their association with external reward and punishment. Once passed this simple cause-effect reasoning, young people begin to think about the others affected by a given decision and might, for the first time, act in such a way to please a salient other such as a parent or teacher. Moral development, from this perspective, is fueled by the need for cognitive equilibrium, and results from the sequential navigation of each stage.

Here arises a potential tension between Kohlberg's notion of pre-conventional reasoning and Noddings's ethic of care. To Kohlberg, moral reasoning is a function of a person's age, and young people, particularly those who are of the age to attend camp, engage a form of reasoning governed by punishment and reward. Relationships, from this perspective, are formed in order to avoid some form of punishment or to gain some form of reward and the consequences of these choices are exclusively self-serving. An ethic of care, on the other hand, requires a sense of duty to the other that may not be possible among young people governed by pre-conventional moral reasoning. Here in lies the tension between Kohlberg's stages of moral developing and Noddings's ethic of care.

Two points offer insight into the ways young people, particularly those Kohlberg might describe as preconventional thinkers, might indeed engage in the bidirectional exchange of care. Recall first that Noddings (2003) depicts the caring relation as “an unequal meeting” between a care-giver and the one in-need. Through the caring exchange the two become equal, not because the one in-need adopts an ethic of care akin to the care-giver’s, but rather because the one in-need responds to the care-giver’s attitude of care in some perceptible way. This response, which can be as simple as a baby’s coo or a child’s trust, confirms the care-giver’s ethic and, by doing so, levels the once unequal meeting between care-giver and the one in-need. In other words, the one in-need cares through his or her response, not through an ethic of care per se. While it is possible that a young person’s age may limit the extent to which he or she adopts an ethic of care, it should not, according to Noddings (2003), affect the ability to share in the exchange of care with a care-giver.

The second way one might examine the tension between a young person’s moral reasoning and his or her ability to share in a caring relation is to challenge Kohlberg’s assumption that all young people travel a relatively fixed and unidirectional path of moral development. Developmental systems theory, on the other hand, assumes that youth are active agents in their own development and through this agency will navigate moral decisions in highly contextualized ways. From the developmental systems perspective, young people actively engage in a bidirectional exchange of influence with their surroundings, which results in cognitive development (Ford & Lerner, 1992). Relationships are one mechanism through which young people exert themselves into the external world as well as a means to receive environmental cues. Furthermore,

meaningful connections with nonfamilial adults may be particularly important among youth who are beginning to exert self-determined processes outside the home environment (Noam & Fiore, 2004). Moral development, from this perspective, depends on the nature of the young person's relationships, rather than the successful completion of a given moral stage. Whereas Kohlberg's stages of moral reasoning may preclude a young person from adopting an ethic of care, this non-staged approach suggests that young people might adopt an ethic of care given sufficient interpersonal and contextual nutrients. Together, the notion of Noddings's "unequal meeting" and the notion that development is fluid and contextual rather than static suggest that young people might enter into a caring relation with a care-giver and might even, through this relation, develop an ethic of care of their own.

Research specific to the ethic of care suggests that sex, on the other hand, may or may not be related to how a young person engages in caring interactions with others. Classic conceptions of caring depict females as more natural care-givers (e.g., Gilligan, 1984; Noddings, 2003), yet little is known about how male and female children may differ in their experiences with caring. Studies investigating this phenomenon do not consistently support the notion that females are, by their sex alone, more caring (Galotti, 1989; Jaffee & Hyde, 2000; Turiel, 1976; Woods, 1996). However, camper and counselor sex is known to play a role in the child's experiences in educational settings because young people often respond differently to staff members they perceive as similar (Anderson-Burcher, Cash, Saltzburg, Middle, & Pace, 2004; DuBois, Holloway, Valentine, & Cooper, 2002).

**Interpersonal factors.** Like individual factors, group-level factors might also impact program quality at camp. The ways kids interact with one another, with camp staff, and with the camp program contributes toward a program climate that can be either positive or negative. Climate in general is known to impact young people's experiences in school (Roeser, Midgley, & Urdan, 1996; Vieno et al., 2005; Wilson, 2004), sport (Newton et al., 2009), and out-of-school-time settings (Roth & Brooks-Gunn, 2003); in fact, climate is among the key mechanisms known to influence how youth experience a given setting (Bell & Carrillo, 2007; Roth & Brooks-Gunn, 2003). Unfortunately, program climate, especially the aspects of the climate that are determined by the social interactions between individual kids, remains largely out of the program director's control.

A difficult camper-cohort might even have negative implications for camp program quality, specifically with respect to camper interactions and staff burnout. In their review of program leaders' experiences working with youth in the after school context, Reed and Walker (2010) found that the peer climate and individual differences, especially differences in behavior regulation, were among the top challenges leaders contend with in this setting. Differences in ethnicity, race, socioeconomic class, and personality all contribute towards differential peer interactions in program settings, and, while experienced leaders contend with these differences effectively, all staff are prone to burnout in settings where these differences contribute toward negative peer interactions (Reed & Walker, 2010). Staff burnout, which is particularly problematic among young, inexperienced youth program leaders (Paisley & Powell, 2007), can influence how staff members implement the activities in a youth program, which in turn impacts the

program's overall degree of quality (Durkak & DuPre, 2008). While the social make-up of a youth program depends largely on the characteristics of the youth enrolled in the program, it is important to note the ways a diverse peer climate might lead to negative social interactions and staff burnout in the program setting.

### **Summary**

Caring communities foster positive youth development through caring youth-adult relationships and an overall sense of connectedness. Caring, one facet of a caring community, is a relational ethic that, while beneficial to both the care-giver and the one-in-need, is a critical nutrient for the positive development of young people. Noddings's (2003) ethic of care considers the ways the care-giver receives and responds to the needs of the one to be cared-for, specifically the dual processes of engrossment and motivational displacement. Through these processes, the care-giver exudes an attitude of care that is then received by the one-in-need. The attitude of care, which communicates the care-giver's genuine desire to attend to the one in-need, compels the one-in-need to respond in some perceptible way. This response completes the caring relation by affirming the care-giver's ethic and allowing the flow of positive affect between the care-giver and the cared-for. Young people benefit from caring relationships with adults, as evidenced by research specific to the school setting (e.g., Battistich et al., 2004; Libbey, 2004; McNeely & Falci, 2004) and out-of-school-time setting (Newton et al., 2007); so much so that caring relationships with adults is thought to protect youth from harm (Resnick et al., 1997).



Connectedness, the second facet of caring community, is a relational phenomenon that emerges through positive interactions between two people and serves to bind a person to the setting as a whole. Unlike caring, connectedness represents the overall presence and qualitative nature of the connections between people in a given setting. Connectedness has two critical components, the interpersonal component and the setting component, neither of which depend, necessarily, on an ethic of care. In relation to caring, connectedness represents the broader sense of belonging within a given setting, not necessarily the bidirectional exchange of care between two people. These concepts are here combined to represent an overall caring community. Summer camp is a place that is uniquely situated to promote caring youth-adult relationships, as well as overall connectedness; therefore, it is important to better understand the ways camp programs might foster campers' perceptions of camp as a caring community.

The review of the literature specific to school and nonschool programs suggests that design and implementation factors contribute to youth outcomes, such as perceptions of caring, in unique and meaningful ways. Program design factors are features that are intentionally structured to meet an identified youth development outcome that likely foster youth outcomes by providing a consistent and robust framework for program processes. Program goals, activities, and atmosphere represent design factors shown to contribute to youth outcomes (cf., Battistich et al., 1997; Newton et al., 2007; Serow & Solomon, 1979). It follows, then, that design factors (e.g., program goals and activities) at camp are likely influence, to some degree, campers' sense of camp as a caring community.

Implementation styles, on the other hand, may influence campers' sense of camp as a caring community differently than design factors. The ways individual staff members interact with campers at camp depends in part on individual attributes, such as an ethic of care, that characterize one-on-one interactions. The precise mechanisms underlying staff implementation styles remain unknown; however, researchers generally agree that staff play a central role in promoting desirable outcomes in youth development programs (Catalano et al., 2004; Gambone et al., 2002; Pittman et al., 2005). Thus implementation factors, defined here as staff attributes and practices that characterize their interactions with youth in program settings, likely influence how youth feel cared for in the program. Of particular interest is staff members' ethic of care and the ways they promote connectedness at camp.

This review of the potential ways program design and implementation factors may influence campers' sense of camp as a caring community supports the following hypotheses:

H<sub>1</sub>: A caring-based intervention will affect scores on the Caring Camp Climate-Camp Connectedness Scales more than time spent at camp alone.

H<sub>2</sub>: Program design and implementation factors in combination will increase scores on the Caring Camp Climate-Camp Connectedness Scales more than design factors or implementation factors alone.

## CHAPTER 3

### METHOD

This study explored the effects of program design factors and staff implementation factors on campers' sense of camp as a caring community. Two research hypotheses guided this investigation:

H<sub>1</sub>: A caring-based intervention will affect scores on the Caring Camp climate-Camp Connectedness Scales more than time spent at camp alone.

H<sub>2</sub>: Program design and implementation factors in combination will increase scores on the Caring Camp Climate-Camp Connectedness Scales more than design factors or implementation factors alone.

Issues related to the methods that were used to explore these questions are discussed in the following section, which is delineated in sections specific to setting, participants, measurement, procedures, and data analysis.

#### **Setting**

The extent to which campers perceive camp as a caring community depends on the size, duration, staff, culture, activities, and overall purpose of the camp. Within this array of factors that contribute toward camp processes, day camps include an interesting

combination of factors that inherently promote caring and connectedness as well as factors that may inhibit these phenomena. In an effort to better understand caring processes within this unique setting, data were collected at three Salt Lake City day camps during the summer of 2010.

The 3 day camps, all of which operate under the direction of a single municipal organization, were housed at facilities on the grounds of three different public parks within the Salt Lake City area. The parks were approximately 2 miles apart from one another but within city boundaries. The camps were programmatically similar and served the same demographic, which is drawn from an urban area (estimated population 180,000) that is a predominately White (80%), middle class (median household income \$38,000) population (U.S. Census Bureau, 2010). Camp fees varied depending on household income (\$10/month to \$400/month), with most participants paying roughly \$200 for each 4-week session. Camp operated from 9:00am to 5:00pm Monday through Friday. While enrollment varied from session to session, each site served between 45 and 60 campers per session; approximately 75% of the campers attended both sessions. Each session was four weeks long and, although a large percentage of campers attended both sessions, there was a distinct change in the camper population between the first and second sessions. Campers were divided into age-groupings for certain activities each day but most camp activities incorporated campers of all ages.

Each site maintained a 1 to 10 staff to camper ratio, resulting in a total of four to seven camp counselors on site each day. Camp staff were 18 years or older and most of the staff members lived within in the areas surrounding the camp locations. Approximately 70% of the staff members were currently attending college while the

remaining 30% had either graduated or did not attend college at all. In addition to camp counselors, there was a Site Coordinator who was responsible for the general day-to-day issues that came up at each site during the camp day. Site Coordinators and counselors from all three sites participated in a week-long training session prior to the start of camp. During the training session, all of the staff members received essential safety training, planned camp activities, and spent time getting to know one another. Once camp began, staff members did not formally meet, but would stay after camp from time to time to discuss important issues. In a typical season, roughly 70% of the staff worked for at least one prior year at camp.

Camp activities were determined by the camp staff and varied from session to session. At the start of each four week session, campers chose among activities in the areas of arts and technology, drama, sports, cooking, and outdoor adventures. Field trips, guest performers, and special themed events rounded out the session. The daily schedule, as well as specific examples of activity offerings, is found in Appendix A.

### **Participants**

The participants for this study were male ( $N = 32$ ) and female ( $N = 23$ ) day campers between the ages of 7 and 14 ( $M_{\text{age}} = 10.8$  years old). Fifty-five total campers from the three camps participated in this study by completing the study questionnaires at three different times. Demographically, the sample represented a diverse set of racial and ethnic backgrounds (58.2% of the participants identified themselves as Caucasian, 10.9% as African American, 7.3% as Hispanic, and the remaining 23% were either American Indian, Asian, or “other”) and was a largely low- to middle-class socioeconomic group.

The legal guardians for each camper provided consent for participation in this study during the camp registration process at the start of the summer. Campers read and signed an assent form prior to completing the first set of questionnaires; campers who chose not to participate were asked to leave their questionnaires blank. All data were coded such that any identifying information was removed and unknown to the researcher and camp personnel.

### **Measurement**

Campers' sense of camp as a caring community was operationalized to include perceptions of caring and perceptions of connectedness; both dependent variables were measured by a pencil-paper self-report that the campers completed at three different times during the summer. Campers' perceptions of caring were examined with the Caring Climate Scale (Appendix B; Newton, Fry, Gano-Overway, Watson, Kim, Magyar, 2009) which considers two aspects of a caring community: (a) camper-counselor interactions and (b) campers' interactions with the group as a whole. This scale, which was developed for use within a youth sport camp, is based largely on Noddings's (2003) concept of caring and includes 14 items to which participants respond using a five point Likert-type rating scale (1 = strongly disagree to 5 = strongly agree). Items ask campers to reflect specifically on camp staff ("The leaders are kind to kids") as well as on the group as a whole ("Everyone likes one another for who they are"). This scale has shown evidence of internal structure ( $\alpha = .92$ ) and content validity among 9 to 17 year-old participants in the youth sport setting (Newton et al., 2009).

Connectedness was measured using the Camp Connectedness scale from the American Camp Association's Youth Outcomes Battery (Sibthorp, Browne, & Bialeschki, 2010). This scale, which was developed for use specifically in the camp setting, assesses campers' overall relationship with camp. Within that context, the Camp Connectedness scale has demonstrated sound psychometric properties among 8 to 12 year olds ( $\alpha = .87$ ). The scale is largely based on Libbey's (2004) work on school connectedness and includes six domains known to promote positive connections to school. Campers are asked to reflect on their personal feelings of belonging ("I feel like I belong"), their liking for camp ("I have a good time"), their feelings of choice and involvement ("I make choices that make a difference"), their peer relations ("Other campers respect me"), their perceptions of staff support ("The counselors listen to me"), and their sense of emotional safety ("I feel safe to express myself."). Respondents complete each of the 12 items by responding to a six point Likert-type rating scale (1 = false to 6 = true).

The Caring Camp Climate (Newton et al., 2009) and Camp Connectedness (Sibthorp et al., 2010) scales were combined and adapted slightly in order to appear as a unified scale. First, items were framed with a single statement that read "At this camp..." and a six point Likert-type response set was used for both scales. A pilot test of the combined scale resulted in the second adaptation, which was made in order to avoid ceiling effects in the final use of the instrument. This adaptation included changing the response set from "false" and "true" anchors to "definitely false!" and "definitely true!" anchors, as well as adding the word "always" to each of the items ("I *always* feel like I belong"). Respondents' ability to read and respond to the scale items was also assessed

during pilot testing and it was determined that campers as young as seven years old could respond to the items on the questionnaire when given reading support from camp staff.

### **Procedures**

In order to answer the research questions, this study employed a mixed (within- and between-subject) repeated-measures quasi-experimental design. The first question, which asks if a caring-based treatment fosters campers' sense of camp as a caring community more so than time at camp alone, was investigated using a design with two between-subjects levels of the treatment condition (caring intervention and no caring intervention) at three times. Each time coincided with the conclusion of the second, fourth, and sixth week of camp (Appendix C). The second research question focuses on the type of caring intervention; specifically a design- versus an implementation-based intervention. The treatment procedures are described below.

### **Program Design Factors**

Program design factors were defined as the caring camp activities, which were largely based the Caring School Communities curriculum (Battistich et al., 1997). Camp counselors were trained how to use the caring curriculum using activity cards that were minimally adapted from the school-based lesson plans. Each activity card (see Appendix D) included the purpose of the activity, supplies, a detailed outline of instructional steps, and discussion questions. In order to ensure adequate differences in treatment conditions, the program design-based training focused exclusively on the activities themselves rather than the rationale behind the activities (the rationale behind the activities was instead the



focus of the implementation-based training). The one and a half hour training took place in the evening immediately following the camp day and was conducted by the researcher at the program facility.

Caring School Communities (Battistich et al., 1997) consists of four primary types of activities: cross-age buddies, classroom meetings, homeside activities, and schoolwide activities (Battistich et al., 1998). For this study, activities were selected from these broad categories and were adapted in order to best fit within the existing camp schedule. The broad categories, and their respective camp applications, are described below.

**Cross-age buddies.** The purpose of the cross-age buddy activities is to facilitate connectedness among youth participants, to help younger children and new participants feel a sense of belonging, and to promote engagement and expertise among veteran participants (Battistich et al., 1998). In this study, older campers were selected by camp staff and then paired with younger campers for two different activities that took place during the 2-week period between survey intervals (this interval was between Time One and Time Two for Treatment Site A and between Time Two and Time Three for Treatment Site B). For the first activity, the older buddies selected an activity to do with their younger buddies; activities ranged from reading a book to playing basketball on the playground and lasted for about an hour. The second buddy activity was a paired reading session in which the older buddy read out loud to the younger buddy in a quiet space for approximately 45 minutes. Prior to the scheduled Buddy Time, a designated staff member met with the older buddies to review the purpose of buddy time, to discuss their role as an older buddy, and to help them identify an activity to do with their partner. The staff

member used the Buddy Time activity card for this session, which included discussion questions designed to elicit thinking about the importance of caring between older and younger campers.

