"I really wanted her to have a Big Sister": Caregiver perspectives on mentoring for early adolescent girls

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ABSTRACT

Formal youth mentoring programs tend to focus on the mentor-mentee dyad as the primary relationship cultivated and supported. The interests and preferences of the parent or caregiver in the mentoring relationship may receive little attention. In this study, semi-structured qualitative interviews were conducted with primary caregivers ($N = 20$) of early adolescent girls participating in a Big Brothers Big Sisters community-based mentoring program to explore reasons why they wanted mentors for their daughters. Thematic analysis revealed that caregivers expected mentors to support their daughters as trusted companions, confidants, and conduits to opportunities and services. In addition, caregivers noted ways in which mentoring offered them respite and reinforced their parenting. The findings highlight the potential value of assessing caregiver perspectives and priorities so that program staff and mentors can partner more effectively with youth and families for successful mentoring experiences.

1. Introduction

Mentoring is a popular intervention for supporting the development of young people. Meta-analyses of evaluation studies indicate that mentoring programs have positive effects on multiple social, behavioral, academic, and health outcomes for participating youth (DuBois, Holloway, Valentine, & Cooper, 2002; DuBois, Portillo, Rhodes, Silverthorn, & Valentine, 2011). However, not all mentoring programs are equally effective; certain program practices and priorities are associated with more favorable youth outcomes (DuBois et al., 2002, 2011). The degree to which the parent/guardian of the youth mentee is engaged in the intervention is one factor that may enhance or diminish program effects (Keller, 2005; Taylor & Porcellini, 2014).

Program staff commonly express a belief that the success of community-based mentoring relationships is dependent on the involvement of the parent (Basualdo-Delmonico & Spencer, 2016; Spencer & Basualdo-Delmonico, 2014). A supportive parent has the potential to facilitate a positive mentoring relationship in a variety of ways, such as ensuring that the child meets with the mentor, sharing information about the child with the mentor, and encouraging and appreciating the mentor (Keller, 2005). Mentoring programs that incorporated parent involvement were found in one meta-analysis to be more effective than

those that did not (DuBois et al., 2002), and there is evidence that the effects of mentoring may be partially attributed to resulting improvements in the parent-child relationship (Rhodes, Grossman, & Resch, 2000). Nevertheless, research that considers the social network of relationships surrounding the mentor/mentee dyad to explore the perspectives, priorities, and potential impact of other important stakeholders in the intervention, such as the parent/guardian, is only beginning to emerge (Keller & Blakeslee, 2014).

Much of the research focusing directly on the parents of mentored youth has been conducted by Spencer and Basualdo-Delmonico using qualitative methods to understand the experiences of parents and staff involved in Big Brothers Big Sisters (BBBS) programs (Basualdo-Delmonico & Spencer, 2016; Spencer & Basualdo-Delmonico, 2014; Spencer, Basualdo-Delmonico, & Lewis, 2011). The first of these studies found that common assumptions made by mentoring programs and mentors—that parents seek mentors to be stand-in parents or role models to compensate for parental shortcomings—were largely unsubstantiated. The majority of interviewed parents played an active role in the mentoring relationship, often supporting but sometimes interfering with the relationship. Three major parental roles within the mentoring system were identified, including: (a) mediator, (b) coach, and (c) collaborator. Many parents appeared to play two or more of

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these roles during the course of the mentoring relationship. When operating as a mediator, the parent worked to support the best interest of the child, taking action to foster, preserve, or redirect the mentoring relationship. When assuming the role of coach, the parent tended to perceive the mentor as needing additional support, maturity, or guidance and took action to influence the direction of the mentoring relationship. When assuming the role of collaborator, parents actively engaged in the mentoring relationship and worked with the mentor to create a shared vision for the relationship using a team approach (Spencer et al., 2011).

Findings from another study, which featured focus groups with the program staff in 24 different BBBS agencies, emphasized the significance of parental participation in the intervention, highlighting the view that "a parent can make or break a match" (Spencer & Basualdo-Delmonico, 2014, p. 77). The focus groups revealed distinctive philosophical and operational approaches agencies adopted for interacting with parents and families: (a) involving; (b) engaging and serving, and (c) collaborating. Agencies with an involving strategy encouraged families to conform to program instructions and expectations for supporting the mentoring relationship, with the parental role primarily defined as actively and responsibly communicating with program staff, attending agency events, and following program guidelines. The engaging and serving approach was characterized by program staff attempting to develop a relationship with the parent, learn about the family situation, and provide support and referrals to strengthen the family system so that, in turn, the mentoring relationship could be more successful. In agencies following the collaborating approach, program staff intentionally enlisted parents to work constructively with mentors as allies and partners, acknowledging and utilizing parental strengths and insights to promote the development of a successful mentoring relationship. In general, agencies with the collaborating orientation were more mindful of parents' preferences and priorities for the mentoring of their children (Spencer & Basualdo-Delmonico, 2014).

