



# Striking the Balance: The Relative Benefits of Goal- and Youth-Focused Approaches to Youth Mentoring Relationships

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## Abstract

Targeted, goal-focused approaches to mentoring can improve behavioral and mental health outcomes than more recreational, non-specific approaches. However, a focus on goals needs to be balanced with openness to including mentees' preferences. This study builds on prior work by exploring the benefits of goal- and youth-focused approaches to mentoring relationships from the youth mentee's perspective, including their associations with relationship measures (closeness and tension) and mental health outcomes (i.e., conduct problems, emotional symptoms, and depressive symptoms). This study was a secondary analysis of data from 2165 youth participating in thirty nationally representative mentoring programs in the United States. On average, youth were 12.3-years-old ( $SD = 1.43$ , range = 9–16) and the majority were female (55%); 36.7% were Black/African American, 22.4% were White, and 23.5% were Latino/Hispanic. Path analyses revealed 1) youth- and goal-focused approaches were positively associated with closeness, 2) youth-focused approaches were negatively associated with tension, 3) goal-focused approaches were positively associated with tension. At follow-up, a stronger mentoring relationship (less tension and greater closeness) was related to positive youth outcomes. As the field of mentoring corrects for an overemphasis on intuitive approaches and moves towards more targeted directions, it should resist veering too far from what sets the field apart from skills-training models: the role of a caring relationship.

**Keywords** Youth mentoring · Formal mentoring · Program evaluations · Skills-based · Relational

## Introduction

There is emerging evidence that more targeted, goal-focused approaches to mentoring can yield larger effects on a range of academic, behavioral, and mental health outcomes than purely recreational, non-specific approaches that are driven by mentees' preferences (e.g., Christensen et al., 2020). A focus on goals, however, needs to be balanced with mentors' openness to mentees' voice and preferences (i.e., youth-focused approach) and minimizes relational tensions. Despite increased attention to the need

for balance in mentoring relationships, few studies have explored their contributions to relationship quality. The current study explores the benefits of goal- and youth-focused approaches to youth mentoring relationships, including their associations with relationship closeness, tension, and mental health outcomes. This study builds on previous research by focusing on youth mentees' perspective of activities within the mentoring relationship and relationship quality, as past work has examined this question from the perspective of program's descriptions (Christensen et al., 2020) and mentors' perspectives (Lyons et al., 2019).

Mentoring researchers and theorists have long argued that non-specific, relationship-focused approaches are the most effective way to connect with mentees (Li & Julian, 2012). From this perspective, a strong and caring relationship is the "active ingredient" that promotes positive change and wellbeing. Since relationships are thought to have their impact primarily through nonspecific relationship processes, a focus on structured goals has been considered unnecessary or even counterproductive (Li & Julian, 2012) as it can lead to conflict which, in turn, can affect relationship quality and

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outcomes (Cavell et al., 2020). Instead, mentors have traditionally been encouraged to take their cues from mentees when making decisions about activities. This ensures that mentees are receptive to help and that the relationships are more enjoyable and engaging (Gowdy & Spencer, 2021). The majority of large-scale program evaluations in the field of youth mentoring have been conducted with one-to-one, Big Brothers Big Sisters programs (e.g., Grossman & Tierney, 1998), and to a much lesser extent, Friends of the Children (Eddy et al., 2017), Communities in Schools Programs (Karcher, 2008), and a mix of mentoring programs (Jarjoura et al., 2018). Many of these evaluations have deployed mixed methods, including qualitative studies of relationship approach and quality. Drawing from these data, researchers have noted that relationships that are non-specific and primarily youth-centered (sometimes also referred to as *developmental*) in their orientation, as opposed to being driven primarily by the goals, interests, or expectations of the mentor (sometimes also referred to as *prescriptive*), have been found to predict greater relationship quality and duration (Herrera et al., 2000) as well as predict improvements in how youth experience their relationships with other adults (Karcher et al., 2006).