**Team meetings.** The purpose of the team meeting is to foster a sense of community within the small group, invite youth's voice in decision-making, and to elicit thinking on moral and pro-social concepts (Solomon, Watson, Battistich, Schaps, & Delucchi, 1996). Team meetings were held at three times during the 2-week experimental interval. Working from the Team Meeting activity card, the staff member assigned to each team lead the small, age-based group in an ethical problem solving exercise. Team members were encouraged to focus on caring within each ethical scenario and discussion questions urged campers to reflect on the ethics of caring both within the scenario and then within the camp and their home settings. The ethical scenarios varied slightly for the younger and older teams, although the same activity card (and discussion questions) was used for each of the teams.

**Team activities.** Team activities were based on the Classroom Activities component of the CSC curriculum (Battistich et al., 1998). In the classroom setting, these activities are intended to promote positive interactions between classmates in active and engaging teambuilding activities. In this study, team activities took place approximately three times during the 2-week experimental interval within the small, age-based group. The counselor from each group worked from three different activity cards for each challenge. The Team Activity was called M & Ms and required each camper to share something unique about themselves based on the colors of M & Ms they selected prior to the activity. The second Team Activity was called Protect Your Peer and

involved working with a partner to protect one another from a small foam ball tossed around by the group. The final Team Activity was called Silent Introductions and asked each camper pair to spend 3 to 5 minutes getting to know one another in quiet, one-on-one conversation. At the end of 5 minutes, each pair introduced one another using only hand gestures. An Activity Card, which included discussion questions that asked campers to reflect on the nature of caring within their team, was provided to each counselor and reviewed during the staff training session; additionally, the staff practiced each activity and discussed possible limitations.

**Campwide activity.** The purpose of the campwide activity is to foster a sense of common purpose at the camp level and to facilitate caring connections across age groups; within the school setting specifically, these activities generally represent a philanthropic effort to benefit the community at large (Battistich et al., 1998). Campers and staff at each of the study sites typically met each morning to review the day ahead, plan special events, and celebrate camper achievements. For this study, this time was also used to identify and implement a campwide service project. The authors of the CSC intentionally leave this aspect of the curriculum open for discussion among students in the hopes that the students will identify a cause that has personal relevance and interest. In this study, then, each site identified a different cause and created a service effort specifically for that cause. Campers at one site, for example, decided to conduct a penny drive for an area homeless shelter. The goal, as identified by the campers at this site, was to fill a large jar with enough change so that its weight would equal that of the smallest camper at camp. Each morning, campers would donate change to a large jar and the jar would be weighed during the all-camp meeting. Counselors worked from an Activity Card for discussion

prompts that reinforced the caring purpose of the campwide activity. The activity, and its caring purpose, was discussed each morning during the 2-week treatment interval.

### **Staff Implementation Factors**

Staff implementation factors were defined to include the ways camp staff members employ an ethic of care in their interactions with campers throughout structured and unstructured time at camp. An ethic of care-focused staff training session was used to orient camp staff members to the ethic of care and discuss the ways they can extend care to their campers while at camp. The purpose of the staff training session was to contribute to staff members' implementation factors with campers and, in doing so, the ethic of care-based training session served as a second independent variable in this study.

The ethic of care staff training session reflected Noddings's (2003) conception of pedagogical caring, which includes four processes by which people adopt an ethic of care: modeling, practice, reflection, and confirmation. The one and a half hour training session included the following general components (Appendix E).

**Modeling.** The researcher role-played a caring exchange and staff discussed the elements of the exchange that were unique to caring. Examples from home, school, and camp were used to illustrate how adults extend care to young people. Staff members also identified caring adults from their own life and described how these figures demonstrated their ethic of care throughout their life. Staff members discussed specific strategies they might use not only to model an ethic of care to their campers, but ways they might encourage campers to model caring amongst one another. For example, the staff

members considered the ways the veteran campers might serve as role models to the younger campers.

**Dialogue.** The researcher facilitated dialogue about the differences between relational caring and justice-oriented caring. Discussion questions focused on when each approach is most appropriate, how males and females may differ in their approaches, and why relational caring is critical for positive youth development. Staff members discussed ways they extend care to campers and the challenges they face when interacting with campers. Furthermore, staff also reflected on the opportunities campers may or may not have to engage in dialogue about caring during the camp day. Discussion concluded after counselors identified aspects of the camp schedule that might lend themselves best to dialogue, which included, for example, lunch time and team meetings.

**Practice.** Each staff member received an ethic scenario in which the primary actor faced a dilemma that involved caring for other people. Staff members read the scenarios quietly to themselves, focusing on the role of ethical caring in the scenario. Each staff member then described how they would handle the scenario, and, together with the group, they described how their scenario applied within the camp setting. Staff members discussed ways they facilitate caring exchanges amongst campers, specifically the caring exchanges that might allow campers to practice giving and receiving care.

**Confirmation.** The researcher provided each staff member with an index card on which to identify three campers by name: one camper with whom they feel a special caring connection, one camper they struggle to connect with, and one camper with whom they would like to form a new caring connection. Staff members then wrote one specific thing they would do in order to maintain or grow the connections identified above. Staff

members also identified ways they might confirm caring exchanges they observed between campers. The researcher told the group that the caring goals would be revisited during the second staff training session. The researcher confirmed caring practices in the staff members by concluding with a small gift given in the spirit of the caring work they do at camp.

### **Intervention Procedures**

The intervention timeline is represented in Table 1. The study instrumentation was administered by the Site Coordinator at all three camps at Time One in order to establish a baseline measure of campers' sense of caring and connectedness before either of the staff training interventions. At the end of the baseline phase, Camp A and Camp B each participated in a staff training designed to foster caring and connectedness at camp. Camp C served as a comparison condition and did not receive any staff training. Camp A's training focused on the Ethic of Care and Camp B's training focused on the Caring Activities. Both of these training sessions were conducted just prior to the start of the first treatment phase, which extended between Week Three and Four of the camp season. Week Five represented the start of the second treatment phase, and, just prior to this phase, both Camp A and Camp B received a second staff training. For this second round of staff training, Camp A participated in the Caring Activities training and Camp B participated in the Ethic of Care staff training.

Each staff training session took place in the evening immediately following the camp day and was conducted by the researcher. Each session lasted approximately one and a half hours; staff members were not required to attend the training, but were paid by

Table 1: Intervention Timeline

	Session 1		Session 2
	Weeks 1-2 Baseline Phase	Weeks 3-4 Treatment Phase 1	Weeks 5-6 Treatment Phase 2
Camp A	No Treatment	Ethic of Care Training	Caring Activities Training
Camp B	No Treatment	Caring Activities Training	Ethic of Care Training
Camp C	No Treatment	Baseline Phase	Baseline Phase

the organization for their time. Dinner and small thank you gifts (\$15 iTunes gift cards) were provided by the researcher.

Camp C served as the comparison condition and did not receive the Ethic of Care staff training or Caring Activities staff trainings; however, campers at Camp C completed the study instruments at Times One, Two, and Three in order to examine the effects of time alone on campers' sense of camp as a caring community.

Each camper completed the questionnaires after they assented to participate in the study; camp staff members were available to read the items to the campers if the campers did not understand or needed help reading the items. Fewer than five campers across all three sites relied on counselor assistance to complete the questionnaire. All of the questionnaires were administered and collected by the Site Coordinator who was trained in survey administration prior to the administration date. Each camper completed the questionnaires under these conditions at three points during the summer.

### **Control of Extraneous Variables**

Extraneous variables are known to play an important role in the assessment of youth programs (Ewert & Sibthorp, 2009); experimental and statistical measures were taken in order to control the extent to which these variables influenced scores on the dependent variable. The researcher identified potential sources of error variance at the camper, counselor, and camp levels.

Campers represent a host of personal attributes that characterize the ways each camper experiences camp. Of particular note were campers' age, sex, and the number of years spent at camp. Age is a variable that may or may not correlate with a specific level of moral development, but should, in most cases, impact the nature campers' expectations and resultant experiences within the camp program. Sex is an additional variable around which campers may differ; furthermore, the congruence between camper and counselor sex may impact the caring relation. Time, lastly, fosters caring relations simply by providing increased opportunity for positive interactions. In order to assess the impact of these potentially confounding variables, campers identified their age, sex, and time spent at camp prior to completing the study instruments.

Counselor-level differences were also expected to influence campers' perceptions of camp as a caring community; of particular concern were factors that might influence staff members' ethic of care and the ways they interact with campers at camp. Age is often considered a predictor of moral maturity as well as a predictor of an individual's ability to adopt an ethic of care (Gilligan, 1982; Kohlberg, 1984). Sex, similarly, may contribute to moral orientation (Gilligan, 1982). Therefore, data specific to counselors' age and sex were collected. Demographic items attained additional data known to



influence adults' ethic of care, such as the counselors' number of years working at camp and their educational level (Juuvari, 2006).

Demographic information was collected with the first round of survey administration (Time One). Eleven camp counselors at the two experimental sites were trained in this study. Staff members, including the Site Coordinator at each site, were primarily college-age ( $M_{\text{age}} = 22$  years old) and had worked within one of the 3 day camps for 0 to 5 years ( $M_{\text{years working at camp}} = 2$  years). Five of the staff members were male, six were female, and they were predominately Caucasian. Each counselor gave consent to participate in this study prior to completing the training interventions.

### **Assessment of Treatment Fidelity**

The accurate and consistent implementation of the Caring Activities was a critical concern in this study. Information specific to the ways the activities were actually facilitated at camp, here referred to as treatment fidelity, was collected during the intervention period. Unintended variations in treatment fidelity can result in inaccurate statistical findings and, more importantly, may prevent the extent to which the findings can inform future applications (Domitrovich & Greenberg, 2000). Research specific to the CSC curriculum (Battistich et al., 1998; Battistich et al., 1997; Watson et al., 1997) documents a relatively high degree of fidelity when implemented by teachers in the school setting (Domitrovich & Greenberg, 2000). One of the fidelity measures employed in much of this research, the *Teacher Attitudes toward Students Survey* (Watson et al., 1997), assumes that teachers' attitudes toward school, their job as a teacher, and toward

kids in general predict intervention fidelity (Watson et al., 1997). Therefore, the *Teacher Attitudes toward Students Survey* was adapted for use among camp counselors.

The adapted version of this scale (Appendix H) includes three domains, each of which begin with a different question stem. The first domain targets counselors' caring practices and behaviors at camp by asking counselors to respond to the question "In your job as a camp staff member so far this summer..." Each of the 10 items (e.g., "I encourage campers to participate in decision making") under this domain were answered along a five point Likert-type scale anchored at 1 ("Never") and 5 ("Always"). The second domain targeted counselors' perceptions of caring community at camp by asking them to respond to the statement "At this camp...". Each of the 14 response items (e.g., "Campers are always friendly with one another") were anchored at one ("I strongly disagree") and five ("I strongly agree"). The final domain focused on counselors' attitude towards campers in general. Counselors responded to eight items (e.g., "Kids can be trusted") that followed the statement "In general, I believe that..." along a five point Likert-type scale anchored at one ("I strongly disagree") and five ("I strongly agree"). Each staff member completed this questionnaire at Time One, Time Two, and Time Three during the study time period.

Staff members' moral orientation is also likely to affect the ways they interact with youth in the camp setting. Moral orientation was assessed using a 12-item portion of the Measure of Moral Orientation (Liddell et al., 1992), a scale developed to measure moral orientation for college students. The Measure of Moral Orientation is based on Gilligan's (1982) care- and justice-orientations and asks respondents to rate statements as to how closely they describe the individual's thoughts and feelings during day-to-day life.

Response options vary between a (“Strongly Disagree”) and d (“Strongly Agree”). While it is unlikely that a camp counselor’s moral orientation will shift dramatically over the course of the camp season, it is possible that a preexisting orientation will influence the counselors’ interactions with campers and, in doing so, affect campers’ sense of camp as a caring community. In this study, camp counselors completed the Measure of Moral Orientation as a part of the overall staff instrumentation at Times One, Two, and Three.

Treatment fidelity was also assessed through staff interviews, a method known to provide useful means to triangulate camp data (Henderson, Powell, & Scanlin, 2005). The Site Coordinators from each of the three participating sites, as well as staff members designated by the Site Coordinators, were interviewed following the implementation periods. The researcher asked open-ended questions (Appendix F) designed to elicit reflection on the Caring Activities intervention and the features of the camp session that may have impacted accurate facilitation of the Caring Activities. Each in-person interview, which lasted approximately one hour, was transcribed by the researcher.

### **Data Analysis**

Data were analyzed at the conclusion of the experimental timeframe. Profile analysis is a multivariate approach that enables the researcher to examine potential differences between camps as well as within-subjects differences on the Caring Climate-Camp Connectedness scores over time and was the statistical technique used to test the hypotheses of this study. Caring and connectedness were expected to be correlated with one another and, in general, correlated dependent variables are analyzed using multivariate analysis of variance (MANOVA; Tabachnick & Fidell, 2007). The benefits

of MANOVA with only two dependent variables are minimal; therefore, a separate analysis of variance (ANOVA) was used to generate independent profiles for each of the dependent variables.

Two profile analyses were conducted, one for each of the dependent variables. Three features of each treatment profile (plot of scores on the study instrumentation by camp over time) were of particular interest: level, parallelism, and flatness (Tabachnick & Fidell, 2007). Each of these qualities and their hypothesized relation to the research questions are outlined below.

Prior to conducting the profile analysis, data were inspected for normality and the presence of outliers. The assumptions of normality, homoscedasticity, and sphericity were also tested. In an effort to assess the value of the findings achieved in this study, a power analysis was conducted prior to data collection in order to determine the necessary sample size. Effect sizes specific to caring-based interventions in school and non-school settings range from small effect (.12, Newton et al., 2009) to medium effect (.47, Battistich et al., 2000; a medium-size effect is targeted in this study ( $\eta^2 = .15$ ). Given this estimated effect, 76 total participants were necessary in order to achieve adequate power ( $1-\beta > .80$ ) (Tabachnick & Fidell, 2007).

Once the data were cleaned and screened, the first hypothesis (a caring-based intervention will foster campers' sense of camp as a caring community more so than time at camp alone) was examined using the test of parallelism. The test of parallelism allows the researcher to examine the potential interaction between time and the intervention; in other words, the test of parallelism in this case examines the degree to which the profiles of caring and connectedness for the treatment and nontreatment

conditions follow similar slopes or intersect one another (Tabachnick & Fidell, 2007). A significant result to the test of parallelism reveals that there is a time by treatment interaction and it can then be inferred that the level of reported caring scores depended on the treatment group. Tests of parallelism were conducted on the profiles of both caring and connectedness.

Tests of level and flatness follow only a non-significant test of parallelism. The test of level examines the between-group differences on the dependent variable. The test of flatness likewise follows only a nonsignificant test of parallelism and is used to examine the within-subjects differences on the dependent variables. Within a repeated measures design, the test of flatness assesses the effect of time on the dependent variable (Tabachnick & Fidell, 2007).

The second hypothesis assumes a time by treatment interaction and, consequently, a significant deviation from parallelism on one or both of the dependent variables. In an effort to more closely examine the differences between the treatment and non-treatment conditions, as well as the potential differences between the design and implementation treatment conditions, planned comparisons were used on the dependent variables that showed evidence of a time by treatment interaction. The first comparison, which was a follow-up test specific to the first hypothesis, examined the treatment and nontreatment means on the dependent variables at Time Two and Time Three. The second comparison looked specifically at the treatment conditions in order to see if the two staff training interventions had differential effects on one or both of the dependent variables. Significant values for the second contrast would support the second hypothesis, which stated that the combination design and implementation-based staff training sessions

would affect campers' perceptions of camp as a caring community more so than either intervention independently.

Qualitative data gathered from the staff interviews were analyzed by the researcher at the conclusion of the study timeframe. Interview data were inspected for themes relating to the nature of the camp environment as well as themes indicating the extent to which the Caring Activities were implemented as planned.

### **Summary of Methods**

Through the use of a mixed repeated measures, quasi-experimental design, data were collected from day campers at three different sites, two experimental sites and one comparison site, at three time points, Time One, Two and Three. Two questionnaires, the Caring Camp Climate Scale and the Camp Connectedness Scale, were administered to the campers at all three sites in order to examine the following research questions: (1) Does a caring-based intervention foster campers' sense of camp as a caring community more so than time at camp alone? (2) If a caring-based treatment indeed fosters campers' sense of camp as a caring community more so than time at camp alone, what is the nature of the intervention that results in this effect?

Two profile analyses were conducted in order to assess caring and connectedness, which were the dependent variables in this study. Scores from each questionnaire were first analyzed using the test of parallelism in order to examine the potential time by treatment interaction on both the caring and connectedness dependent variables. A significant test of parallelism was hypothesized for each dependent variable, and, if the data indeed supported this hypothesis, then planned comparisons would be used on the

dependent variable exhibiting the significant interaction. If the data did not support the hypothesis, which would be evidenced by a non-significant test of parallelism, then tests of level and flatness would be used to assess within- and between group differences between treatment and nontreatment conditions on one or both of the dependent variables. Follow-up interviews were conducted to triangulate quantitative data and as a measure of implementation fidelity. Camper, counselor, and camp-level data were also collected for experimental and statistical control of potentially confounding variables and to further examine the extent to which the study interventions were implemented as planned.