A third study investigated the question of parent involvement in the BBBS mentoring system with qualitative interviews from three perspectives—staff, mentor, and parent (Basualdo-Delmonico & Spencer, 2016). Program staff again shared their perception of the important influence of parents and their potential to support or undermine the mentoring relationship. Staff expressed most concern about parents being responsive in their communication with the agency, and not being either under-involved or over-involved in the mentoring relationship. Because many mentors appeared to have given relatively little consideration to the type of relationship they would have with the parent, the mentors tended to be heavily influenced by agency trainings, which often appear to have made mentors wary with warnings about the prospect of parents being needy or over-stepping program boundaries. In contrast, parents tended to have more clearly defined ideas about how they would facilitate the mentoring relationship, expecting to have an important role and being determined to protect their children from negative experiences and disappointments due to the program. However, a range of strategies for parent engagement was apparent. For example, some parents reported acting as observers, giving the mentoring relationship space to develop and only intervening as needed. Other parents expressed a wish to be more centrally involved, partnering with the mentor and advocating for the youth (Basualdo-Delmonico & Spencer, 2016).

The foregoing studies shed important light on the interactions of parents/guardians with mentors and program staff. However, another perhaps more fundamental question is why parents/guardians choose to engage with mentoring programs in the first place. Because a youth mentee is typically a minor under the care and responsibility of a parent/guardian, there is an ethical imperative for a mentoring program to recognize and respect the motivations and goals that prompted the parent/guardian to seek services. Likewise, programs have an interest in understanding what benefits caregivers might anticipate being derived through youth participation in a mentoring relationship. It

stands to reason that a parent/guardian would be more likely to continue supporting a mentoring relationship that is meeting expectations and offering advantages. Some research does suggest that the likelihood of a positive and effective mentoring relationship is greater when the mentor and parent are better acquainted and share understandings and expectations (Meissen & Lounsbury, 1981). Although one study briefly noted that parent/guardians wish to have mentors who serve as confidants and role models and expose youth to new horizons (Spencer et al., 2011), very little research has investigated the rationale for mentoring from the caregiver's perspective.

The caregiver, as the gatekeeper allowing the mentoring program access to the child, is trusting a non-familial adult who may not share the same cultural identity, language or religious practices with opportunities to influence the child's behavior, perspectives, and beliefs (e.g., Lindwall, 2017). In this regard, formal mentoring programs often attract youth of color and youth from more economically challenged communities and match them with typically White mentors who have access to greater resources and privileges (e.g., Grossman & Tierney, 1998). Such differences in race, culture, and opportunity, as well as education and economic status, may create stresses and concerns for the caregivers who seek mentors for their youth (Deutsch, Lawrence, & Henneberger, 2014; Sánchez & Colón, 2005). Families in communities that have experienced oppression and discrimination may feel a sense of cultural mistrust towards mentors of different racial or ethnic backgrounds (Sanchez, Colón-Torres, Feuer, Roundfield, & Berardi, 2014). In addition, research suggests that a failure to recognize, understand, or address cultural differences associated with race and class can contribute to premature mentoring relationship termination and disappointing program experiences (Spencer, 2007).

Similarly, youth gender and developmental status may be factors in the decision-making of the parent/guardian who enrolls a child in a mentoring program. For example, reasons for wanting a mentor may diverge from childhood to adolescence (Liang, Spencer, Brogan, & Corral, 2008). Likewise, the mentoring of females may address different developmental needs and employ different relational approaches than the mentoring of males (Liang, Bogat, & Duffy, 2014; Spencer & Liang, 2009). Furthermore, a mother seeking a female mentor for a daughter may have a different rationale than a mother seeking a male mentor for a son. In general, mentoring experiences can vary considerably depending upon multiple individual and contextual factors, and attention should be given to the mentoring of specific types of program participants (Darling, Bogat, Cavell, Murphy, & Sanchez, 2006). Accordingly, Spencer and Liang (2009) highlight the importance of better understanding the mentoring relationships of adolescent girls with adult female mentors.