Others have highlighted the need for a more balanced approach. For example, the Search Institute has laid a developmental relationship framework that includes a balance between listening/caring and challenging youth to set goals while holding them accountable (Search Institute, 2020). Likewise, distinctions have been drawn between relationships that are unilaterally youth- or adult-focused versus those that are more collaborative in nature (Karcher & Nakkula, 2010). These frameworks have helped to advance the field toward greater balance. A purely youth-centered approach in the absence of goals may privilege leisure over potentially more productive pursuits (Larose et al., 2010). Indeed, in a recent, large-scale national survey of mostly one-on-youth mentoring programs found that the most-commonly reported mentor activity was “making time to have fun,” followed by informal talking, engaging in athletic, cultural, and creative activities (Jarjoura et al., 2018). Although a focus on fun may result in smoother, less conflictual relationships, this approach may not adequately address the substantial emotional, behavioral, or academic difficulties that mentees face (Larose et al., 2010). The most effective approach to mentoring may instead involve focusing on goals that are collaboratively determined by both the mentee and mentor. From this perspective, a strong relationship is seen as a context for goal-directed activities, not an end unto itself (Cavell & Elledge, 2013). In fact, researchers have argued that bonds can emerge as the by-product of shared involvement in goal-focused activities. Researchers have shown that mentors who engage with youth in challenging activities are more likely to be

successful than those whose primary goal is to simply get to know the adolescent (Christensen et al., 2020). In the absence of clear, manageable goals, mentors may feel overwhelmed (Spencer, 2007). Youth behavioral, socio-emotional, and academic outcomes in formal mentoring programs have been found to be most favorable when they emphasize both structure and support (Lyons et al., 2019).

A flexible, calibrated approach to relationships and goals has been associated with positive effects in academic (Johnson, 1997), psychological (Jent & Niec, 2006), and social (King et al., 2002) outcomes. Targets of more goal-focused mentoring programs include increasing social standing (Cavell & Henrie, 2010), improving relationships (Karcher et al., 2010), increasing self-esteem (King et al., 2002), and improving STEM-related confidence in career planning (Sowers et al., 2016). A comprehensive meta-analysis showed that programs that used targeted approaches had overall effect sizes that were more than double the effect size of programs that were non-specific (Christensen et al., 2020). Analyses of 48 mentoring studies of positive youth outcomes (average youth age of 12.25 years old), such as academic, social, and psychological, revealed the overall effect size of targeted programs to be more than double that of non-specific relational approaches. Likewise, in a study of 1360 school-based mentor-mentee pairs with a particular focus on academic and behavioral outcomes, results revealed that a youth-centered, relational approach and goal-setting interacted to predict youth outcomes (Lyons et al., 2019). These results suggest that there is a “sweet-spot” for getting the strongest outcomes: balancing developing a strong, youth-centered relationship with targeted goals for the youth. Findings from this study also found that, although poor relationship quality is related to negative youth outcomes, extremely strong relationships may not be sufficient to promote change in academic and behavioral outcomes, suggesting that after a certain point, closeness does not confer additional benefits for youth (Lyons et al., 2019).

Incorporating youth voice involves attunement (Pryce, 2012), infusing fun and play (Karcher, 2022), and a willingness to suspend or even abandon planned lessons and activities when pushing for adherence contributes to an erosion of relationship building and trust. Mentors who can adjust to the specific circumstances of youth mentees when building relationships (e.g., paying attention to the youth’s needs and interests) are most successful. In a qualitative study of successful matches, researchers found that, when mentors were faced with challenges in building the relationship, those mentors who flexibly adapted to the youth’s needs were able to repair the relationship and go on to have a stronger match compared to those mentors who were unwilling or unable to adapt to the youth’s needs (Drew & Spencer, 2021). In the absence of a youth-driven approach,

an overly top-down approach may lead to conflict and other negative emotional experiences (e.g., disappointment) which may have an adverse impact on youth, as well as the sustainability of the relationship (Rhodes, 2005). Indeed, even the strongest proponents of more targeted approaches (e.g., Cavell & Elledge, 2013) argue that mentoring is a relational intervention, and that overly prescriptive approaches could threaten relationship quality and mentees' persistence in the intervention. In a series of interviews with over 200 adolescents, themes revealed that youth were far less satisfied when relationships were characterized by adult-governed goals, no adjustment of expectations on the part of the adult, and a lack of consistent support from the adult (Morrow & Styles, 2005). More recent evidence also suggests that balancing fun, listening, and both casual and future discussions between mentors and mentees (compared to mentor-mentee relationships that only focus on homework and tutoring) is associated with more positive relationship outcomes (Kanchewa et al., 2021).