## CHAPTER 4

### RESULTS

This study examined campers' sense of camp as a caring community and the impact of program design factors and staff implementation factors on this perception. Campers at a municipal day camp completed the caring and connectedness instruments at three different points, each roughly two weeks apart, over the course of the summer in order to assess the extent to which the independent variables affected campers' sense of camp as a caring community over time. Program design factors and staff implementation factors represented the independent variables of interest for the study and were operationalized, respectively, as a staff training session designed to orient staff to a set of caring activities and a training session designed to foster an ethic of care among camp staff. Two hypotheses guided this investigation:

H<sub>1</sub>: A caring-based intervention will affect scores on the Caring Climate and Camp Connectedness scales more than time spent at camp alone.

H<sub>2</sub>: Program design and implementation factors in combination will increase scores on the Caring Climate and Camp Connectedness scales more than design factors or implementation factors alone.

Data were analyzed in relation to these hypotheses, as well as in relation to several demographic variables of interest. The following chapter provides a summary of



the results from the data analysis procedures, which included descriptive analysis of the sample, tests of statistical assumptions, hypothesis testing, and analysis of the implementation fidelity of the independent variables.

### **Data Cleaning and Screening**

Fifty-seven campers completed the study instrumentation at all three times. Two participants were removed from further analysis because they did not meet the minimum age criteria, resulting in a final sample of 55 campers between the age of 7 and 14 years old.

Data from this complete set were inspected for missing data, as well as univariate and multivariate outliers (Tabachnick & Fidell, 2007). Results of a missing values analysis suggested that patterns did not exist in the missing data, and, in the effort to maintain sufficient sample size, multiple regression was used to predict missing values based on the remaining individual scale items (Tabachnick & Fidell, 2007). Standardized z-scores and histograms of each scale item were generated in order to assess the presence and potential impact of univariate outliers; no z-scores in excess of 3.29 ( $p < .001$ ) were found. Multivariate outliers were examined by calculating the Mahalanobis distance for each set of responses but no values exceeded the critical chi-squared value ( $p < .001$ ).

### **Descriptive Statistics**

Campers became eligible to participate in this study after their parents read and signed the Institutional Review Board (IRB) parental consent form, and they read and

signed the IRB camper assent form (Appendix G). Tables 2 through 4 present the demographic characteristics of the sample. Fifty-three percent of the participants were

Table 2

*Breakdown of Sex by Site*

	Males	Females
Treatment Camp A	6	7
Treatment Camp B	16	9
Comparison Camp C	10	7
Total	32	23

male ( $N = 32$ ) and 42% were female ( $N = 23$ ). The average age was 10.8 years old. When asked to identify their racial or ethnic background, 58% identified themselves as Caucasian, 11% African American, 7% Hispanic, and the remaining 23% identified themselves as American Indian, Asian or Pacific Islander, or “other.” With respect to time spent at camp, 38% of the campers indicated they were in their first year in the program; however, the mean for years spent at camp was just over 2 years.

### **Assumption Testing**

Prior to conducting statistical analysis of the study hypotheses, the assumptions specific to the planned analyses were assessed. First, the relation between the dependent variables was examined using a bivariate correlation (Table 5). Positive and moderately strong correlations were found between caring and connectedness at all three time points.

Table 3

*Breakdown of Ethnicity by Site*

	Black/African American	Asian/Pacific Islander	Hispanic	Native American	Caucasian	Other
Treatment Camp A	0	0	0	0	11	12
Treatment Camp B	5	1	4	0	9	6
Comparison Camp C	1	0	0	3	12	1
Total	6	1	4	3	32	9

Table 4

*Breakdown of Age and Years at Camp by Site*

		<i>Mean</i>	<i>SD</i>
Treatment Camp A	Age	11.08	1.50
	Years at Camp	2.69	1.44
Treatment Camp B	Age	10.68	1.82
	Years at Camp	1.88	.927
Comparison Camp C	Age	10.76	1.82
	Years at Camp	2.17	1.38
Total	Age	10.8	1.73
	Years at Camp	2.16	1.23

Table 5

*Pearson Correlations Among Dependent Variables*

	T <sub>1</sub>	T <sub>2</sub>	T <sub>3</sub>	T <sub>1</sub>	T <sub>2</sub>	T <sub>3</sub>
	Caring	Caring	Caring	Connect	Connect	Connect
T <sub>1</sub> Caring	1	.683**	.638**	.604**	.518**	.438**
T <sub>2</sub> Caring		1	.703**	.565**	.715**	.522**
T <sub>3</sub> Caring			1	.625**	.629**	.698**
T <sub>1</sub> Connect				1	.751**	.629**
T <sub>2</sub> Connect					1	.734**
T <sub>3</sub> Connect						1

\*\* Correlation is significant at the  $p < .01$  level (2-tailed)

Histograms were generated for the mean scores of caring and connectedness to investigate the distribution of the data, which revealed the data were negatively skewed and moderately kurtotic (Table 6). The Kolmogorov-Smirnov test of normality confirmed that several sets of means, notably the means for caring at the two treatment sites at Time Two ( $D(13) = .294, p < .001$  and  $D(25) = .214, p < .001$  respectively) were not normally distributed. However, Tabachnick and Fidell (2007) do not recommend data transformations when the means are skewed somewhat similarly because the procedure typically produces minimal overall effects. Despite the skewed nature of some of the means, it was determined that the data in general sufficiently met the normality of distribution assumption.

Table 6

*Descriptive Statistics for Means by Site*

Site	Variable	Mean	SD	Skewness	Kurtosis
Comparison Site	Care at Time 1	5.09	.588	-.663	-.619
	Care at Time 2	4.88	.685	-.135	-1.189
	Care at Time 3	5.03	.738	-1.020	.502
	Connect at Time 1	4.86	.644	-.830	.368
	Connect at Time 2	4.67	.914	-1.491	3.757
	Connect at Time 3	4.52	1.00	-1.939	4.872
Treatment Sites	Care at Time 1	5.39	.567	-1.367	1.353
	Care at Time 2	5.35	.728	-1.804	3.161
	Care at Time 3	5.07	.827	-1.016	.273
	Connect at Time 1	5.03	.733	-.616	-.369
	Connect at Time 2	4.91	.983	-.923	-.086
	Connect at Time 3	4.76	.936	-.689	-.330

The last assumption specific to repeated measures designs, the assumption of sphericity, assumes that variances between experimental conditions are not significantly different. Mauchly's test of sphericity revealed this assumption was adequately met for means of both dependent variables at all three sites; therefore, it was determined the data met the necessary criteria for the planned hypothesis tests.

Two analyses were conducted to assess the presence of covariates in the data. The number of years each camper had attended camp was first examined in order to determine the extent to which this variable served as a covariate for caring and

connectedness. Results of an analysis of variance of campers' years at camp indicated that it was not a significant predictor of scores on the dependent variables; therefore, years at camp were not included as a covariate during hypothesis testing. Baseline scores on caring and connectedness were also examined to see if each site had a differential degree of caring or connectedness prior to the start of the study. Univariate analyses of variance revealed that the sites were not significantly different at Time One for caring ( $F(2, 52) = 1.88, p = .163$ ) and connectedness ( $F(2, 52) = .338, p = .715$ ); therefore, baseline scores on caring and connectedness were not used as a covariate in hypothesis testing.

### **Hypothesis One**

Profile analysis is a multivariate approach that is used to assess the between- and within-subject differences between groups in a repeated measures design. For this study, univariate analyses of variance were conducted in order to examine caring and connectedness. The first research hypothesis focused specifically on the between-subjects differences on caring and connectedness across treatment conditions. The test of parallelism was conducted first to assess the effects of the treatment condition (which, for the first hypothesis, combined scores on both of the treatment sites so as to create treatment and non-treatment groups) on both caring and connectedness. The results for caring and connectedness are reported in separate sections below.

## Caring

For caring, analysis of variance between treatment and nontreatment groups revealed a significant time by treatment interaction (Figure 1;  $F(2,106) = 3.442, p < .05$ ; partial  $\eta^2 = .061$ ). The significant F statistic suggests that, for this dependent

Table 7

*One-way ANOVA results: Time by Treatment on Caring*

Between Subjects	Sum of Squares	<i>MS</i>	<i>df</i>	<i>F</i>	<i>p</i>	$\eta^2$
Time	.838	.419	2	2.541	.084	.046
Treatment	2.550	2.550	1	2.209	.143	.040
Time* Treatment	1.135	.567	2	3.442	.036	.061
Error	17.470	.165	106			
Total	21.993					

variable specifically, the profiles of the treatment and non-treatment groups were not parallel. Table 7 depicts the complete results of the analysis of variance for caring.

The significant time by treatment interaction for caring warranted planned comparisons. Specifically, the planned comparison sought the differences between the treatment and non-treatment conditions at Times Two and Three for this variable. Results of a one-tailed t-test revealed a significant difference between the two conditions at Time Two (Table 8). The follow-up contrast analysis did not reveal a significant difference on caring between conditions at Time Three. The significant difference between treatment and nontreatment groups at Time Two lends partial support to Hypothesis One by depicting that Camp A and B together had higher scores on caring

Table 8

*Results of Planned Comparisons: Comparing Treatment and Non-Treatment Conditions on Caring at Times 2 and 3*

Time	Value of Contrast	Std. Error	<i>t</i>	<i>df</i>	<i>Sig. (1-tailed)</i>
Time 2	-.9307	.4287	-2.171	52	.018
Time 3	.0590	.4703	.125	52	.45

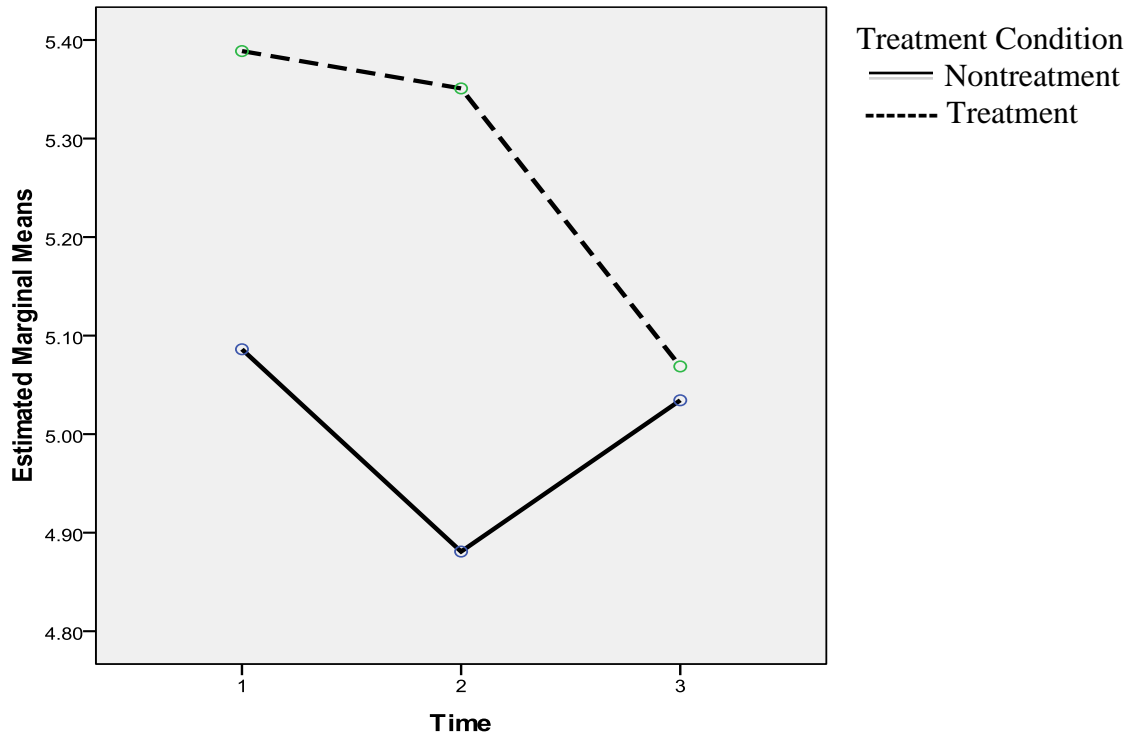


Figure 1

*Profiles of Treatment and Nontreatment Conditions for Caring*



than the comparison camp following the intervention. Findings from the planned comparison at Time Three did not support Hypothesis One.

### **Connectedness**

Analysis of variance was used to assess the differences on connectedness between the treatment and nontreatment conditions. The profiles for connectedness, unlike caring, failed to deviate from parallel (Figure 2). Results of analysis of variance indicated that the time by treatment interaction was not significant ( $F(2, 106) = .083, p = .920$ ). Table 9 depicts the complete results of the analysis of variance for connectedness.

Given the nonsignificant time by treatment interaction on connectedness, it was inferred that the profiles for the treatment and nontreatment conditions were not significantly different. In the absence of a significant interaction, the main effects of treatment and time are examined using the tests of levels and flatness. The level of each profile represents the mean score on the dependent variable across time, which serves to examine the between-groups differences across the treatment and nontreatment conditions. Mean scores were calculated across the three time periods. Results of an analysis of variance between the two conditions revealed no significant difference in mean scores between the treatment and nontreatment conditions on connectedness ( $F(1, 53) = .302, p = .584$ ).

The test of flatness examines the main effects of time when profiles are parallel. For connectedness, the test of flatness was used to assess the degree to which this variable differed in both the treatment and nontreatment conditions over time. Results of a polynomial contrast reveal, for connectedness, a significant and negative linear trend

Table 9

*One-way ANOVA results: Time by Treatment on Connectedness*

Between Subjects	Sum of Squares	<i>MS</i>	<i>df</i>	<i>F</i>	<i>p</i>	$\eta^2$
Time	2.133	1.066	2	4.339	.015	.076
Treatment	1.635	1.635	1	.883	.352	.016
Time* Treatment	.041	.020	2	.083	.920	.002
Error	26.046	.246	106			
Total	29.855					

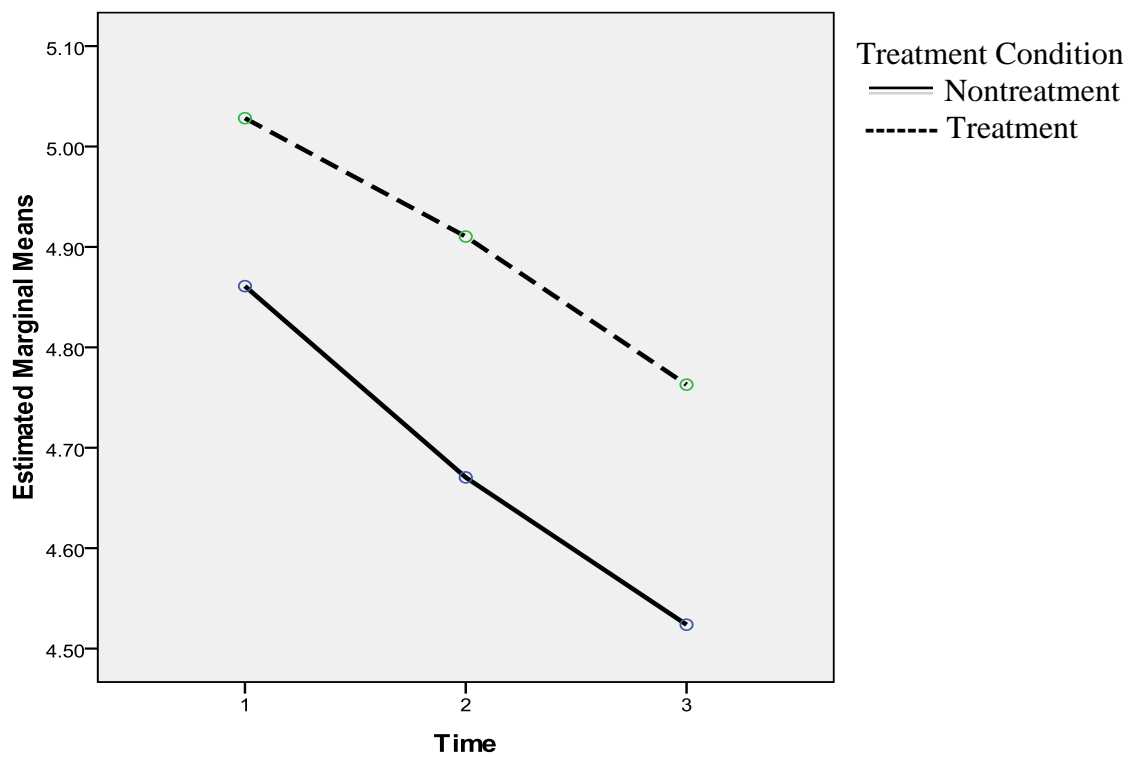


Figure 2

*Profiles of Treatment and Nontreatment Conditions for Connectedness*

for time ( $F(1, 53) = 7.483, p < .05$ ); therefore, it was determined that both profiles for connectedness sufficiently deviated from flat. However, these results do not support Hypothesis One because they fail to indicate that the treatment intervention positively impacted campers' sense of connectedness.