To summarize, extant studies have begun to illuminate the ways that parents may influence the growth or deterioration of a relationship between a mentor and youth mentee, supporting the argument that parents play a critical role in community-based mentoring programs that should not be overlooked or underestimated. Developing a greater understanding of the goals, values, and perspectives of parents with regard to mentoring for their children may help to inform programs how to prepare mentors and parents to have positive and appropriate interactions that contribute to strong mentoring relationships and benefit youth participants. In the current study, the focus is on caregivers of early adolescent females from predominantly low-income minority communities participating in a one-to-one mentoring program. This exploratory study employs qualitative methods for interpretive description to investigate why the caregivers want mentors for their daughters.

2. Method

2.1. Participants

Participants in the study were 20 primary caregivers of an equal

number of early adolescent girls who had been involved in a one-to-one mentoring relationship for approximately one year through a Big Brothers Big Sisters (BBBS) community-based mentoring (CBM) program. In this program, adult volunteers from the community, who are screened for appropriateness and receive initial training, are paired with a child in one-to-one mentoring relationships of at least one year in duration that are supported on an ongoing basis by program staff (for further details on the BBBS CBM program, see DuBois & Friend, 2017). Consistent with this program model, all the caregivers voluntarily approached the mentoring program to request services for their daughters. The BBBS affiliate through which these caregivers obtained services for their daughters was located in a large, urban metropolitan area in the Midwestern region of the United States. The girls, who ranged in age from 10 to 14-years-old (average age = 11.9 years), were participants in one cohort of a pilot study evaluating a group-based, health-focused and gender-specific program called "GirlPOWER!" as a supplement to the standard BBBS CBM model. Briefly, the GirlPOWER! supplement involved a group of 10 mentors and their mentees participating in interactive psychoeducational sessions on a monthly basis and, on a dyadic basis between sessions, completing semi-structured activities that reinforced the content of these sessions (for further details about GirlPOWER!, see DuBois et al., 2008; Pryce, Silverthorn, Sanchez, & DuBois, 2010). After caregivers enrolled their daughters in the standard CBM Big Brothers Big Sisters program, they were approached by the research team and invited to participate in the pilot study. The pilot study used a randomized controlled design in which half of the girls were randomly assigned to participate in the standard BBBS CBM program, whereas the other half were selected to participate in the BBBS CBM program with the addition of the GirlPOWER! supplement. Thus, all mentoring relationships in the current study were in the BBBS CBM program and half also engaged in GirlPOWER!

After one year of mentoring, all 20 caregivers with daughters in the cohort of the pilot study were invited to complete an additional interview for the current study, and all consented to do so (100% response rate). The caregivers in this study sample were all female and identified primarily as African American (80%), with the remainder identifying as Hispanic/Latino (15%) or Asian-American (5%). Almost all had a familial relationship with the youth participants: 13 mothers, 4 aunts, 1 grandmother, and 2 foster mothers. Caregivers described their marital status as follows: 10% married, 10% separated, 15% divorced, 35% never married or lived together, and 30% "other." Approximately 55% of these caregivers reported having full-time employment.

2.2. Procedure

A semi-structured interview was conducted via one-to-one conversation at a place of the caregiver's choosing, most often in the home in a private and quiet room. Each interview lasted approximately 1 h, and the respondent received $20 for participating in the interview. Trained members of the research team conducted the interviews in a relaxed and informal manner. Eighteen of the 20 interviews were conducted in English, and two in Spanish, based on the preference of the caregiver. Interviewers were cognizant of diversity in culture, language, education and socioeconomic status and made efforts to create an interview setting that was warm and inclusive.

Each interview began with questions regarding the child's history in the mentoring program and on the steps taken by the parent to enroll the child in the program. Next, the caregiver's general and more specific hopes and motivations for the mentoring relationship were explored. Interview questions also addressed other topics, including the extent to which the goals of the caregivers were met during the BBBS program, and which aspects of the program influenced the caregiver's overall satisfaction.

The interview team met on a weekly basis during the period of data collection to reflect and debrief on the process and to discuss any challenges or questions that arose when meeting with respondents. All interviews were audio-taped, translated if necessary by a native Spanish speaker, transcribed, and uploaded into NVIVO to assist in organization and analysis. All sample recruitment, data collection, and data management procedures followed IRB approved protocols.