Taken together, the research suggests that mentors who can strike this balance between youth- and goal-focused approaches will likely improve relationship satisfaction, reduce tension and strain, and ensure relationship-based change. Although it has provided valuable insight, most research to date on goal- versus youth-focused approaches has involved qualitative approaches with relatively small samples of mentees within single programs. This has made it difficult to assess the contribution of different approaches to specific outcomes, to consider the tradeoffs in terms of closeness and conflict, and to generalize such findings to the broader field. Prior research has focused on examining the benefits of targeted versus specific programs, but such categorizations have been based on the explicitly-stated goals of the program (e.g., Christensen et al., 2020), as opposed to mentees' perceptions. In another recent study of relationship balance, the focus was on mentors' perceptions and on academic and behavioral outcomes (Lyons et al., 2019). Less is known about how the mentees themselves perceive their mentors' approaches and how perceptions of relationship quality and conflict may affect their mental health. This is an important gap, particularly given past associations between relationship quality and adolescents' and long term wellbeing (e.g., Allen et al., 2015) and the high prevalence of mental health challenges in youth referred to mentoring programs (Jarjoura et al., 2018). Indeed, rates of internalizing and externalizing symptoms among youth participating in mentoring programs have been found to be sharply elevated compared to national averages (Jarjoura et al., 2018). In the current study, parent-reported conduct problems, depressive symptoms, and emotional symptoms were included as youth mental health outcomes in the current study given these were the individual mental health outcomes assessed in the larger study,

and because past research has demonstrated that parents and guardians often refer their children to mentoring programs for supporting their child's mental health (Vázquez & Villodas, 2019). Although measures of delinquency, involvement with law enforcement, prosocial behavior, substance use, and others were assessed, those were not clearly measures of mental health.

## Current Study

Prior work has shown that a balance between goal-focused and youth-centered approaches to youth mentoring is important to positive youth outcomes, however research has focused on examining this balance based on the explicitly stated goals of the program and from the perspective of mentors. However, it is important to know whether using measures of the mentee's perspective of activities in the relationship replicates past work using measures based on other informants. A model accounting for both youth- and goal-focused approaches was hypothesized to best fit the data when compared to models only including a youth-centered approach or goal-focused approach. Stronger youth-focused approaches were predicted to be associated with a closer relationship between mentor and mentee and less relational tension. Stronger goal-focused approaches were predicted to also be associated with a closer relationship, but more relational tension. Closer relationships were hypothesized to be associated with better youth mental health outcomes over time. Analyses examining relational tension and mental health symptoms were exploratory. There were no a priori hypotheses on possible differences in effects on the specific mental health outcomes.

## Method

### Participants and Procedures

The current study was a secondary analysis of data from a large-scale evaluation of enhancements to multiple mentoring programs in the United States (Jarjoura et al., 2018). Thirty mentoring programs examined the impact of advocacy and teaching in mentoring outcomes with funding from the Office of Juvenile Justice and Delinquency Prevention. The programs participating in this study included both community- and school-based programs. Most of the programs conducted one-on-one mentoring but some offered mentoring in a group-based format. Mentoring was the primary service activity in most of the programs, and most were affiliated with a national organization, most notably Big Brothers Big Sisters of America, 4-H, and the Police Activities League. Mentor-mentee matches from

these programs were randomized into either the enhancement group or the business-as-usual group. Mentors in both groups received the program's standard training and support, and mentors in the enhancement group received additional training and support in taking on teaching and advocacy roles with their mentees. Data were collected between 2013 and 2017 from mentors, mentees, and the mentees' parents at program enrollment (i.e., baseline), and 12 months after the youth began meeting with a mentor. No statistically significant differences in mentoring outcomes were found between the two study groups in intent-to-treat analyses at the 12-month time point (Jarjoura et al., 2018). The study was approved by the appropriate ethical review boards.