### **Hypothesis Two**

A second contrast was used to compare the effects of each treatment condition alone with the two treatment conditions in combination. To do this, a planned comparison was conducted to compare the mean scores on caring between the Camp A and Camp B at Times Two and Three. Because analysis of variance on connectedness did not reveal a time by treatment interaction for this variable, planned comparisons on connectedness were not conducted.

At Time Two, Camp A received the Ethic of Care staff training and Camp B received the Caring Activities staff training; therefore, mean scores on caring at Time Two represent the effects of each training session in isolation. The mean scores at Time Three represent the effects of the training sessions in combination at the two treatment sites. A planned comparison was used to investigate the differences between the mean scores between Time Two and Time Three and the two treatment sites.

Results of a paired t-test indicate no significant difference in levels of caring between Time Two and Time Three at the two treatment sites (Table 6). Table 10 outlines the results of this planned comparison at Times Two and Three. Together, these results failed to provide evidence in support of Hypothesis Two because they did not

reveal significant differences between the two trainings in isolation when compared with the training sessions in combination.

Table 10

*Results of Planned Comparisons: Comparing the Two Treatment Conditions on Caring at Times 2 and 3*

Time	Value of Contrast	Std. Error	<i>t</i>	<i>df</i>	<i>Sig. (1-tailed)</i>
Time 2	.0294	.2470	.119	52	.45
Time 3	.4043	.2709	1.492	52	.07

### **Analysis of Treatment Fidelity**

Program design factors and staff implementation factors were operationalized as a design-based staff training session and an implementation-based staff training session, each of which was conducted at Experimental Sites A and B (see Appendix A for the treatment timeline). Several measures were taken to assess the fidelity of the staff training interventions, which are described following an overview of the staff members who participated in this study.

Twelve male ( $N = 7$ ) and female ( $N = 5$ ) camp counselors between the ages of 21 and 33 ( $M_{\text{age}} = 26$  years) participated in this study, eight of whom attended both staff training sessions. Eleven of the twelve participating staff members identified themselves as Caucasian and one identified his or her ethnic/racial background as Hispanic. Half of the counselors ( $N = 6$ ) had worked at the study site for two to three years, two were in their first year, and four had worked on site for four or more years. With respect to level of educational attainment, half ( $N = 6$ ) of the counselors indicated they were currently

working towards an undergraduate degree, four had already earned a bachelor's degree, and one had completed a master's degree.

The schedules for each of the staff training sessions can be found in Appendices D and E. While each session adhered, for the most part, to the intended plan, several aspects of the training sessions were somewhat unexpected. First, the staff members at both sites (and within both training sessions) played a highly active role in the training session, first by offering personal examples of caring relationships and by integrating site-specific examples throughout the discussion. Whereas the overall level of participation was similar across both of the treatment sites for the Ethic of Care training session, one site (treatment Camp B) played a more active role in shaping their Caring Activities than Camp A. Both sites identified, practiced, and agreed on an implementation timeline for the same set of Caring Activities; however, Camp B demonstrated a higher level of enthusiasm toward the activities in general. Both sites expressed enthusiasm and commitment toward implementing the Caring Activities.

Staff members' moral orientation was expected to affect the ways they interacted with campers; the Measure of Moral Orientation (Liddell, 1990; Liddell et al., 1992) was administered at Times One, Two, and Three in order to assess the degree to which this variable was related to scores on the dependent variables. Analysis of these data indicate that the counselors who participated in this study represented a predominately justice-based moral orientation ( $M_{\text{moral}} = 2.278$ ) and, as was expected, counselors' moral orientation did not change noticeably over time.

Follow-up interviews with the site coordinators and staff members revealed several factors that may have influenced the fidelity of the treatment conditions.

Campers and staff members from the comparison site, for example, were forced to leave their facility early in the summer due to a large and unexpected environmental disaster that negatively impacted the park where the facility was located. The site coordinator described the effects of this event as positive and an experience that effectively brought the campers and staff of the site closer together.

The two experimental sites both experienced a notable degree of staff burnout that was the result of a multitude of factors. First, all three sites reduced the number of staff in response to limited income sources, which caused staff members to work approximately 9 hours per day without a designated break. Staff members were also responsible for the planning and facilitation of all of the camp activities, a major task that was, in the past, managed by outside specialty instructors. Finally, both experimental sites noted particularly difficult cohorts of campers that played a major role in shaping the daily experience at each respective site. The site coordinators believed that, not only did these cohorts negatively impact other campers' experiences at camp, but they also contributed to the level of fatigue and burnout exhibited by the staff.

In addition to unexpected occurrences and staff burnout, analysis of the qualitative data revealed a theme related to the impact of certain peer groups on campers' feelings of caring and connectedness at the site. The site coordinators from all three sites identified peer groups as factors that influenced the social climate at their site; however, one site in particular experienced the negative impacts of a dominant male peer group. This group, which was comprised of older males who had attended the program for several years, negatively impacted the camp climate through misbehavior and disregard for the informal social rules of the site. Intragroup conflict also impacted the overall

climate by fracturing the dominant group of boys into several smaller groups, each of which worked to gain social control over the other. The staff members of this site described the ongoing tension within this group and the ways this group negatively impacted the site as a whole as a tremendous challenge to their efforts to foster caring community.

Analysis of the interview data also revealed a theme related to the physical space in which the camp was held. Despite their relative proximity to one another, the three sites each had features that the coordinators felt impacted the ways campers may have felt a sense of caring community. Two of the sites, for example, are located within the bounds of a city park, providing direct access to the park and its features. One of the site coordinators even described his campers' sense of ownership over the park itself, saying that the program participants did not like flood of visitors the park often attracted for special events and holidays. Interestingly, this was the same site that experienced a temporary displacement when the park was shut down because of an environmental disaster. In addition to its park location, this site contained several physical features that may have impacted campers' sense of camp as a caring community. The building, which as a historical pavilion converted to space enclosed by windows, did not have any walls or separate spaces, rather, the entire program occurred within a single, open space. The site coordinator described this space as a "clubhouse" and identified several ways the openness of the space fostered a sense of community among participants. The other two sites, while typical of youth program facilities, had several rooms that may have limited the opportunities for whole-group interaction. In sum, results of the qualitative data reveal several uncontrollable factors that likely impacted campers' sense of camp as a

caring community. Unexpected events, staff burnout, negative peer groups, and physical space each emerged as prominent themes from the staff interviews, suggesting that several factors may have affected how campers experienced camp as a caring community.

### **Summary of Results**

Profile analysis was used to investigate the between- and within-subjects differences between treatment conditions on caring and connectedness over time. The first hypothesis focused on the combined effects of the Ethic of Care training and the Caring Activities training on caring and connectedness in relation to the nontreatment condition. Differential results were found for caring and connectedness. A significant time by treatment interaction for caring suggested that the profiles for the treatment and nontreatment conditions were not parallel, thereby warranting follow-up examination through a planned comparison. Results of this comparison revealed a significant difference between treatment and nontreatment conditions at Time Two, a finding that lends partial support to Hypothesis One.

The profiles for the treatment and nontreatment conditions were not significantly different for connectedness. Given this nonsignificant test of parallelism, tests of level and flatness were conducted. No differences were found between the levels of the treatment and nontreatment profiles. The test of flatness also failed to reveal a significant within-subjects difference between Times Two and Three for this variable. Of particular note is the downward trend of this within-subjects difference at both treatment and nontreatment sites. This finding is contrary to Hypothesis One, which predicted that



scores on connectedness would increase overtime at the treatment site more so than the nontreatment site.

The second hypothesis was examined using a planned comparison of the two treatment conditions at Times Two and Three. No significant differences were found between the mean scores for the training session in isolation when compared with the training sessions in combination; therefore, Hypothesis Two was not supported. Follow-up interviews with staff members revealed several contextual occurrences and setting-level features that may have impacted the results of this study.

## CHAPTER 5

### DISCUSSION

The purpose of this study was to examine the effects of program design factors and staff implementation factors on campers' sense of day camp as a caring community. Caring communities are settings characterized by caring youth-adult relationships and an overall sense of connectedness among youth participants. Youth-adult relationships, in this sense, represent an ethic that guides the mutually beneficial exchange of care (Noddings, 2003). The caring relations between the youth and adults in a given setting form a climate that promotes an overall sense of connectedness. Caring communities have been shown to support a variety of academic (Battistich et al., 2000; Klem & Connell, 2004), health (Catalano et al., 2004), and motivation related outcomes (Newton et al., 2007); and, furthermore, summer camps may be uniquely suited to promote a sense of caring community among campers. The research specific to camp generally suggests that campers benefit from the camp experience (e.g., Bialeschki et al., 2007; Thurber et al., 2007); however, little is known about the programmatic means by which camps might intentionally target outcomes such as caring community.

Program design and staff implementation are fundamental features of youth programs such as camps, and camper outcomes emerge from the interplay between the

two. Program design refers to the structured aspects of the program that are typically established by program administrators and, as such, remain somewhat stable over time. Implementation factors, on the other hand, represent the various ways individual staff members interact with youth during structured and unstructured time. While the two are invariably linked, it is possible that program design and staff implementation factors represent different routes to promoting desirable camper outcomes. Within youth programs in general, robust design factors are important because they may offset the potentially detrimental effects of inexperienced and fluctuating staff population (Roth & Brooks-Gunn, 2003). Others highlight the importance of staff implementation factors, suggesting that the ways staff implement structured activities, as well as the ways they interact with youth during unstructured time, open the pathways through which targeted outcomes may be achieved (Eccles & Gootman, 2002; Rhodes, 2004). The relative contributions of design and implementation factors are unknown, specifically with respect to the ways they each foster a sense of caring community at camp.

A quasi-experimental mixed repeated-measures design was used to assess both the within-subjects differences on perceptions of camp as a caring community and the between-subjects differences in relation to the two treatment conditions. Caring community was measured via two instruments: the Caring Climate Scale (Newton et al., 2009) and the Camp Connectedness Scale (Sibthorp et al., 2010). Campers from three municipal day camps participated in this study by completing the study instrumentation at three different times over the course of the summer. The independent variables were operationalized as two different types of staff training sessions. The first staff training targeted implementation factors by focusing on the Ethic of Care while the second

training session targeted design factors by focusing exclusively on Caring Activities. Two camps received each training session, while staff members from the third camp did not participate in either staff training in order to serve as comparison condition. It was hypothesized that (a) a caring-based intervention would promote campers' sense of camp as a caring community over and above than time spent at camp, and (b) program design factors and staff implementation factors would affect campers' perceptions of camp as a caring community differently and the combination of trainings would result in higher scores on the study instrumentation than each training on its own.

### **Summary of Key Findings**

This study sought to compare the effects of program design and staff implementation factors on campers' sense of camp as a caring community. Analysis of the data collected from campers at three municipal day camps revealed three key findings: (a) significant time by treatment interaction on caring, (b) significant difference between treatment and nontreatment conditions on caring at Time Two, and (c) significant downward trend on both treatment and nontreatment profiles for connectedness. These findings are discussed below.

Caring community was assessed using repeated-measures analysis of variance and results indicate that the treatment interventions had differential effects on each of variables that comprise caring community. For caring, the significant time by treatment interaction warranted a planned comparison follow-up test. Results of this comparison revealed a significant difference between the treatment and nontreatment conditions at Time 2, which lends partial support to the first hypothesis by indicating that the study

intervention may have impacted campers' sense of camp as a caring community. No significant differences between the treatment and nontreatment profiles on caring were found at Time Three.

Unlike caring, the treatment and nontreatment profiles for connectedness failed to deviate from parallel. Tests of level and flatness were conducted in order to examine the main effects of the treatment and time. The test of levels revealed that there were no significant differences in the levels of connectedness between the treatment conditions. The test of flatness, on the other hand, revealed a significant downward trend on the treatment and nontreatment profiles over time. The findings for connectedness do not support the first hypothesis because they fail to depict any differences between treatment and nontreatment conditions and, furthermore, they depict a decline in connectedness rather than the expected increase over time.

Given the non-significant test of parallelism on connectedness, the second hypothesis, which predicted a difference between the two treatment conditions, was explored for caring alone. A planned comparison was conducted to compare the design-based and implementation-based training sessions. Results indicate that the two treatment interventions did not affect scores on caring differentially; therefore, this hypothesis was not supported.

### **Implications for Caring Communities**

Caring communities are characterized both by caring one-on-one interactions and an overall climate of connectedness among youth participants. Caring relations, from Noddings's (2003) perspective, are formed when a care-giver becomes engrossed with

the one in-need and, through this engrossment, readily adopts the other's needs as her own. Central to this process is the moral sense of duty to the other, which, from a developmental point of view (e.g., Gilligan, 1982; Kohlberg, 1984), may only be possible among individuals who have achieved a certain degree of moral reasoning.

In contrast to caring, connectedness refers to one's sense of belonging and overall relationship to a given context. Interpersonal connections represent a fundamental human need and, as such, young people will seek out positive relationships with others within a given context (Baumeister & Leary, 1995). Connectedness, then, is the result of this innate process. Unlike caring, though, connectedness is simply a felt sense of relation to people and place that may or may not be mutually beneficial.

Caring communities were defined to include both caring one-on-one relationships and an overall sense of connectedness because, in the camp setting specifically, campers may be more likely to form caring relations with counselors while achieving an overall sense of connectedness to camp in general. Findings from this study indicate that the mechanisms by which camp administrators might promote caring and connectedness may differ. In the following section, the implications related to caring are discussed first, followed by those specific to connectedness. The two concepts are then considered in relation to their relative contributions to campers' sense of caring community at camp.

### **Implications for Caring and Connectedness**

Caring youth-adult relationships represent one important facet of a caring community and two different training sessions were designed in order impact the ways campers feel cared for by their counselors at camp. The time by treatment interaction for

caring suggests that, in this study, the extent to which campers' perceptions of caring community, specifically the degree of caring within that community, changed over time depends on whether or not their counselors received the treatment intervention. From this, a significant difference between treatment and nontreatment conditions at Time 2 on caring suggests that the intervention may have impacted campers' sense of caring following the first round of staff training sessions. However, this difference did not result from an increase in caring at Time Two; rather, caring merely stayed level at the treatment sites and declined at the nontreatment site.

For caring, then, the difference between the treatment and nontreatment conditions following the first round of training sessions indicate that training specifically designed to foster a sense of caring community may offset declines in caring that may occur at camp. Although this finding is somewhat consistent with previous studies that employ staff training as the mechanism to promoting caring community (e.g., Battistich et al., 2004; Newton et al., 2007; Solomon et al., 1988), the decline in caring requires further attention.

Of particular interest is the visibly notable downward trend in caring on the treatment profile between Time Two and Time Three. From this, it can be inferred that any effectiveness of the staff training intervention diminished over time. One potential explanation for this finding is that the first camp session ended and the second camp session began in between Time Two and Three. While the participants of this study attended both sessions of camp, many of their peers attended only the first or second session. It is possible that the changing camper populations between Time Two and Time Three may have contributed toward a decline in caring over time. Interestingly,

though, the profiles for Camp A and Camp B, who received each training session but in the opposite order, decline in a similar fashion, while the profile of Camp C, which did not receive either of the training sessions, actually increased slightly between Time Two and Time Three.

The social make-up of a given setting is known to impact both program processes and participant outcomes from that setting. With respect to program processes specifically, the characteristics of youth participants impact how staff implement structured activities (Durlak & DuPre, 2010), as well as the degree to which staff experience burnout during their job (Larson & Walker, 2008). Program settings with a highly transient youth population often experience difficulty targeting and achieving positive youth development outcomes (Roth & Brooks-Gunn, 2003), suggesting that the camper population, while largely out of the program leaders' control, plays an important role in program process and youth outcomes. The change, however slight, in the camper population between the first and second sessions likely impacted campers' sense of camp as a caring community, even though the participants in this study attended both sessions of camp.

While both the camp structure and its participants may have contributed to the decline in caring over time, it is also possible that the way caring, as conceptualized by Noddings (2003), may not capture the nature of care that occurs within the summer camp setting. First, the extent to which Noddings's work offers theoretical explanation of the concept of care must be considered. Care theory, as it is often deemed, assumes the basic human need for relation and weaves prepositions related to the care-giver, the one-in-need, and their bidirectional exchange that together represent the critical elements of



scientific theory. The applicability of the theory, on the other hand, is less clear. This study employed Noddings's (2003) care theory as the framework to predict the nature of caring between camp staff and campers and, in the effort to foster the camper-counselor caring, Noddings's (2003, 2005) concept of pedagogical caring served as basis for the staff training interventions. While this study acknowledged the limitations young people might face in adopting an ethic of care, it was hypothesized that campers could enter in to a caring relation with their counselors without necessarily adopting an ethic of care of their own. Noddings's theory does not explicitly explain the nature of the caring relation that remains unequal. In other words, caring, to Noddings, necessarily involves an equalizing process in which the one-in need adopts his or her own ethic of care. It is possible that, in this study, campers' received only half of the caring relation theoretically described by Noddings, thereby limiting their perceptions of caring at camp. These findings support Noddings's (2003) conceptualization of care as a bidirectional process that begins as an unequal meeting and, through the pedagogical processes of modeling, practice, dialog, and confirmation, the one in-need becomes a care-giver in their own rite.