2.3. Analysis

The use of qualitative methods offered the flexibility to look at the data from multiple viewpoints, taking environment, social context, and other factors into account (Malson, 2010). A qualitative approach was considered appropriate for this early exploratory stage of research on the topic, leading to an open-ended inquiry about the goals, values, and perspectives of parents with regard to mentoring for their daughters (Creswell, 2013). The analysis of data was guided by the principles of interpretive description, an approach based on naturalistic inquiry for capturing patterns and themes as well as meanings and understandings with relevance for clinical practice (Thorne, Reimer Kirkham, & O'Flynn-Magee, 2004). The analyses were carried out in a team environment in which members engaged collaboratively to both challenge and validate emergent findings (Boyatzis, 1998; Lyons, 2007).

The process began with three researchers (co-authors) individually reviewing the 20 interview transcripts, using open coding to organize the content into conceptual "bins" that reflected apparent patterns and themes (Padgett, 2008). Following this initial review, the research team convened to discuss impressions of the data. The most prominent themes were grouped into larger categories, which included but were not limited to parent "motivations," "benefits," and "satisfaction." The transcripts were reviewed a second time by each team member, and minor adjustments were made to clarify the themes that constituted these categories.

The primary analyst then developed a draft of a coding guide. Using NVIVO software, the team members reviewed the transcripts a third time, in this case applying the codes from the guide as well as noting areas where the coding guide did not sufficiently address content. Once each researcher had an opportunity to review and code approximately 30% of the transcripts, the team met again to revise the code structure. Each code used was identified by the initials of the researcher so that a cross analysis of the codes could be shared within the team and duplicate codes could be tracked. Throughout this process, ongoing communication took place between all team members via conference calls, emails, and meetings. The final code book was the result of multiple drafts of the coding guide and reflected team consensus on the most accurate language, scope, meaning, and depth of the codes (Vaismoradi, Turunen, & Bondas, 2013).

Once the codebook was finalized, all the transcripts were recoded, first within each individual interview and then across all interviews. Following this recoding, the data on motivation, benefits, and satisfaction were reviewed and analyzed through a process of interpretive pattern recognition to identify characteristics, structures, and themes offering insight into why caregivers want mentors for their daughters (Thorne et al., 2004). Early identification of an initial overarching theme provided an organizing structure for the remainder of the analysis. Subsequent analyses resulted in conceptually clustered categories representing subthemes providing greater specificity and depth of understanding (Padgett, 2008). The description of themes that emerged from the analysis is augmented by specific examples and quotations, and in all cases participants are identified using pseudonyms.

3. Results

3.1. Overview

The interviews conducted with caregivers revealed many hopes and expectations for their daughters' mentoring relationships. Many comments reflected caregivers' motivations for involving their daughters in the BBBS program, while other comments reflected benefits realized

during the course of the mentoring relationship. Comments of both types were integrated into the analysis to infer the reasons why caregivers want their daughters to engage in mentoring. Analysis of the data yielded two overarching themes based on a distinction of whether particular benefits from mentoring seemed to accrue primarily to the daughter or to the caregiver. The motivations centering on the daughters clustered into categories that were conceptualized according to functional roles that the mentor could fulfill. Specifically, caregivers expressed wanting mentors to provide their daughters structure and support as companions, confidants, and/or conduits for new academic, social, and community connections. For motivations pertaining to the caregivers, thematic groupings reflected different forms of parenting support derived from the mentoring experience. In particular, caregivers appreciated forms of respite afforded by the mentoring relationship while they balanced several other life pressures. Caregivers also found it beneficial to have another adult present in the lives of their children who could reinforce the important values they wanted to impart as parents.

3.2. Roles for mentors in daughters' lives

3.2.1. Companion

For many caregivers, a mentoring relationship was a way for the daughter to gain a companion—someone with whom the young person could spend quality time beyond the scope of the caregiver-child dyad. The caregivers expected a strong bond to develop between the youth and mentor that would result in a mutually beneficial, long-term relationship. Some caregivers expressed hopes for a companion who could engage in activities that the daughter would enjoy: "…well, I guess I was hoping she could find a Big Sister [this is the term used to refer to female mentors in the BBBS program] she could have fun with" (Letitia). Other caregivers emphasized the relevance of a positive personal affinity between their daughters and their mentors: "I wanted a mentor she could be comfortable with" (Debra). In one case, the caregiver mentioned the age of the mentor as an important factor, ideally wanting the mentor to be old enough to act as a responsible adult when taking her daughter out in the community but young enough to be a more fitting companion than the caregiver for certain activities.

> I really wanted her to have a Big Sister, you know someone to go out with; go out with a person older than her so she can go to some places 'cause it's hard for me to take her to a lot of places and do a lot of stuff so it's better with [mentor] because she's much younger and they do a lot of stuff, dance and stuff like that (Brianna).

Further, some caregivers wanted a mentor who would provide reassurance and guidance to the daughter in navigating new and unfamiliar experiences.

> It would be somebody to, like, hold her hand and walk her through, like, you're going someplace you've never been, and there's somebody there for you to hold your hand, saying, 'Don't be afraid, I'm with you' (Charlene).

3.2.2. Confidant

Caregivers also expressed a desire to have a mentor serve as a responsible, caring adult in whom their daughters could confide. They wished for the mentor to provide a new social connection, engage in meaningful conversation, and share an alternative perspective: "I wanted her to have someone else outside of me to relate to, and you know, be able to have fun with during different times and just to have someone to talk to" (Brenda).

During the interviews, it was also clear that caregivers hoped a mentor would create a space for the daughter to privately express thoughts or feelings she might not be comfortable sharing with a parent. Caregiver comments highlighted the importance of establishing trust and confidence in the mentoring relationship to facilitate honest

communication. Some comments implied that having this type of confidant might be particularly important when the relationship between caregiver and youth was somewhat distant or strained.

> … just finding someone who would match her, and then someone who she can connect to, someone who she can talk to, 'cause me and her were sort of distant, and she might have needed someone else to talk to (Janelle).

In some cases, the caregiver reported hoping that the mentor could establish a trusting and caring relationship and provide enough personal attention for the youth to overcome feelings of loneliness or isolation: "… my hopes were that she would stop feeling that she was not wanted or that everybody was just looking her over, I mean you know, she just needed someone to talk to" (Lorraine).

3.2.3. Conduit

Caregivers also conveyed the value they placed on having mentors serve as conduits to connect youth to important opportunities and experiences. This more utilitarian perspective focused on providing access to enriching activities, helpful resources, and personalized support that otherwise might not have been available. Sometimes this desire was expressed broadly in terms of expanding the daughter's horizons: "… [the mentoring program] was about exposing [my daughter] to the world" (Maria). In other cases, the desire was framed in terms of tangible assistance that the mentor could offer to promote the child's success. For example, a caregiver who expressed concern about her youth's academic standing commented:

> Well, [mentor]'s really good about helping her with things and talking to her you know like for school work and stuff and if she doesn't do something [mentor] comes in really handy in helping her out with a lot of stuff (Brianna).

Another way in which caregivers discussed hoping that mentors could act as a conduit was to engage the youth in social groups and activities to build a positive, supportive social network. As one caregiver stated, "I just wanted her to get some help, you know, somebody be around people other than the kids you're around in school. Know that there are other different girls out there. You know, a different social life" (Carmen). Some caregivers also acknowledged that their personal access to resources to support their youth and their ability to offer certain opportunities was limited. The mentoring relationship was seen as a means to overcome those obstacles and open up new and brighter possibilities for their daughters. As one respondent poignantly noted, "… I wanted [my daughter] to be able to do things that maybe I was lacking in" (Roxanne).

3.3. Support for caregivers

3.3.1. Respite

Many caregivers mentioned feeling beleaguered by the multiple demands associated with raising children, holding jobs, and maintaining a household. In fact, approximately 80% of the caregivers reported feeling overwhelmed and stressed by pressures related to childcare, jobs, and financial strain. They understandably seemed to welcome a mentor as a source of respite: "I'm so busy with everything that I have, that she [daughter] really doesn't feel I spend enough time with her. And I can't dedicate it, so if someone else can come, and do some of the things that I can't do, it would take pressure off of me" (Doreen).

In several cases, due to their time-consuming responsibilities, caregivers were unable to spend as much time with their daughters as they might have liked. Some caregivers also expressed regret regarding their inability to expose their daughters to new opportunities and experiences or to provide support for schoolwork and other activities:

> I said, 'you know that mom can't take you out that much,' or if we do

go out it could be a limited period of time … so I wanted her to be able to have fun with someone. Because they have so much more to offer her than I could ever do, and keep a house, and take care of family (Malaya).

Sometimes a sense of respite resulted from the consistent presence of another adult who shares concern not just for the daughter but for the entire family system. Likewise, participation in mentoring could mean that the parent also received support from the staff of the mentoring program. One respondent indicated how the program was invested in her own well-being as well as that of the whole family.

… they really seem to be genuinely interested in your well-being, and so [my daughter] involved in a good place and, you know, just the well-being as far as her happiness as far as, you know, your relationship with your kids, and not just so much the kids that they're working with, but the family of that kid, I think they're interested in your whole situation (Yolanda).