Like caring, campers' perceptions of connectedness decreased over time at both the treatment and nontreatment camps. This decline is not related to either study hypothesis; yet, it is noteworthy because it contradicts much of the research specific to connectedness. The Caring School Community curriculum, for example, centralizes the role of caring student-teacher relationships by suggesting that these relationships foster an overall sense of connectedness among students at school (Battistich et al., 2000; Battistich et al., 2004; Solomon et al., 1997). Based on the findings from these studies, it was hypothesized that campers' sense of connectedness would increase as counselors

were trained in techniques designed to promote a sense of caring community. The downward trends of both connectedness and caring are inconsistent with the extant literature and are worth further exploration.

The sample employed in this study had several unique characteristics that may have contributed this downward trend, specifically the proportion of males to females at each site. Two of the sites- Camp A and Camp C (the comparison camp) had a relatively equal proportion of males to females; however, Camp B had nearly twice as many males as females participate in the study. While little is known about how males and females respond differently to perceptions of connectedness, some scholars contend that males and females have unique modes of moral reasoning (e.g., Gilligan, 1982; Galotti, 1989; Jaffe & Hyde, 2000). Noddings (2003), on the other hand, contends that, while women may exude a more innate ethic of care, men are equally capable of adopting this ethic. Furthermore, the participants in this study served primarily as the ones receiving care; given their age, it was not assumed that the campers would serve as care-givers in their own rite. Noddings (2003) does not differentiate between male and females when they are the ones in-need, namely because males and females are equally capable of responding to the attitude of care based on the fundamental human need for relation. The extent to which male and females differ as care-givers is debatable; however, given their distinct role as recipients of care, it is unlikely the sex breakdown at Camp B significantly impacted the campers' ability to receive care from camp staff.

Results from staff interviews provide three additional explanations for the difference between the treatment and nontreatment camps on caring and the overall downward trend on connectedness. With respect to the difference between treatment

and nontreatment conditions, interviews revealed differences relating to the camper population, staff burnout, and the physical space. At treatment Camp A, for example, a large group of 12 and 13 year-old boys, most of whom have attended camp for several years, continually disrupted structured and unstructured time, especially during the second session of the summer. In contrast, staff members from Camp C indicated that the camper population was without any difficult or negative cohorts and, by and large, the group functioned as a team throughout the summer. Given this evidence, it is likely that changing camper populations between Times Two and Three impacted the ways campers experience caring at camp.

In addition to difficult camper cohorts, staff members from both treatment sites reported that staff member burnout negatively impacted camp processes toward the end of the summer. Staff members at the nontreatment site did not indicate any burnout-related problems. Staff burnout is a major concern among camp programmers, especially in programs that employ young and inexperienced individuals (Paisley & Powell, 2007). It is possible that young adults lack the emotional maturity to withstand the dynamic nature of the camp environment, which, at some camps, becomes increasingly stressful as the summer unfolds. Emotional exhaustion (Rosenthal, 1983) and role diffusion (Pavelka, 1993) are known sources of burnout among young staff members which, in this case, provides potential differences between the treatment and nontreatment sites.

Finally, the nature of the physical space in which the program occurs may have fostered campers' perceptions of caring differently at each site. Program facilities are design factors that remain somewhat consistent over time and are also known to impact program quality (Ghazvini & Mullis, 2002). All three sites are located on or near a

public park within city limits, yet the physical building in which Camp C conducts its program contains several features that differentiate it from the other two sites. Most notable among these features is the centrality of the space. Camp C is held in a historic building that contains a single large room rather than several smaller, dispersed rooms. Staff members at the site refer to their building as a clubhouse. Given its physical space, as well as the nature of its camper and staff population, the comparison site may have been well-suited to foster a sense of caring community.

Results of staff interviews revealed one additional phenomenon that may have contributed to the overall decline in connectedness at both treatment and nontreatment sites. In addition to difficult camper cohorts and counselor burnout, staff members indicated that camper attendance fluctuated unexpectedly during the latter half of the summer. Transient participant populations are known to impact the effectiveness of youth programs in general (Larson et al., 2008; Roth & Brooks-Gunn, 2003). One possible explanation for this impact is that a fluctuating youth population may prevent youth participants from moving past their “forming” or “storming” stages of group development (Tuckman, 1965). When this occurs at camp, campers may fail to feel connected to one another or to the setting in general.

In contrast, Camp C experienced an unexpected event that may have actually fostered group cohesion among campers at that site. Prior to data collection, campers and staff at this site were forced to leave their park-based facility because an unexpected environmental disaster shut down the park and its surroundings. Participants at this camp, who traditionally claim a high-level of ownership over their park, relocated to an alternative facility for 4 days at the start of the summer. While the relocation caused

some degree of confusion, the site staff felt that the group's experience with displacement may have drawn the group closer together. Staff from this site described the ways campers and staff referred to their displacement throughout the summer, notably in terms of the way the event forced the group to work together.

One possible explanation for the positive effects of this displacement on campers' sense of their camp as a caring community might be the presence of a superordinate goal. Based largely on the classical work of sociologist Muzafer Sharif, the concept of superordinate goals pertains specifically to groups divided by ideological, racial, or traditional differences. When an external event, such as an unexpected environmental disaster, force opposing groups to work together toward a common end, those groups are likely to forgo their differences in favor of a shared experience. It is possible that Site C might have had opposing camper groups similar to those in the two other sites, yet their experience with displacement provided a superordinate goal around which these groups became connected.

In sum, the interview data described above, together with the empirical findings from this study, suggest that intentionally-designed staff training may temporarily offset the impacts of negative situations at camp. Furthermore, a caring-based staff training may impact caring and connectedness differently. Camp is a dynamic context, though, and results of staff interviews suggest several ways caring and connectedness may be affected outside of the staff training mechanism. Together, caring and connectedness contribute to an overall sense of caring community and the implications related to this broad concept are discussed below.

### **Implications for Program Design and Implementation Factors**

In this study, program design factors and staff implementation factors were manipulated in order to assess their relative contributions to caring community at camp. While no differences were found between the two training sessions, results indicate that a caring based staff training in general may impact caring community. Of particular note, though, are the ways this training may have impacted caring and connectedness differently. Although it is commonly accepted that staff training is an effective mechanism by which youth programs might promote targeted outcomes among participants (Larson et al., 2004; Caldwell, 2005), the findings from this study suggest that training might impact campers' sense of caring more so than connectedness.

One possible explanation for this finding resides in the nature of caring itself. As an ethic, caring requires the care-giver to adopt a sense of duty toward the one in-need. This ethic was the sole focus of only one of the training sessions; however, both sessions may have effectively increased staff members' awareness of their caring behaviors enough to result in a nearly identical impact on campers' sense of caring at camp. In their study of leaders at a youth sports camp, Magyar, Guivernau, Gano-Overway, Newton, Kim, Watson, and Fry (2007) found that the extent to which leaders felt efficacious in their role predicted their perceptions of their ability to promote caring at camp. From this, it is possible that the counselors, simply by participating in a session that engaged them in thinking about caring communities in general, felt an increased sense of efficacy in their role as a leader. Much of the research specific to caring teachers documents the relation between teachers' self-efficacy about their roles as care-givers

and their behaviors in the classroom (e.g., Battistich et al., 2004; Battistich et al., 2000; Serow & Solomon, 1979). Therefore, it is possible that training sessions impacted campers' sense of camp as a caring community by encouraging counselors' caring behaviors.

Connectedness, on the other hand, may be less accessible through staff training alone. As a feeling that emerges from one's relationship to a setting in general, a camper's sense of connectedness may be more susceptible to a variety of setting-level factors than camper's sense of caring. In other words, caring may be more "leader-focused," and, consequently, more easily impacted through staff training. The nuances specific to a given setting affect the ways a young person connects to that setting and these nuances are not necessarily controllable through staff training alone. The interventions in this study targeted connectedness primarily through activities that encouraged campers to interact with one another and with their counselors in positive ways. Given the downward trend in the profile for connectedness, the interventions failed to impact campers' sense of connectedness at camp. Furthermore, similarity between the treatment and nontreatment profiles on connectedness suggest that connectedness may deteriorate over the course of a camp session, regardless of the presence of an intentionally-designed staff training session.

Together, these findings suggest that program staff may effectively direct their own behavior, yet may be limited in the extent to which their behavior impacts the ways youth connect with others and with the setting in general. Although some studies document a direct link between teacher behaviors and peer social climate in the school setting (e.g., Serow & Solomon, 1979; Solomon et al., 1997; Vieno et al., 2005), others

suggest that a negative peer climate may override the benefits of strong student-teacher relationships (McNeely & Falci, 2004). Social climate in general is a relatively stable facet of the school environment, and changes in social climate tend to occur over extended periods of time (e.g., Battistich et al., 2004, Battistich et al., 2000). Caring communities, then, may rely both on targeted staff training as well as a longitudinal approach to fostering overall connectedness.

### **Limitations**

Youth programs in general encompass an array of participant, staff, and program factors and the combination of these factors present many challenges to applied research in this setting. This study specifically encountered limitations related to the setting and the treatment interventions, each of which is described below.

The setting chosen for this study represented a variety of features that were considered amenable for a quasi-experimental research design. Programmatic consistency across the three research sites was one feature expected to lend control to this study. Prior to the study, it was determined that each site offered nearly identical daily programs and served relatively similar camper populations. Staff members from each site participated in a single pre-camp staff training session and the site coordinators met on a weekly basis for program planning. Setting-level differences, such as those specific to the physical space and to the varying degrees of staff burnout at each site, emerged throughout the study time period presenting additional unexpected sources of error variance.



In addition to their programmatic consistency, the sites used in this study were also selected because of their strong emphasis on character education. This program focus served as a strong foundation for the implementation of a caring communities curriculum; however, it is possible that the pre-test levels of caring community were simply too high to accommodate additional change. Mean scores on caring community were high at Time One at all three sites, leaving little room for growth, which was reflected in the non-significant change in caring and connectedness at Times Two and Three.

Sample size also posed limits on the findings of this study. A power analysis conducted prior to data collection called for a sample of 76 participants; however, fluctuations in camp enrollment resulted in a sample of 55 campers. This decline in sample size may have impacted the effect size of the statistical findings, as well as the extent to which the study instrumentation could adequately capture trends in campers' perceptions of caring community at the three sites.

Staff member absenteeism and reduced meeting time may have imposed additional limitations on the findings of this study. Site coordinators do not normally hold formal meetings with their staff members throughout the summer and, although staff members were paid to attend the training sessions for this study, their attendance was voluntary. Most staff members from the two treatment sites attended both sessions; however, there was at least one staff member absent from each training session. Additionally, the length of each training session was reduced from two hours to one and a half hours in order to encourage increased staff participation. While the content for each session remained the same, it is likely that the shortened time frame may have prevented

adequate dosage of the intervention, which, in turn, may have limited the effectiveness of the interventions.

Implementation fidelity was a concern in this study and the follow-up interviews with the staff members at the treatment sites revealed that, although they implemented the caring activities as instructed, they were implemented somewhat differently at each site. For example, each site facilitated an all-camp activity that was designed to promote an overall sense of community across age groups. In the effort to garner staff and camper buy-in, the focus of this all-camp activity was determined individually at each site. One site chose to conduct a two-week penny drive in order to raise funds for an area homeless shelter and reported a high degree of camper participation in the activity. The second site conducted a used-clothing drive and, for much of the two-week implementation period, failed to generate any enthusiasm about the project. In the end, campers at this site managed to gather enough clothing to reach their goal, yet, considering this example, it is clear that the nature of Caring Activities differed between the treatment camps.

Measures of caring attitudes, behaviors, and moral orientation were also completed by each staff member in order to examine treatment fidelity. There were not enough staff questionnaires to conduct inferential statistics, yet examination of the mean scores on these measures indicates that staff behaviors did not change noticeably following the staff training sessions. Staff members' moral orientation, which was predominantly justice-oriented at all three sites, may have also impacted the ways they interacted with the campers in this study.

### **Future Directions**

Caring communities support positive youth development through caring one-on-one relationships between youth and adults as well as through an overall sense of connectedness within the setting. On their own, caring and connectedness represent separable but related concepts; each garnering the attention of researchers interested in schools and out-of-school-time youth programs. Scholars in these areas conceptualize caring, connectedness, and a host of other related concepts (e.g., relatedness, sense of community, climate) in various ways throughout the literature; yet little is known about caring community as it was defined here.

Day camps may be uniquely situated to promote a sense of caring community, yet the ways in which camps might design programs and train staff in order to intentionally target caring community requires further attention. This study suggested that staff training may be an effective way to impact campers' sense of camp as a caring community but, despite this finding, it is possible that staff training may fail to positively impact camps facing staff burnout and flux in the camper population. Investigations specific to staff training "booster sessions," or short, focused trainings that are conducted at regular intervals throughout the summer, may provide insight into the ways camp administrators might consistently promote caring community throughout the summer.

Further attention is also necessary to better understand the ways staff training affect caring and connectedness differently at camp. This study suggested that staff training may fail to impact camper behaviors in the same way it might impact counselors' behaviors. One interesting approach to this phenomenon would be to compare the timing of the different training sessions. This study did not predict which training order- design

followed by implementation or the other way around- would affect caring community more effectively. A constructivist approach to learning suggests that experience plays a pivotal role in shaping how people acquire and internalize information; thus, from this perspective, the timeline on which staff members participate in design- or implementation-focused training sessions should impact the ways they interact with campers at camp. Research focusing the order of training sessions might provide additional insight into how caring and connectedness differentially contribute to, or detract from, campers' sense of camp as a caring community.

Finally, camp, and day camp specifically, is a dynamic context rich in opportunities for future research. Scholars have made great progress in this area in recent years by identifying the myriad positive outcomes of the camp experience, yet the mechanisms that produce these ends remain largely unknown. This study supports the notion that camp staff members are central to the camp experience but, given these findings, staff members may be limited in their attempts to foster an overall sense of connectedness among campers. Studies examining the factors associated with campers' sense of connectedness to camp might shed illuminate the ways counselors may and may not intentionally foster caring community. In general, though, a broad approach to studying camp is still necessary to discover new phenomena within this complex setting.

### **Implications for Practice**

Given the relation between caring communities and positive youth development, camp administrators should continue to target both caring and connectedness in their staff training and program design efforts. The findings of this study suggest that staff training

is an effective route through which program leaders might promote an ethic of care among staff members. Camp, however, is a dynamic context and the effectiveness of staff training may diminish over time. With this in mind, camp administrators might consider offering “booster” training sessions throughout the camp season, focusing on the ways counselors can engage an ethic of care when interacting with campers. By targeting individual staff behavior, ongoing training such as this might be an effective mechanism for promoting the degree to which campers feel cared for at camp.

Connectedness, on the other hand, may not be accessible through staff training alone. In addition to ongoing staff training, program leaders should identify aspects of the camp environment that positively or negatively impact campers’ sense of connectedness. One promising approach might be to conduct focus group-type interviews with campers throughout the camp season. Campers’ unique perspectives might reveal nuances in camper relations that are not easily identified from the administrator level. Interviews such as these might be especially important later in the camp season as the program begins to face challenges such as staff burnout and camper turnover. Information gathered through camper interviews can then be used to design activities that might mitigate the effects of late-season staff and camper disconnectedness. Finally, engaging youth in the effort to promote connectedness at camp might provide additional opportunities for camp staff to interact with campers in caring ways, thereby promoting an overall sense of caring community.

## APPENDIX A

### SCHEDULE OF DAILY CAMP ACTIVITIES

## YouthCity Daily Schedule

### **MONDAY**

8:30 – 9:00 : Drop off & Free time

1<sup>st</sup> Class: 9:00 – 10:30:

*Skateboarding, Challenge, Cheerleading*

10:30 – 11:30: Academic Hour

**11:30 – 12:00: Lunch**

2<sup>nd</sup> Class: 12:00 – 1:30:

*Cooking, Step Up, Outdoor Adventure*

1:30 – 1:45: Break

3<sup>rd</sup> Class: 1:45 – 3:15:

*Jarin's Outdoor Fun Class, Acting, Outdoor Adventure*

3:15 – 3:30: Snack & Break

4<sup>th</sup> Class: 3:30 – 5:00:

*Swimming, Bike Bonanza, Games*

5:00 – 5:30: Pick up & free time

### **TUESDAY**

8:30 – 9:00: Drop off & Free time

1<sup>st</sup> Class: 9:00 – 10:30:

*Dance, Skateboarding, Sports, Megan's Art Class*

10:30 – 11:30: Academic Hour:

**11:30 – 12:00: Lunch**

2<sup>nd</sup> Class: 12:00 – 1:30:

*Weird Science, Claymation, Kathleen's Art Class, Archery*

1:30 – 1:45: Break

3<sup>rd</sup> Class: 1:45 – 3:15:

*Film Making, Community Service, Capoeira*

3:15 – 3:30: Snack & Break

4<sup>th</sup> Class: 3:30 – 5:00:

*Swimming, Open Art*

5:00 – 5:30: Pick up & free time

### **WEDNESDAY**

8:30 – 9:00: Drop off & Free time

1<sup>st</sup> Class: 9:00 – 10:30:

*Skateboarding, Challenge, Cheerleading*

10:30 – 11:30: Academic Hour

**11:30 – 12:00: Lunch**

2<sup>nd</sup> Class: 12:00 – 1:30:

*Cooking, Step Up, Outdoor Adventure*

1:30 – 1:45: Break

3<sup>rd</sup> Class: 1:45 – 3:15:

*Jarin's Outdoor Fun Class, Acting, Outdoor Adventure*

3:15 – 3:30: Snack & Break

4<sup>th</sup> Class: 3:30 – 5:00:

*Swimming, Bike Bonanza, Games*

5:00 – 5:30: Pick up & free time

### **THURSDAY**

8:30 – 9:00: Drop off & Free time

1<sup>st</sup> Class: 9:00 – 10:30:

*Dance, Skateboarding, Sports, Megan's Art Class*

10:30 – 11:30: Academic Hour

**11:30 – 12:00: Lunch**

2<sup>nd</sup> Class: 12:00 – 1:30:

*Science, Claymation, Kathleen's Art Class, Archery*

1:30 – 1:45 Break

3<sup>rd</sup> Class: 1:45 – 3:15:

*Film Making, Community Service, Capoeira*

3:15 – 3:30: Snack & Break

4<sup>th</sup> Class: 3:30 – 5:00:

*Swimming, Open Art*

5:00 – 5:30: Pick up & free time

### **FRIDAY**

8:30 – 9:00: Drop off & Free time

1<sup>st</sup> Class: 9:00 – 10:30:

*Chase Home Art, Strategy Games, Open Studio*

10:30 – 11:30: Academic Hour

**11:30 – 12:00: Lunch**

12:00 – 5:00: Field Trip or Outdoor Adventure

5:00 – 5:30: Pick up & free time

## APPENDIX B

### CAMPER INSTRUMENTATION



**Please tell us a little bit about how you feel about this camp.** Read each question very carefully and ask your counselor if you do not understand the question or need help. Your answers to these questions are important to us and will help us make this camp a great place!