3.3.2. Reinforcement

Another benefit caregivers reported deriving from their daughters' mentoring relationships was reinforcement of their own parenting approaches. Many respondents, as single parents, appreciated having other adults take an interest in the healthy development of their daughters. Many caregivers noted how the mentor could echo and support their parenting goals and messages. For example, some observed that their daughters might be more receptive to advice coming from a trusted non-parental adult, even when the lesson was similar to what the caregiver may have tried to convey: "… the communication [helps], 'cause when you have somebody else saying the same thing you're saying, and it may be in a different way, she [daughter] may get some different reasons why" (Roxanne).

Similarly, some caregivers suggested that a mentor could enhance the parent's own influence and legitimacy by showing that someone with an outside perspective was in agreement with the parent.

I think also it helped her to see that some of the opinions I have as a parent are shared by other women, it's not just do it 'cause I say do it or this is the way. I have this opinion, you know particularly when you're dealing with teenagers, it's like the mother is always wrong, the parent is always wrong. Just to have another adult with similar views about something, someone that she saw as an important person in her life. I think a lot of times children, I think a lot of children look up to their parents and they will take their advice, but if they look at somebody, another adult that has a special relationship with them and they share similar views I think that helps (Felicia).

Additionally, some caregivers expressed the hope that mentors would help to address specific values or skills they were trying to impart to their daughters, thus providing additional structure and consistency to the youths' upbringing. For example, one caregiver described how she wanted the mentor to work on the goals she had for her daughter with respect to changing attitudes and values:

Basically I hoped [her mentor would], try to pull [my daughter] out of her shell, you know, my goals too was to change her attitude about her present situation, you know, her attitude towards family, her attitude towards me, you know, her values, because values are very important … I really want to change that (Maria).

Finally, several caregivers who voiced initial concerns regarding their daughters' attitudes, behaviors, or academic progress indicated that the presence of a mentor had made their outlook more optimistic. In other words, the caregiver felt reinforced when the positive effects of mentoring alleviated issues that may have been a cause of concern as a parent. For example, one caregiver observed "… when she got the Big Sister, her grades started getting better, her attitude started getting better, she wouldn't let people irritate her as much, and she didn't get aggravated as much, she sort of like, learned more steps" (Keisha).

4. Discussion

The purpose of this study was to enhance understanding of what is important to caregivers whose daughters participate in a youth mentoring program. The findings indicate that parents/guardians had a variety of motivations for wanting mentors to support their children. The caregivers in this study clearly focused on the advantages and benefits that their daughters could obtain through a mentoring relationship. Yet, importantly, they also noted how the presence of a mentor could offer them support in their parenting role.

A prominent conceptual framework regarding the effects of youth mentoring, proposed by Rhodes (2005), suggests a broad potential for the mentoring relationship to promote the youth's social-emotional, cognitive, and identity development through a variety of mechanisms. In expressing hopes and expectations for their daughters' participation in the BBBS program, caregivers in the current study emphasized the areas in which they wanted mentoring to be helpful. Specifically, the caregivers sought mentors who would support their daughters as companions, confidants, and conduits to new resources and opportunities. In the first instance, companionship is considered a central attribute of mentoring relationships (Spencer, 2006) and is referenced in Rhodes' framework as one way in which mentors can support youth in the social and emotional domain, by providing opportunities for fun and relief from daily stresses (Rhodes, Spencer, Keller, Liang, & Noam, 2006). Companionship, characterized by engaging in enjoyable social activities typically in leisure or recreational settings, is recognized as a distinct form of social support with benefits for well-being (Rook, 1987). The ability to engage in fun social activities and take a break from other worries has been identified by youth participants as an important feature of mentoring relationships and also as distinguishing them from many other types of relationships with adults (Liang et al., 2008; Spencer & Liang, 2009). Serving as a confidant is another way that a mentor can provide support in the social and emotional domain (Rhodes et al., 2006). For example, a qualitative study of adolescent girls with adult mentors highlighted the apparent value of the deeply engaged and authentic emotional support they received, with comments such as "I can tell her anything" and "we talk about everything" suggesting that the mentors were acting as confidants (Spencer & Liang, 2009, p. 116).

When caregivers in the present study expressed their interest in mentors acting as conduits to new opportunities and experiences, their examples were consistent with certain mentoring activities described in Rhodes' framework as having the potential to facilitate youth cognitive development. According to Rhodes et al. (2006), a mentor might contribute to cognitive development by expanding a youth's horizons through exposure to new learning opportunities and by facilitating connections to new people with expertise in areas of interest. Likewise, a mentor might enhance a youth's academic success by promoting positive connections to school, encouraging scholastic effort, assisting with homework or a school project, and supporting the youth's academic interests. Interestingly, the domain of the conceptual model not clearly represented in the caregivers' responses is identity development, which involves role modeling and imaging future possibilities and directions (Rhodes et al., 2006). It might have been an unspoken assumption that the mentor would serve as a role model. Alternatively, this omission might be attributable to the relatively young age of the youth in this study (i.e., 10- to 14-years-old) or to incongruities in cultural backgrounds between mentors and youth.

In general, the perspectives shared by caregivers in this study suggested motivations for involving their daughters in a mentoring program such as BBBS that were immediate, practical, and focused directly on supporting their daughters' well-being. More specifically, their aims for mentoring relationships that provide fun and companionship,

opportunities for confiding conversations, and connections to new experiences for their daughters reflect findings from a study reporting that adolescent girls value the companionship, emotional support, and growth-promoting opportunities received through their mentors (Spencer & Liang, 2009). These desired benefits reflect two types of social capital that can be derived from mentoring relationships (Keller & Blakeslee, 2014). When providing social and emotional support as a companion, and especially as a close confidant, the mentor serves a bonding function that is typical of a strong tie in a social network (Coleman, 1988). When acting as a conduit to opportunities and community resources, the mentor serves a bridging function that is characteristic of a weak tie in a social network (Burt, 1992; Granovetter, 1973). In line with this reasoning, one recent study of mentoring roles, as derived from the reports of older adolescent youth, highlighted functions similar to those that emerged in the present study, including that of supporter (which focused on perceptions of mentor caring and availability) and connector (which was conceptualized as bridging capital) (Hamilton, Hamilton, DuBois, & Sellers, 2016). The extent to which individual youth and their caregivers align in their perceptions of some the most valued aspects of a mentoring relationship could theoretically have implications for the quality and longevity of a youth's program involvement, both of which have been implicated in stronger outcomes (Rhodes & DuBois, 2008).

The caregivers' priorities for their daughters are consistent with mentoring program goals for supporting positive youth development outcomes (Rhodes & DuBois, 2008). However, the exploration of motivations from the parental perspective in the current study also revealed other considerations that may factor into the decision to have a mentor for one's child, most notably the indirect benefits of respite and reinforcement for the parenting role.

Many caregivers commented on their struggles with the overwhelming demands of being single parents and having insufficient time and resources to manage job responsibilities, maintain a household, and care for multiple children. Frequently expressing regret for not being able to devote as much attention to their daughters as they wished, these caregivers reported wanting mentors so that their daughters would not miss out on opportunities and experiences that the caregivers could not provide themselves. Knowing their daughters were enjoying time with a mentor may have provided these parents some brief respite to focus on other children or other obligations. Findings also highlight the reinforcement of parental messages and lessons as another way that mentors can provide indirect support to single parents. Respondents noted that a young person may accept an explanation or opinion from a mentor that was rejected when stated by a parent. For a single parent contending with multiple stresses, it may be particularly reassuring to have another caring and concerned adult who is helping to guide the youth's development.

This caregiver perception that providing a mentor for a youth also can support the parent through respite and reinforcement is consistent with a systemic view of mentoring suggesting the introduction of a mentor might alter various features of the family system (Keller, 2005). Youth mentoring research recently has begun to devote greater attention to issues related to parenting strain, particularly in reference to families contending with child mental health issues (McCormack, 2016). An evaluation of a mentoring program designed for youth with mental health diagnoses found that participation in the program (versus waitlist control) was associated with improved family functioning, including lower parenting stress, greater perceived parent social support, and higher perceived parent-child relationship quality (Jent & Niec, 2006). Furthermore, reductions in parenting stress mediated the apparent beneficial influence of the mentoring on child externalizing problems. A recent meta-analysis of five mentoring programs serving youth with clinical level internalizing or externalizing problem behaviors provided additional evidence, finding that the parents of youth who received mentoring reported lower levels of parenting stress (La Valle, 2015).

Reductions in parental stress also might result from any positive changes in youth attitudes and behaviors achieved through the support of a mentor. Related to this possibility, in the current study caregivers generally expressed satisfaction with the experiences of their daughters in the BBBS program. Some caregivers observed notable improvements in their daughters' behavior, social skills, and academic performance that they attributed to the influence of mentoring. In addition, participation in the mentoring program seemed to give caregivers greater optimism regarding the future outlook for their daughters.