**Directions:** Think about all of the counselors and campers at this camp. Read each question and circle the number that is closest to how you feel.

At this camp...	Definitely false!	Mostly false	Just a little false	Just a little true	Mostly true	Definitely true!
...campers are always treated with respect.	1	2	3	4	5	6
...the counselors always respect the campers.	1	2	3	4	5	6
...the counselors are always kind to the campers.	1	2	3	4	5	6
...the counselors always show that they care about the campers.	1	2	3	4	5	6
...campers feel that they are treated fairly.	1	2	3	4	5	6
...the counselors always try to help the campers.	1	2	3	4	5	6
...the counselors always want to get to know all the campers.	1	2	3	4	5	6
...everyone always likes one another for who they are.	1	2	3	4	5	6
...the counselors always listen to the campers.	1	2	3	4	5	6
...the counselors always accept the campers for who they are.	1	2	3	4	5	6
...campers always feel safe.	1	2	3	4	5	6
...campers always feel welcomed every day.	1	2	3	4	5	6
...the counselors always listen to me.	1	2	3	4	5	6
...I am always treated fairly by the counselors.	1	2	3	4	5	6
...I am always happy.	1	2	3	4	5	6
...I always have a good time.	1	2	3	4	5	6
...I always get to make decisions	1	2	3	4	5	6
...I always make choices that make a difference.	1	2	3	4	5	6

...I always like the other kids.	1	2	3	4	5	6
...other campers always respect me.	1	2	3	4	5	6
...people are always interested in me.	1	2	3	4	5	6
...I always feel like I belong.	1	2	3	4	5	6
...I feel safe to express myself.	1	2	3	4	5	6
...I am respected for who I am.	1	2	3	4	5	6

## APPENDIX C

### TREATMENT TIMELINE

<b>Treatment Timeline &amp; Data Collection Period</b>						
	Camp Weeks 1 & 2	<b>Time 1</b> <i>end of Week 2</i>	Camp Weeks 3 & 4	<b>Time 2</b> <i>end of Week 4</i>	Camp Weeks 5 & 6	<b>Time 3</b> <i>end of Week 6</i>
<b>Camp A</b>	Normal camp activities	Campers complete questionnaires; staff completes CATC & MMO.  <i>Receive Ethic of Care Training</i>	Normal camp activities implemented using <i>Ethic of Care Training</i>	Campers complete questionnaires; staff completes CATC & MMO.  <i>Receive Caring Activities Training</i>	Normal camp activities + <i>Caring Activities</i>	Campers complete questionnaires; staff completes CATC & MMO.
<b>Camp B</b>	Normal camp activities	Campers complete questionnaires; staff completes CATC & MMO  <i>Receive Caring Activities Training</i>	Normal camp activities + <i>Caring Activities</i>	Campers complete questionnaires; staff completes CATC & MMO  <i>Receive Ethic of Care Training</i>	Normal camp activities implemented using <i>Ethic of Care Training</i>	Campers complete questionnaires; staff completes CATC & MMO.
<b>Camp C</b>	Normal camp activities	Campers complete questionnaires; staff completes CATC & MMO	Normal camp activities	Campers complete questionnaires; staff completes CATC & MMO	Normal camp activities	Campers complete questionnaires; staff completes CATC & MMO.

## APPENDIX D

### CARING ACTIVITIES

## **Cross-Age Buddies: Reading Time**

### **Activity Summary**

The purpose of this activity is to connect younger campers to older campers in order to help them feel like they are a part of the camp community. This activity will also allow the older campers to practice mentoring younger campers and will hopefully inspire them to serve as role models for their buddies. In this activity, older campers will read a story (selected by the younger buddy) to their buddy.

### **Materials**

Books and space for the buddy groups to spread out and read together.

### **Preparing the older buddies**

- Spend a few minutes with the older buddies discussing their roles as older buddies.
- Discuss the ways the older buddies can help the younger buddies choose a book that they will enjoy.
- Discuss what it means to be a role model- how do they want to be seen by the younger buddy?

### **Preparing the younger buddies**

- Spend a few minutes with the younger buddies explaining that they will be paired with an older buddy to read a book of their choice.
- Discuss what kinds of books they like to read and whether they like to read themselves or have other people read to them.
- Discuss ways they can listen carefully and ask questions of their older buddy.

### **Activity**

Pair buddies and have them find a quiet space together. Encourage groups to read the entire book together. When the groups are done, gather all of the buddy groups to reflect as a large group.

### **Questions for discussion (large group)**

- For the younger buddies, how was your buddy kind or helpful to you today?
- For the older buddies, what did you enjoy about reading with your buddy?

### **Discussion questions for the older buddies**

- How did the activity go? How do you think it was successful? Why?
- What is one way you took responsibility for yourself when you were reading with your buddy?

## **Team Meetings: Silent Introductions**

### **Activity Summary**

Teambuilding class meetings are designed to encourage caring interactions between campers. In these activities, campers are asked to work together to meet a goal or solve a challenge. By working together in these hands-on activities, campers will interact in new and positive ways.

### **Materials**

None

### **Preparing the group**

- Spend a few minutes laying some “rules” for team meetings- have the kids help.
- Agree to abide by these rules (e.g., no put downs, positive words, full participation, etc.).
- Explain that the purpose of the team meeting is to develop caring relationships and support one another.

### **Activity**

Pair campers together and have them chat with one another for 3 or 4 minutes. Their challenge is to learn as much about the other person as possible. Tell them that they will have to introduce their partner to the group.

After 3 or 4 minutes, have the group sit in a circle and each pair takes a turn introducing their partner. The only catch is that they have to introduce the activities silently- without using their voices. The group then has to guess what the partner is describing with their hands.

### **Questions for discussion**

- How did you learn new things about your partner? What types of questions did you ask?
- How did you feel describing yourself?
- What strategies did you use to describe your partner to the group when you couldn't talk?
- How did it feel to be introduced to the entire group?
- Why is it important to get to know one another?
- What kinds of things can we do to get to know each other better?

## Team Meetings: The M & M Game

### Activity Summary

Teambuilding class meetings are designed to encourage caring interactions between campers. In these activities, campers are asked to work together to meet a goal or solve a challenge. By working together in these hands-on activities, campers will interact in new and positive ways.

### Materials

Big bag of M & Ms

### Preparing the group

- Spend a few minutes laying some “rules” for team meetings- have the kids help.
- Agree to abide by these rules (e.g., no put downs, positive words, full participation, etc.).
- Explain that the purpose of the team meeting is to develop caring relationships and support one another.

### Activity

Have the kids take a few M & Ms (5-8 of them). Tell them that they cannot eat them until the activity is finished. Go around the circle and use the M & Ms in the kids’ hands to share something about them self:

Red candy: favorite hobbies

Green candy: favorite foods

Yellow candy: favorite movies

Orange candy: favorite places to travel

Brown candy: what you want to be when you grow up

Blue candy: wild cards (they can share anyone they choose) OR ask a question of someone else

### Questions for discussion

- How did it feel to share personal information about yourself?
- Did you learn something about your peers that you didn’t know before?
- Why is it important to learn new things about one another?
- What things make it difficult to learn new things about people that you don’t know?
- What kinds of things can we do to learn new things about one another?



## **Team Meetings: Protect your Peer**

### **Activity Summary**

Teambuilding class meetings are designed to encourage caring interactions between campers. In these activities, campers are asked to work together to meet a goal or solve a challenge. By working together in these hands-on activities, campers will interact in new and positive ways.

### **Materials**

One soft (Nerf-type) ball

### **Preparing the group**

- Spend a few minutes laying some “rules” for team meetings- have the kids help.
- Agree to abide by these rules (e.g., no put downs, positive words, full participation, etc.).
- Explain that the purpose of the team meeting is to develop caring relationships and support one another.

### **Activity**

Have the kids stand in a circle about arms-length apart. Ask for a volunteer to be your “peer” who you will protect. The protector’s job is to protect their peer from the ball; the job of the teammates on the outside of the circle is to try and tag the peer by throwing the ball at their arms, torso, or legs (no head!). The circle must work together to tag the peer. When the peer gets tagged, the peer returns to the circle, the protector becomes the peer, and the teammate who tagged the peer now becomes the protector. Continue until every teammate who would like a turn in the circle has been given the chance.

### **Questions for discussion**

- What were the different roles in this activity? What did each person have to do to achieve their goal?
- How did it feel to be the peer? The protector?
- What did the team do to achieve the goal of tagging the peer?
- How did the protector and the peer work together?
- What are some situations when you might be a protector or a peer here at YouthCity? What kinds of things do you do here to protect one another or to be protected?
- How can teams work together to achieve their goal? What would this activity be like if the teams did not work together?

## Team Meetings: Problem Solving

### Activity Summary

Problem solving team meetings are used to discuss any problems affecting the team community. These meetings are opportunities for the campers to see why some actions are problems for the community. The campers reflect on their own behavior, build empathy, and invest in solutions they have arrived at themselves. Sometimes Problem-Solving Team Meetings don't lead to explicit solutions but rather raise students' awareness of the problems and their effects- an important step in changing behavior.

### Materials

Ethical Scenarios (see below)

### Preparing the group

- Spend a few minutes laying some “rules” for team meetings- have the kids help.
- Agree to abide by these rules (e.g., no put downs, positive words, full participation, etc.).
- Explain that the purpose of the team meeting is to develop caring relationships and support one another.

### Activity

1. Tell the group that you will be asking them to make an ethical decision. Discuss what it means to make an ethical decision- doing what think is right to do. Discuss what it means to know what is right- how do we know what is the right thing to do?
2. Tell the group that the focus of the scenario is about caring- doing something because you want to help the other person, group of people, animal, etc. What does it mean to care for something? Describe some who cares for you- how do you know they care? Describe someone or something who you care for? How do you know that you care for them?
3. Choose an ethical scenario from the list below.
4. Have the kids read the scenario to themselves and decide what they will do.
5. In pairs, have the kids discuss their solutions and agree on one solution in their pair.
6. Have the pairs share their solution.

### Questions for discussion

- Why did you choose to do what you did?
- What sorts of things helped you make the decision?
- What was it like to discuss the dilemma with your partner? How did you come to a consensus?
- How was caring involved in this scenario?
- How do you know who you care for? How do you feel?

- How do you know whether you care for one person or five people? A dog or a weasel? The rich or the poor? What sorts of things influences how you care for one another?
- What kinds of things can we do to care for one another in our team? How can we help one another and how can we show our peers that we are glad they care for us?
- Why is it difficult to care once in a while?

Scenario 1:

You have a little sister who is very sick. The only way to save her is to inject many kittens with the illness she has and experiment with various medicines to see if they will work. What should the doctors do? Do animals have a right to life? Are we justified in using them in experiments? In eating them?

Scenario 2:

You are spending the afternoon with a friend of yours who isn't very popular. You run into a group of your friends who invite you to go to a movie but they say that your unpopular friend can't come. What is the right thing to do?

Scenario 3:

A rich man and a poor man commit the same type of crime. The rich man is fined \$10,000 while the poor man is sent to jail for one year. Is this fair?

Scenario 4:

You find a wallet on the ground that belongs to a very famous and very wealthy person. It has \$1000 in it. Do you return the wallet?

Scenario 5:

You are on a boat and nearby are two large rocks filled with persons waiting to be rescued; there are five grown-ups on one rock and one child on the other. Assume that you cannot rescue both groups and that you are the only one able to rescue either group. Which group do you rescue?

Scenario 6:

You can only rescue one of each of the following, which do you save?

- a) A child or an adult
- b) A stranger or your dog
- d) Your father or a Nobel Prize Winner
- e) A dog or a weasal
- f) Your entire family or the entire canine species
- g) A bottle with the cure for cancer or your brother

## APPENDIX E

### OUTLINE OF STAFF TRAINING SESSIONS

## Ethic of Care Staff Training

1. Welcome & introductions? (20 minutes)
  - a. I am interested in caring because it is one of the most important ingredients to PYD and it is something that we do really well.
  - b. Our goal for this week is to infuse our interactions with an ethic of care
  - c. Survey & consent
2. Modeling
  - a. Who has cared for you? First person that comes to mind- draw picture...what did they do? What did they say? How did you know? How did you care for them? How did you show it?
  - b. Mechanisms of caring...
    - i. Dynamic between two people
    - ii. Interest & connection “someone has to be crazy about that kid!”
    - iii. Desire to care...ethic to do what is right...
    - iv. Extending care in an unbiased manner
    - v. Acknowledgement of unbiased caring
    - vi. Confirmation of caring ethic
3. Dialogue
  - a. Scenarios
  - b. Discussion- when is caring easy? Difficult? Natural? Ethical? Is it a feminine trait?
  - c. In what ways is YC caring? What can we do to make our interactions especially caring? How will you know the effects?
4. Practice
  - a. What is one caring relation I can try to form this week? What do I need to do to make this connection?
  - b. What is one caring relation I can continue to build this week? How can I help that camper adopt an ethic of care?
  - c. What can I do with my small group or the whole group to encourage caring for one another, for YC, and for the community at large?
5. Confirmation
  - a. Verbal
  - b. Gift Cards

## Caring Activities Staff Training

1. Welcome & introductions? (20 minutes)
  - a. I am interested in caring because it is one of the most important ingredients to PYD and it is something that we do really well.
  - b. Survey & consent
2. Background
  - a. Who has cared for you? First person that comes to mind- draw picture...what did they do? What did they say? How did you know? How did you care for them? How did you show it?
  - b. Our goal this week is to promote caring through one-on-one, small group, and large group activities.
3. One-on-one activities: Cross-age buddies
  - a. Activity Sheet
  - b. Logistics (one time per week)
  - c. Trouble-shoot
4. Small group activities: Team Meetings
  - a. Activity Sheet: Teambuilding
    - i. Silent Introductions
    - ii. The M & M Game
    - iii. Protect your Peer
  - b. Activity Sheet: Problem Solving
    - i. Ethical Scenario I
    - ii. Ethical Scenario II
    - iii. Ethical Scenario III
  - c. Logistics (three times per week)
  - d. Trouble-shoot
5. Large group activity: Fund Drive
  - a. Activity:
  - b. Focus: Caring for our Community & working together toward a common goal
  - c. Daily meetings
    - i. Caring for our Community Project check-in
    - ii. What do we care about in our community?
    - iii. What is our goal?
    - iv. How will we meet this goal?
    - v. How did we work together? What about our community makes it a caring community?

APPENDIX F

STAFF INTERVIEW SCHEDULE

### **Staff Interview Schedule**

1. Tell me about your summer.
2. Did anything notable happen this summer that may have impacted the outcomes of this study?
3. What are the aspects of your program you think promote this idea of caring community?
4. Tell me about your experience in the staff training sessions.
5. How would you describe the similarities and differences between the two sessions?
6. Describe how you implemented the Caring Activities.
7. Describe what it was like to work here over the summer. What were the challenges? What did you enjoy the most?
8. What would you recommend to other camp program leaders who want to promote caring community at their camp?



## APPENDIX G

### CAMPER AND STAFF CONSENT DOCUMENTS

## **Assent to Participate in a Research Study**

### **Who am I and what am I doing?**

I am a student from the University of Utah. I would like to ask if you would be in a research study. A research study is a way to find out new information about something.

### **Why am I asking you to be in this research study?**

In this study, I am trying to learn more about the ways kids feel connected to their friends and to their counselors at summer camp. I want you to be in this study because you are in the YouthCity summer program.

### **What happens in the research study?**

If you decide to be in this research study and your parent or guardian agrees, I will ask you to complete a short survey at three different times during the summer. There are no right or wrong answers on this survey and I will help you if you have any questions while taking the survey.

### **Will any part of the research study hurt you?**

Participating in this study will not hurt you in any way. Your counselors and I are available to answer any questions you might have.

### **Will the research study help you or anyone else?**

Being in this research study will help you have a great time at YouthCity and will help your counselors know how to plan activities for you.

### **Who will see the information about you?**

Only I will be able to see the information about you from this research study. I will not tell anyone else that you are in the study.

### **What if you have any questions about the research study?**

Contact Laurie Browne by phone (801)599-0780 or email [laurie.browne@hsc.utah.edu](mailto:laurie.browne@hsc.utah.edu).

**For IRB Use Only**  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011

It is okay to ask questions. If you don't understand something, you can ask me. I want you to ask questions now and anytime you think of them. If you have a question later that you didn't think of now, you can call Laurie at (801)599-0780 or ask me the next time we see you.

### **Do you have to be in the research study?**

You do not have to be in this study if you don't want to. Being in this study is up to you. No one will be upset if you don't want to do it. Even if you say yes now, you can change your mind later and tell us you want to stop.

We will also ask your parent or guardian to give their permission for you to be in this study. But even if your parent or guardian says "yes" you can still decide not to be in the research study.

### **Agreeing to be in the study**

I was able to ask questions about this study. Signing my name at the bottom means that I agree to be in this study. My parent or guardian and I will be given a copy of this form after I have signed it.

---

Printed Name

---

Sign your name on this line

---

Date

---

Printed Name of Person Obtaining Assent

---

Signature of Person Obtaining Assent

---

Date

**For IRB Use Only**  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011

The following should be completed by the study member conducting the assent process if the participant agrees to be in the study. Initial the appropriate selection:

\_\_\_\_\_ The participant is capable of reading the assent form and has signed above as documentation of assent to take part in this study.

\_\_\_\_\_ The participant is not capable of reading the assent form, but the information was verbally explained to him/her. The participant signed above as documentation of assent to take part in this study.

**For IRB Use Only**  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011

## Parental Permission Document

### BACKGROUND

Your child is being asked to take part in a research study that is taking place while he or she is at the YouthCity summer program. Before you decide whether or not you feel comfortable with your child participating in this study, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether you will allow your child to take part in this study.

The purpose of the study is explore the ways kids feel cared for at a summer camp and the parts of the camp program that influence whether or not they feel like camp is a caring community of people. This study is important because it will help us better plan camp experiences so that campers will have fun and learn lots of new things. Although the staff at YouthCity will assist in this study, it will be conducted primarily by a graduate student from the Department of Parks, Recreation, and Tourism at the University of Utah.

### STUDY PROCEDURE

This study will take place over the course of both 4-week sessions at YouthCity. As part of this study your child will participate in several camp activities that are designed to help campers and counselors get to know one another better. At approximately three different points during the summer, your child will be asked questions about how he or she felt about camp and the community of people at this camp. Your child will answer these questions on a short questionnaire that will be kept private and confidential.

### RISKS

There are no foreseeable risks to your child for participating in this study. The activities used for this study are designed to help campers get to know one another and create a camp community. The questions your child will answer do not require he or she give any sensitive information and all responses will be kept private and confidential. A trained researcher and YouthCity staff will be available to help your child while he or she participates in this study.

### BENEFITS

We cannot promise any direct benefit to your child for taking part in this study. However, possible benefits include an increased sense of social support and belonging at camp. We hope that the information we get from this study may

For IRB Use Only  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011

help develop a greater understanding of the ways kids interact with others in the summer camp setting.

## CONFIDENTIALITY

Your child's survey responses will be kept confidential. This information will be stored in a locked filing cabinet or on a password protected computer located in the researcher's work space. Only the researcher and members of his/her study team will have access to this information.

However, if your child discloses actual or suspected abuse, neglect, or exploitation of a child, or disabled or elderly adult, the researcher or any member of the study staff must, and will, report this to Child Protective Services (CPS), Adult Protective Services (APS) or the nearest law enforcement agency.

## PERSON TO CONTACT

If you have questions, complaints or concerns about this study, you can contact Laurie Browne at (801) 599-0780. If you feel your child has been harmed as a result of participation, please call Kim Thomas, Program Manager for YouthCity, at (801) 535-6129 who may be reached at weekday business hours.

**Institutional Review Board:** Contact the Institutional Review Board (IRB) if you have questions regarding your child's rights as a research participant. Also, contact the IRB if you have questions, complaints or concerns which you do not feel you can discuss with the investigator. The University of Utah IRB may be reached by phone at (801) 581-3655 or by e-mail at [irb@hsc.utah.edu](mailto:irb@hsc.utah.edu).

**Research Participant Advocate:** You may also contact the Research Participant Advocate (RPA) by phone at (801) 581-3803 or by email at [participant.advocate@hsc.utah.edu](mailto:participant.advocate@hsc.utah.edu).

## VOLUNTARY PARTICIPATION

Example: It is up to you to decide whether to allow your child to take part in this study. Refusal to allow your child to participate or the decision to withdraw your child from this research will involve no penalty or loss of benefits to which your child is otherwise entitled. This will not affect your or your child's relationship or experience within YouthCity programs..

## COSTS AND COMPENSATION TO PARTICIPANTS

There are no costs for participation other than your normal YouthCity registration fees. There is no compensation for participating in this study.

For IRB Use Only  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011

**CONSENT**

By signing this consent form, I confirm I have read the information in this parental permission form and have had the opportunity to ask questions. I will be given a signed copy of this parental permission form. I voluntarily agree to allow my child to take part in this study.

\_\_\_\_\_  
Child's Name

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship to Child

\_\_\_\_\_  
Name of Researcher or Staff

\_\_\_\_\_  
Signature of Researcher or Staff

\_\_\_\_\_  
Date

**For IRB Use Only**  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011

***Effects of Design and Implementation Factors on Campers' Sense of Camp as a Caring Community***

The purpose of this research study is investigate the aspects of a camp program that impact the ways kids feel connected to one another and cared for while at camp. We are doing this study because caring and interpersonal connectedness are critical for positive youth development.

I would like to ask you to complete the following questionnaire and return it to me when you are finished. There are no risks to you for completing this questionnaire, your responses will remain confidential. Only I will see you responses and will make sure they are kept secure so that your privacy is protected.

If you have any questions, concerns, or complaints or if you feel you have been harmed by this research please contact Laurie Browne, Department of Parks, Recreation, & Tourism at the University of Utah at (801)599-0780.

Contact the Institutional Review Board (IRB) if you have questions regarding your rights as a research participant. Also, contact the IRB if you have questions, complaints or concerns which you do not feel you can discuss with the investigator. The University of Utah IRB may be reached by phone at (801) 581-3655 or by e-mail at [irb@hsc.utah.edu](mailto:irb@hsc.utah.edu).

It should take 10 to 15 minutes to complete the questionnaire. Participation in this study is voluntary. You can choose not to take part and you can also choose not to finish the questionnaire or omit any question you prefer not to answer without penalty or loss of benefits.

By returning this questionnaire, you are giving your consent to participate.

Thank you very much for your willingness to participate in this study.

**For IRB Use Only**  
Version: C3110



University of Utah  
Institutional Review Board  
Approved 5/27/2010  
Expires 5/26/2011



## APPENDIX H

### STAFF INSTRUMENTATION

**Counselor Attitude Towards Camper Questionnaire**  
*adapted from Watson, Battistich, & Solomon (1997)*

<b><i>In your job as a camp staff member so far this summer...</i></b>	Never	Sometimes			Always
How often have your campers taken part in activities that help them understand how other people see, think or feel about things?	1	2	3	4	5
How often have you had group meetings or discussions that help students get to know one another, share their feelings, experiences or ideas?	1	2	3	4	5
How often has your group worked on projects that help make this camp a better place to be?	1	2	3	4	5
How often has your group worked on projects that help the community in general?	1	2	3	4	5
How often have your campers helped decide on projects, activities, trips, etc.?	1	2	3	4	5
How often have you encouraged the whole group to discuss problems and work out a solution?	1	2	3	4	5
How often have you given points or awards for good behavior?	1	2	3	4	5
How often have you shared things about yourself with your campers?	1	2	3	4	5
How often have you given rewards to the whole group?	1	2	3	4	5
How often do your campers choose their own activities?	1	2	3	4	5
<b><i>At this camp...</i></b>	I strongly disagree	I neither agree nor disagree			I strongly agree
...campers and counselors always act like they are a family	1	2	3	4	5
...counselors always consult with and help one another	1	2	3	4	5
...counselors always keep to themselves	1	2	3	4	5

...campers do not show any concern for one another	1	2	3	4	5
<b><i>At this camp...</i></b>	<b>I strongly disagree</b>		<b>I neither agree nor disagree</b>		<b>I strongly agree</b>
...campers are always very friendly with one another	1	2	3	4	5
...campers are always kind and supportive of one another	1	2	3	4	5
...campers always argue and fight	1	2	3	4	5
...there is always a great deal of cooperative effort among counselors	1	2	3	4	5
...counselors are always supportive of one another	1	2	3	4	5
...there are always good relations between counselors and campers	1	2	3	4	5
...campers never respect their counselors	1	2	3	4	5
...counselors are always interested in what campers do outside of camp	1	2	3	4	5
...there is a feeling that everyone is working together toward common goals	1	2	3	4	5
...counselors like the campers and always treat them with respect	1	2	3	4	5
<b><i>In general, I believe that...</i></b>	<b>I strongly disagree</b>		<b>I either agree nor disagree</b>		<b>I strongly agree</b>
... it is important for me to help campers to learn to be kind, considerate, and concerned about others	1	2	3	4	5
...it is important for me to help campers develop strong ethical standards and values	1	2	3	4	5
...I am making a difference in the lives of my campers	1	2	3	4	5

...I really enjoy my campers	1	2	3	4	5
...kids can be trusted	1	2	3	4	5
...it is important for kids to participate in decision-making about rules and activities	1	2	3	4	5
<i>In general, I believe that...</i>	I strongly disagree		I either agree nor disagree		I strongly agree
...it is important that activities provide kids with choices in how to do them	1	2	3	4	5
...kids want to understand things for themselves	1	2	3	4	5

**Measure of Moral Orientation** (*Liddell et al., 1992*)

Please rate the following statements as to how closely they describe your thoughts and feelings.

Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	
a	b	c	d	I try to resolve problems in a way that does not violate the rights of any of the people involved.
a	b	c	d	When solving problems, relationships are more important than the rights of individuals.
a	b	c	d	In practically all situations, I make decisions based upon the principles and rules rather than upon who is involved.
a	b	c	d	My decisions would favor those I care about more than those I do not know.
a	b	c	d	When I make decisions, I tend to be more subjective than objective.
a	b	c	d	In solving conflicts, I try to be rational without much regard to feelings.
a	b	c	d	I would not do anything to jeopardize my relationship with someone.
a	b	c	d	In all situations I try to do what I think is fair regardless of the consequences.
a	b	c	d	In most situations, I am impartial and unattached when making decisions.
a	b	c	d	In practically all situations I make decisions based upon who is involved rather than upon principles or rules.
a	b	c	d	I would rather be known as someone who is always objective and just than someone who is sensitive to others' feelings.
a	b	c	d	When I make decisions I tend to be more concerned with how my decisions will affect others rather than whether I am doing the "right" thing.

## REFERENCES

- American Camp Association. (2007). *Creating Positive Youth Outcomes*. Martinsville, IN: American Camp Association.
- Anderson-Burcher, D., Cash, S. J., Saltzburg, S., Midle, T., Pace, D. (2004). Institutions of youth development: The significance of supportive staff-youth relationships. *Journal of Human Behavior in the Social Environment*, 9(1 & 2), 83-99.
- Battistich, V., Schaps, E., Watson, M., Solomon, D., & Lewis, C. (2000). Effects of the Child Development Project on students' drug use and other problem behaviors. *Journal of Primary Prevention*, 21, 75-99.
- Battistich, V., Schaps, E., & Wilson, N. (2004). Effects of an elementary school intervention on students' "connectedness" to school and social adjustment during middle school. *Journal of Primary Prevention*, 24, 243-262.
- Battistich, V., Solomon, D., Kim, D., Watson, M., & Schaps, E. (1995). Schools as communities, poverty levels of student populations, and students' attitudes, motives, & performance: A Multi-level analysis. *American Educational Research Journal*, 32, 627-658.
- Battistich, V., Solomon, D., & Watson, M. (1998, April). Sense of community as a mediating factor in promoting children's social and ethical development. Paper presented at the meeting of the American Educational Research Association, San Diego, CA.
- Battistich, V., Solomon, D., Watson, M., & Schaps, E. (1997). Caring school communities. *Educational Psychologist*, 32, 137-151.
- Baumeister, R. F., & Leary, M. R. (1995). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Psychological Bulletin*, 117, 497-529.
- Bell, S. R., & Carrillo, N. (2007). Characteristics of effective summer learning programs in practice. *New Directions for Youth Development*, 114, 45-63.
- Bergman, R. (2004). Caring for the ethical ideal: Nel Noddings on moral education. *Journal of Moral Education*, 33(2), 149-162.

- Bialeschki, M. D., Henderson, K. A., & James, P. A. (2007). Camp experiences and developmental outcomes for youth. *Child & Adolescent Psychiatric Clinics of North America*, 16, 769-788.
- Blum, R. W. & Libbey, H. P. (2004). Executive summary. *Journal of School Health*, 74(7), 231-232.
- Boffey, D. B., & Overtree, C. E. (2002). Life changers. *Camping Magazine*, 75(5), 19-24.
- Boutelle, K., Eisenberg, M. E., Gregory, M. L., & Neumark-Sztainer, D. (2009). The reciprocal relationship between parent-child connectedness and adolescent emotional functioning over 5 years. *Journal of Psychosomatic Research*, 66, 309-316.
- Bowlby, J. (1982). *Attachment*. New York: Basic Books.
- Brannon, S., & Fullerton, A. (1999). Case studies reveal camper growth. *Camping Magazine*, 72(1), 22-25.
- Browne, L. P., & Bialeschki, M. D. (February 2010). Developing leadership skills in youth: Preliminary results for the Camp 2 Grow Curriculum. Paper presented at the American Camp Association National Conference. Denver, CO.
- Bryk, A. S., & Driscoll, M. E. (1988). The high school as community: Contextual influences, and consequences for students and teachers. Madison, WI: National Center on Effective Secondary Schools.
- Caldwell, L. L. (2005). Recreation and youth development. In P. A. Witt & L. L. Caldwell, (Eds.), *Recreation and Youth Development*, (pp. 196-191). State College, PA: Venture.
- Catalano, R. F., Berglund, M. L., Ryan, J. A., Lonczak, J., & Hawkins, D. (2004). Positive youth development in the United States: Research findings on evaluations of positive youth development programs. *Annals of the American Academy of Political and Social Science*, 591, 98-124.
- Catalano, R. F., Haggerty, K. P., Oesterle, S., Fleming, C. B., & Hawkins, J. D. (2004). The importance of bonding to school for healthy development: Findings from the Social Development Research Group. *Journal of School Health*, 74(7), 252-261.
- Chenery, M. F. (1981). Effects of summer camp on child development and contributions of counselors to those effects. *Journal of Leisure Research*, 13, 195-207.
- Colyn, L., DeGraaf, D., & Certan, D. (2008). Social capital and organized camping: It's about community! *Camping Magazine*, 81(2), 34-37.

- Csikszentmihalyi, M., & Rathunde, K. (1998). The development of the person: An experiential perspective on the ontogenesis of psychological complexity. In W. Damon (Ed.) and R. M. Lerner (Vol. Ed.), *Handbook of child psychology* (5<sup>th</sup> ed.), Vol. 1: Theoretical models of human development. (pp. 635-684. New York: John Wiley & Sons.
- Damon, W. (2004). What is positive youth development? *Annals of the American Academy of Political and Social Science*, 591, 13-24.
- Dariotis, J. K., Bumbarger, B. K., Duncan, L. G., & Greenberg, M. T. (2008). How do implementation efforts relate to program adherence? Examining the role of organizational, implementer, and program factors. *Journal of Community Psychology*, 36(6), 744-760.
- Deci, E. L., & Ryan, R. M. (2002). *Handbook of self-determination research*. Rochester, NY: University of Rochester Press.
- DeGraaf, D., & Glover, J. (2002). Stories from camp. *Camping Magazine*, 75(6), 33-36.
- Dishion, T. J., McCord, J., & Poulin, F. (1999). When interventions harm: Peer groups and problem behavior. *American Psychologist*, 54(9), 755-764.
- Domitrovich, C. E., & Greenberg, M. T. (2000). The study of implementation: Current findings from effective programs that prevent mental disorders in school-aged children. *Journal of Educational and Psychological Consultation*, 11(2), 193-221.
- DuBois, D. L., Holloway, B. E., Valentine, J. C., & Cooper, H. (2002). Effectiveness of mentoring programs for youth: A meta-analytic review. *American Journal of Community Psychology*, 30, 157-169.
- Duerden, M. D., Harrist, C., & Witt, P. A. (2009). The influence of socialization on youth program outcomes: A social development model perspective. Paper presented at the Annual Congress of the National Park and Recreation Association, Salt Lake City, UT.
- Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of the research on the influence of implementation on program outcomes and the factors affecting implementation. *American Journal of Community Psychology*, 41, 327-350.
- Dworken, B. S. (2001). Research reveals the assets of camp. *Camping Magazine*, 74(5), 37-39.
- Eccles, J., & Gootman, J. A. (2002). *Community programs to promote youth development*. Washington, D.C.: National Academies Press.