4.1. Limitations

Several features of the study should be taken into account when considering the findings. First, the interviews were retrospective in nature, occurring after the caregivers had observed a year of mentoring. Thus, the data reflect not only initial motivations for enrolling their daughters in mentoring but also experiences that motivated them to continue in the program. The responses, as such, should be understood as inevitably reflecting to some extent both desired and perceived benefits of mentoring from the caregiver perspective. To more definitively identify anticipated or desired benefits, a prospective study of caregiver motivations at the time of enrollment should be a priority in future research. The current research focused only on mentoring relationships involving early adolescent females. The reasons a single caregiver, typically a mother, might seek a male mentor for her son are possibly very different. Similarly, the reasons for obtaining a mentor may vary for children of different ages, racial backgrounds, and income levels. Practical constraints restricted the scope of questions that could be posed for eliciting information about the topic, such that some potentially important areas were not able to be fully explored. Another caution concerns the role of language and culture in obtaining and analysing the data. An analysis team with diverse perspectives highlighted instances when interviewers may not have noted cultural nuances that could have been explored during the course of the conversation as well as instances when the interpretation of the transcripts differed based on the backgrounds and experiences of the analysts. Further investigating the motivations for caregivers seeking mentors outside of their cultural communities and the various ways that this dynamic may influence the success of the mentoring relationship would add to the body of research in the area of mentoring, social justice, and parent engagement.

4.2. Implications for practice

With increasing recognition of the caregiver's role in supporting youth mentoring relationships (Keller, 2005; Spencer et al., 2011; Taylor & Porcellini, 2014), standards for service delivery now recommend that mentoring programs account for parent/guardian engagement in practices for recruiting, screening, training, matching, and supporting participants (Garringer, Kupersmidt, Rhodes, Stelter, & Tai, 2015). Findings from the current study illustrate how knowledge of caregivers' aims for mentoring could have implications for program development and delivery. For example, because it is important for parents and prospective mentees to be well-informed and to have reasonable expectations, programs are advised to have recruitment messages that "realistically portray the benefits, practices, supports, and challenges of being mentored in the program" (Garringer et al., 2015, p. 11). Understanding caregivers' priorities and expectations, particularly when expressed in their own words as in the present research, offers a foundation for programs to draw upon in developing recruitment materials that are responsive to parent goals and highlight points of alignment (or lack thereof) with the goals of the program. With respect to the practice of screening a caregiver wishing to enroll a child in a mentoring program, the present findings indicating a caregiver may have a range of aims for a child's mentoring relationship suggests the value of assessing the caregiver's perceived needs of the child for,

among other things, a companion, confidant, and/or conduit to resources. Greater understanding of the goals of the parent/guardian for the mentoring relationship could be helpful in program efforts to match the child to an appropriate mentor (Pryce, Kelly, & Guidone, 2014). In line with this possibility, it is recommended practice in the matching process to consider the expressed preferences of not only the mentor and mentee, but also those of the parent or guardian (Garringer et al., 2015). To do so effectively, the present findings suggest the value of going beyond surface-level factors (e.g., preferred age of the mentor) to include more relationally-oriented considerations regarding the functional roles that the caregiver hopes the mentor will play in the child's life.

The finding that caregivers in the current study valued support from mentors in the form of respite and reinforcement of their parenting responsibilities also has potentially important implications for program practice. The benefits of respite and reinforcement that caregivers appeared to appreciate may often occur as a natural outgrowth of the mentoring relationship. Yet, in other instances, it may be important to incorporate content addressing these topics into the training or ongoing support that mentors receive from program staff. Although mentor training rarely addresses the nature of the relationship between the mentor and the parent/guardian (Kupersmidt & Rhodes, 2014), the current findings suggest that, with respect to reinforcement of parenting messages, it could be helpful for mentors to be given guidance in how they and parents can discuss their respective values and approaches with the aims of avoiding mixed signals and conflict while maximizing benefits for the youth.

Ethical approval

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Informed consent

Informed consent was obtained from all individual participants included in the study.

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Declaration of interest

Dr. Keller is a member of the Research Advisory Council of Big Brothers Big Sisters of America (BBBSA) and has been a paid consultant of BBBSA. Dr. DuBois is chair of the BBBSA Research Advisory Council and has been a paid consultant of BBBSA.

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