- Ewert, A., & Sibthorp, J. (2009). Creating outcomes through experiential education: The challenge of confounding variables. *Journal of Experiential Education, 31*, 376-389.
- Ford, D. H., & Lerner, R. M. (1992). *Developmental systems theory*. Newbury Park, CA: Sage.
- Forum on Child and Family Statistics. (2010). Single- and working parent households in the United States. Retrieved online January 12, 2010 from: <http://www.childstats.gov/americaschildren/eco2.asp>
- Galotti, K. M. (1989). Gender differences in self-reported moral reasoning: A review and new evidence. *Journal of Youth & Adolescence, 18*, 475-488.
- Gambone, M. A., Connell, J. P., Klem, A. M., Sipe, C. L., & Bridges, L. (2002). *Finding out what matters for youth: Testing key links in a community action framework for youth development*. Philadelphia, PA: Youth Development Strategies, Inc.
- Gardner, M., & Steinberg, L. (2005). Peer influence on risk taking, risk preference, and risky decision making in adolescence and adulthood: An experimental study. *Developmental Psychology, 41*, 625-635.
- Garst, B., Franz, N., Baughman, S., Smith, C., & Peters, B. (2009). Growing without limitations: Transformation among young adult camp staff. *Journal of Youth Development, 4*(1).
- Ghazvini, A., & Mullis, R. L. (2002). Center-based care for young children: Examining predictors of quality. *Journal of Genetic Psychology, 163*, 112-125.
- Gillard, A., Witt, P. A., & Watts, C. E. (2009, October). Program processes at a youth camp. Paper presented at the meeting of the National Parks and Recreation Association, Salt Lake City, UT.
- Gilligan, C. (1982). *In a different voice*. Cambridge, MA: Harvard University Press.
- Gilligan, C., & Attanucci, J. (1988). Two moral orientations. In C. Gilligan, J. V. Ward, & J. M. Taylor, (Eds.). *Mapping the moral domain*, (pp. 73-86). Cambridge, MA: Harvard University Press.
- Gilligan, C., Ward, J. V., & Taylor, J. M., (Eds.). (1988). *Mapping the moral domain*. Cambridge, MA: Harvard University Press.
- Greenberger, E., Chen, C., & Beam, M. R. (1998). The role of "very important" nonparental adults in adolescent development. *Journal of Youth & Adolescence, 27*, 321-343.

- Grossman, J. B., & Bulle, M. J. (2006). Review of what youth programs do to increase the connectedness of youth and adults. *Journal of Adolescent Health, 39*, 788-799.
- Halpern, R., Barker, G., & Mollard, W. (2000). Youth programs as alternative spaces to be: A study of neighborhood youth programs in Chicago's West Town. *Youth & Society, 31*, 469-506.
- Hawkins, J. D., & Weis, J. G. (1985). The social development model: An integrated approach to delinquency prevention. *Journal of Primary Prevention, 6*, 73-99.
- Hawkins, J. D., Catalano, R. F., Arthur, M. W., Egan, E., Brown, E. C., Abbott, R. D., & Murray, D. M. (2008). Testing communities that care: The rationale, design and behavioral baseline equivalence of the community youth development study. *Prevention Science, 9*, 178-190.
- Henderson, K.H., Bialeschki, M.D., & James, P.A. (2007). Overview of camp research. *Child and Adolescent Psychiatric Clinics of North America, 16*(4), 755-767.
- Henderson, K. A., Whitaker, L. S., Bialeschki, M. D., Scanlin, M. M., & Thurber, C. (2007). Summer camp experiences: Parental perceptions of youth development outcomes. *Journal of Family Issues, 28*, 987-1006.
- Henderson, K. A., Powell, G., & Scanlin, M. (2005). Observing outcomes in youth development: An analysis of mixed methods. *Journal of Park and Recreation Administration, 23*(4), 58-77.
- Hirschi, T. (1969). *Causes of delinquency*. Berkeley, CA: University of California Press.
- Hough, M., & Browne, L. P. (January 2009). Connecting camp mechanisms to camper outcomes: A case for program theory. Paper presented at the American Camp Association National Conference. Orlando, FL.
- Hult, R. E. (1979). On pedagogical caring. *Educational Theory, 29*(3), 237-243.
- Jaffee, S. & Hyde, J. S. (2000). Gender differences in moral orientation: A meta-analysis. *Psychological Bulletin, 126*, 703-726.
- Juuvari, S. (2006). The ethic of care development: A longitudinal study of moral reasoning among practical-nursing, social-work and law-enforcement students. *Scandinavian Journal of Psychology, 47*, 193-202.
- Klem, A. M., & Connell, J. P. (2004). Relationships matter: Linking teachers support to student engagement and achievement. *Journal of School Health, 74*(7): 262-273.

- Kohlberg, L. (1984). *The psychology of moral development: Essays on moral development* (Vol. 2). San Francisco, CA: Harper & Row.
- Kruger, L. E. (2006). Recreation as a path for place making and community building. *Leisure/Loisir*, 30, 383-392.
- James, J. J. (2003). The threshold for staff transformation: An ethnography of Girl Scout camp staff. Paper presented at the National Conference of the American Camp Association. Denver, CO.
- Larson, R. (2006). Positive youth development, willful adolescents, and mentoring. *Journal of Community Psychology*, 34, 677-689.
- Larson, R. W., Rickman, A. N., Gibbons, C. M., & Walker, K. C. (2009). Practitioner expertise: Creating quality within the daily tumble of events in youth settings. *New Directions for Youth Development*, 121, 71-88.
- Larson, R. W., & Walker, K. C. (2010). Dilemmas of practice: Challenges to program quality encountered by youth program leaders. *American Journal of Community Psychology*, 45, 338-349.
- Leming, J. S. (1993). Synthesis of research: In search of effective character education. *Educational Leadership*, 51, 3:63-71.
- Libbey, H. P. (2004). Measuring student relationships to school: Attachment, bonding, connectedness, & engagement. *Journal of School health*, 74, 274-283.
- Liddell, D. L. (1990). Measure of moral orientation: Construction of an objective instrument measuring care and justice. Unpublished doctoral dissertation, Auburn University.
- Liddell, D. L., Halpin, G., & Halpin, W. G. (1992). The measure of moral orientation: Measuring the ethics of care and justice. *Journal of College Student Development*, 33, 325-330.
- Loukas, A., Ripper-Suhler, K. G., & Horton, K. D. (2009). Examining temporal associations between school connectedness and early adolescent adjustment. *Journal of Youth & Adolescence*, 38, 804-812.
- Magyar, T. M., Guivernau, M. R., Gano-Overway, L. A., Newton, M., Kim, M., Watson, D., & Fry, M. D. (2007). The influence of leader efficacy and emotional intelligence on personal caring in physical activity. *Journal of Teaching in Physical Education*, 26, 310-319.
- Marsh, P. E. (1999). Does camp enhance self-esteem? *Camping Magazine*, 72(6), 17-21.

- Mayeroff, M. (1971). *On caring*. New York: Harper Row.
- McKenzie, M. D. (2000). How are adventure education program outcomes achieved? A review of the literature. *Australian Journal of Outdoor Education*, 5(1), 19-28.
- McNeely, C. & Falci, C. (2004). School connectedness and the transition into and out of health-risk behavior among adolescents: A comparison of social belonging and teacher support. *Journal of School Health*, 74(7), 285-292.
- Nadler, R. S. (1993). Therapeutic process of change. In M. A. Gass, (Ed.), *Adventure Therapy: Therapeutic Applications of Adventure Programming*, (pp. 57-69). Dubuque, IA: Kendall-Hunt.
- National Center for Education Statistics. 2007-2008 Average class size by state. Retrieved online January 12, 2010 from [http://nces.ed.gov/surveys/sass/tables/sass\\_2008\\_08.asp](http://nces.ed.gov/surveys/sass/tables/sass_2008_08.asp)
- Newton, M., Watson, D. L., Gano-Overway, L., Fry, M., Kim, M., & Magyar, M. (2007). The role of a caring-based intervention in a physical activity setting. *The Urban Review*, 39, 281-299.
- Newton, M., Fry, M., Watson, D., Gano-Overway, L., Kim, M., Magyar, M., & Guivernau, M. (2009). Psychometric properties of the Caring Climate Scale in a physical activity setting. *Revista de Psicología del Deporte*, 16(1), 67-84.
- Noam, G. G., & Fiore, N. (2004). Relationships across multiple settings: An overview. *New Directions for Youth Development*, 103, 9-16.
- Noddings, N. (2003). *Caring: A feminine approach to ethics and moral education* (2<sup>nd</sup> ed.). Berkeley, CA: University of California Press.
- Noddings, N. (2005). *The challenge to care in schools* (2<sup>nd</sup> ed.). New York: Teachers College Press.
- Paisley, K., & Powell, G. M. (2007). Staff burn-out prevention and stress management. *Child & Adolescent Psychiatric Clinics of North America*, 16, 829-841.
- Phillips, D., Mekos, D., Scarr, S., McCartney, K., & Abbott-Shim, M. (2000). Within and beyond the classroom door: Assessing quality in child care centers. *Early Childhood Research Quarterly*, 15(4), 475-496.
- Pittman, K. J., Irby, M., Tolman, J., Yohalem, N., & Ferber, T. (2005). *Preventing problems, promoting development, encouraging engagement*. Washington, D. C.: The Forum for Youth Investment.

- Prior, V., & Glaser, D. (2006). Understanding attachment and attachment disorders. Philadelphia, PA: Royal College of Psychiatrists.
- Quaid, M. (2009). Class-size increases in the United States. Retrieved January 12, 2010 from [http://www.usatoday.com/news/education/2009-07-29-class-sizes\\_N.htm](http://www.usatoday.com/news/education/2009-07-29-class-sizes_N.htm).
- Resnick, M. D., Bearman, P. S., Blum, R. W., et al. (1997). Protecting adolescents from harm: Findings from the National Longitudinal Study on Adolescent Health. *Journal of the American Medical Association*, 278, 823-832.
- Resnick, M. D., Harris, L. J., & Blum, R. W. (1993). The impact of caring and connectedness on adolescent health and well-being. *Journal of Paediatrics & Child Health*, 29, S3-S9.
- Rhodes, J. E. (2004). The critical ingredient: Caring youth-staff relationships in after-school settings. *New Directions for Youth Development*, 101, 145-161.
- Rhodes, J. E., Spencer, R., Keller, T. E., Liang, B., & Noam, G. (2006). A model for the influence of mentoring relationships on youth development. *Journal of Community Psychology*, 34, 691-707.
- Rice, M., Kang, D., Weaver, M., & Howell, C. C. (2008). Relationship of anger, stress, and coping with school connectedness in fourth-grade children. *Journal of School Health*, 78(3), 149-156.
- Roark, M. F. (2009). Does the power of the camp experience differ within the length of sessions? An analysis of session length on camper developmental outcomes of competence, friendship skills, and independence. Paper presented at the American Camp Association National Conference, Orlando, FL.
- Roberts, W., Hom, A., & Battistich, V. (1995, April). Assessing students' and teachers' sense of the school as a caring community. Paper presented at the meeting of the American Educational Research Association, San Francisco.
- Robertson, R. M. (1997). Walking the talk: Organizational modeling and commitment to youth and staff development. *Child Welfare*, 76, 577-598.
- Roeser, R. W., Midgley, C., & Urdan, T. C. (1996). Perceptions of the school psychological environment and early adolescents' psychological and behavioral functioning in school: The mediating role of goals and belonging. *Journal of Educational Psychology*, 88(3), 408-422.
- Roth, J. L., & Brooks-Gunn, J. (2003). Youth development programs: Risk, prevention, & policy. *Journal of Adolescent Health*, 32, 170-182.

- Scanlin, M. (2001). What is camp about? *Camping Magazine*, 74(1), 29-31.
- Schaumleffel, N. A., & Payne, L. L. (2007, February). Does seasonal camp staff really intend to make camp more than fun and games? Paper presented at the American Camp Association National Conference, Austin, TX.
- Schubert, J. L. (2003). Practicing what we preach: The importance of consistency in staff and youth training initiatives. *Reclaiming Children & Youth*, 12, 186-187.
- Seligson, M. & MacPhee, M. (2004). Emotional intelligence and staff training in after-school environments. *New Directions for Youth Development*, 103, 71-83.
- Serow, R. C., & Solomon, D. (1979). Classroom climates and students' intergroup behavior. *Journal of Educational Psychology*, 71, 669-676.
- Sharilla, P., Gass, M., & Conlon, C. (2008). An evaluation of the impact of a one-week summer camp experience on participants' social skill development. *Research in Outdoor Education*, 9, 75-85.
- Shochet, I. M., Dadds, M. R., Ham, D., & Montague, R. (2006). School connectedness is an underemphasized parameter in adolescent mental health: Results of a community prediction study. *Journal of Clinical Child and Adolescent Psychology*, 35(2), 170-179.
- Sibthorp, J. (2003). An empirical look at Walsh and Golins' adventure education process model: Relationships between antecedent factors, perceptions of characteristics of an adventure education experience, and changes in self-efficacy. *Journal of Leisure Research* 35(2), 80-106.
- Sibthorp, J., Browne, L. P., & Bialeschki, M. D. (2010). Measuring positive youth development at summer camp: Problem solving and camp connectedness. *Research on Education in the Outdoors*, 10,
- Smith, C., Devaney, T. J., Akiva, T., & Sugar, S. A. (2009). Quality and accountability in the out-of-school-time sector. *New Directions for Youth Development*, 121, 109-127.
- Solomon, D., Battistich, V., Kim, D., & Watson, M. (1997). Teacher practices associated with students' sense of the classroom as a community. *Social Psychology of Education*, 1, 235-267.
- Solomon, D., Watson, M., Battistich, V., Schaps, E., & Delucchi, K. (1996). Creating classrooms that students experience as communities. *American Journal of Community Psychology*, 24, 719-748.

- Tabachnick, B. G., & Fidell, L. S. (2007). *Using multivariate statistics* (5<sup>th</sup> ed.). Boston, MA: Pearson.
- Tarlow, B. (1996). Caring: A negotiated process that varies. In S. Gordon, P. Benner, & N. Noddings (Eds.). *Caregiving: Readings in knowledge, practice, ethics, and politics* (pp. 56-82). Philadelphia, PA: University of Pennsylvania.
- Thurber, C. A., Scanlin, M. M., Scheuler, L., & Henderson, K. A. (2007). Youth development outcomes of the camp experience: Evidence for multidimensional growth. *Journal of Youth & Adolescence*, 36, 241-254.
- Toupence, R. H. (2003). Opening the doors to leadership development: Leadership self-perceptions among adolescent campers at a residential youth camp. *Camping Magazine*, 76(3), 18-21.
- Turiel, E. (1977). Conflict and transition in adolescent moral development, II: The resolution of disequilibrium through structural reorganization. *Child Development*, 48, 634-637.
- U.S. Census Bureau. (2010). State and County Quick Facts. Retrieved online February 28, 2010 from <http://quickfacts.census.gov/qfd/states/17/1702154.html>.
- Vieno, A., Perkins, D. D., Smith, T. M., & Santinello, M. (2005). Democratic school climate and sense of community in school: A multilevel analysis. *American Journal of Community Psychology*, 36(3 & 4), 327-341.
- Voisin, D. R., Salazar, L. F., Crosby, R., Diclemente, R. J., Yarber, W. L., & Staples-Horne, M. (2005). Teacher connectedness and health-related outcomes among detained adolescents. *Journal of Adolescent Health*, 37, 17-23.
- Walsh, V., & Golins, G. (1976). *The exploration of the Outward Bound process*. Denver, CO: Colorado Outward Bound Publications.
- Watson, M., Battistich, V., & Solomon, D. (1997). Enhancing students' social and ethical development in schools: An intervention program and its effects. *International Journal of Educational Research*, 27, 571-586.
- Wilson, D. (2004). The interface of school climate and school connectedness and relationships with aggression and victimization. *Journal of School Health*, 74(7), 293-299.
- Witherspoon, D., Schotland, M., Way, N., & Hughes, D. (2009). Connecting the dots: How connectedness to multiple contexts influences the psychological and academic adjustment of urban youth. *Applied Developmental Science*, 13(4), 199-216.

- Wentzel, K. R. (1998). Social relationships and motivation in middle school: The role of parents, teachers, and peers. *Journal of Educational Psychology, 90*, 202-209.
- Wentzel, K. R. (1997). Student motivation in middle school: The role of perceived pedagogical caring. *Journal of Educational Psychology, 89*, 411-419.
- Woods, C. J. P. (1996). Gender differences in moral development and acquisition: A review of Kohlberg's and Gilligan's models of justice and care. *Social Behavior and Personality, 24*, 375-384.
- Yohalem, N., Granger, R. C., & Pittman, K. J. (2009). The quest for quality: Recent developments and future directions for the out-of-school-time field. *New Directions for Youth Development, 121*, 129-140.
- You, S., Furlong, M. J., Felix, E., Sharkey, J. D., & Tanigawa, D. (2008). Relations among school connectedness, hope, life satisfaction, and bully victimization. *Psychology in the Schools, 45*(5), 446-460.
- Yuen, F. C., Pedlar, A., & Mannell, R. C. (2005). Building community and social capital through children's leisure in the context of an international camp. *Journal of Leisure Research, 37*, 494-518.