A total of 2165 mentees participated in the study. Over half were female (55.1%) and the average age was 12.3 years ( $SD = 1.43$ , range = 9–16). Approximately a third of the mentees identified as Black/African American (36.7%), and less than a quarter identified as White (22.4%) or Latino/Hispanic (23.5%). Other mentees identified as American Indian or Alaska Native (3.5%), Asian (0.8%), or biracial/other race/ethnicity (13.1%). Mentors who participated in the study had an average age of 31.5 ( $SD = 12.20$ ) and over half of them identified as female (57.1%). A majority of the mentors identified as White (64.0%), 20% identified as Black, 4% identified as Asian, 3% identified as American Indian/Alaska Native, 3% identified as Other, and the others did not report their racial identities.

## Measures

### Predictors

**Goal-focused approach** This was measured using a six-item scale (Dubois & Keller, 2017). Youth rated six items on a 4-point Likert scale, ranging from 1 (*Not at All True*) to 4 (*Very True*), about how they feel their mentor helps them set goals and grow. Sample items include, "My mentor and I spend time working on how I can improve as a person," and "My mentor helps me to set and reach goals." Scores were summed to obtain a composite score. Cronbach's alpha for the scale is 0.89 at follow-up.

**Youth-centered approach** This was measured using the six-item Youth-Centered Relationship scale (Public/Private Ventures, 2002). Youth responded on a 4-point Likert scale, ranging from 1 (*Not at All True*) to 4 (*Very True*), about the extent to which they felt their input was considered in deciding what to do during their mentoring outings. Sample items include, "My mentor almost always asks me what I want to do," and "My mentor is always interested in what I want to do." Scores were summed to obtain a composite score. Cronbach's alpha for the scale is 0.90 at follow-up.

**Perceived mentoring closeness** This was measured with a single item. Youth responded on a 4-point Likert scale, ranging from 1 (*Not Close at All*) to 4 (*Very Close*) to the item, "How close do you feel to your mentor?"

**Perceived relational tension** This was measured with three youth-rated constructs: criticism, conflict, and pressure. Criticism was measured using a three-item measure on the extent the youth feels their mentor criticizes them (Furman & Buhrmester, 2009); Conflict was measured using a three-item measure on the extent the youth experience conflict with their mentors (Furman & Buhrmester, 2009); Pressure was measured using a three-item measure on the extent youth feels pushed or pressured by the mentors (Jarjoura et al., 2018) Youth responded to all items on a 4-point Likert scale, ranging from 1 (*Not at All True*) to 4 (*Very True*). All nine items were summed to create a 'relational tension' construct. The Cronbach's alpha is 0.79 at follow-up.

### Youth outcome indicators

**Conduct problems** This mental health challenge was measured using the five-item Conduct Problems subscale from the Strengths and Difficulties Questionnaire (Goodman, 1997). Parents rated items on a 3-point Likert scale, ranging from 0 (*Not true at all*) to 2 (*Certainly true*). Items assessed whether youth exhibited problem behaviors within the past six months, and sample items include "Often loses temper" and "Steals from home, school, or elsewhere." Scores were summed to obtain a composite score. Cronbach's alpha for the scale is 0.71 at baseline, and 0.72 at follow-up.

**Depressive symptoms** These were measured using the 13-item Mood and Feelings Questionnaire (Angold et al., 1995). Youth rated items on a 3-point Likert scale, ranging from 0 (*Not true at all*) to 2 (*True most of the time*). Items reflect the presence of symptoms of depression in the past two weeks, and sample items include, "I didn't enjoy anything at all" and "I felt I was no good anymore." Scores were summed to obtain a composite score. Cronbach's alpha for the scale is 0.91 at baseline, and 0.92 at follow-up.

**Emotional symptoms** These were measured using the five-item Emotional Symptoms subscale from the Strengths and Difficulties Questionnaire (Goodman, 1997). Parents rated items on a 3-point Likert scale, ranging from 0 (*Not true at all*) to 2 (*Certainly true*). Items assessed whether youth exhibited signs of emotional distress in the past six months. Sample items include, "Often unhappy, depressed or tearful" and "Nervous in new situations, easily loses confidence." Scores were summed to obtain a composite score. Cronbach's alpha for the scale is 0.73 at baseline, and 0.75 at follow-up.

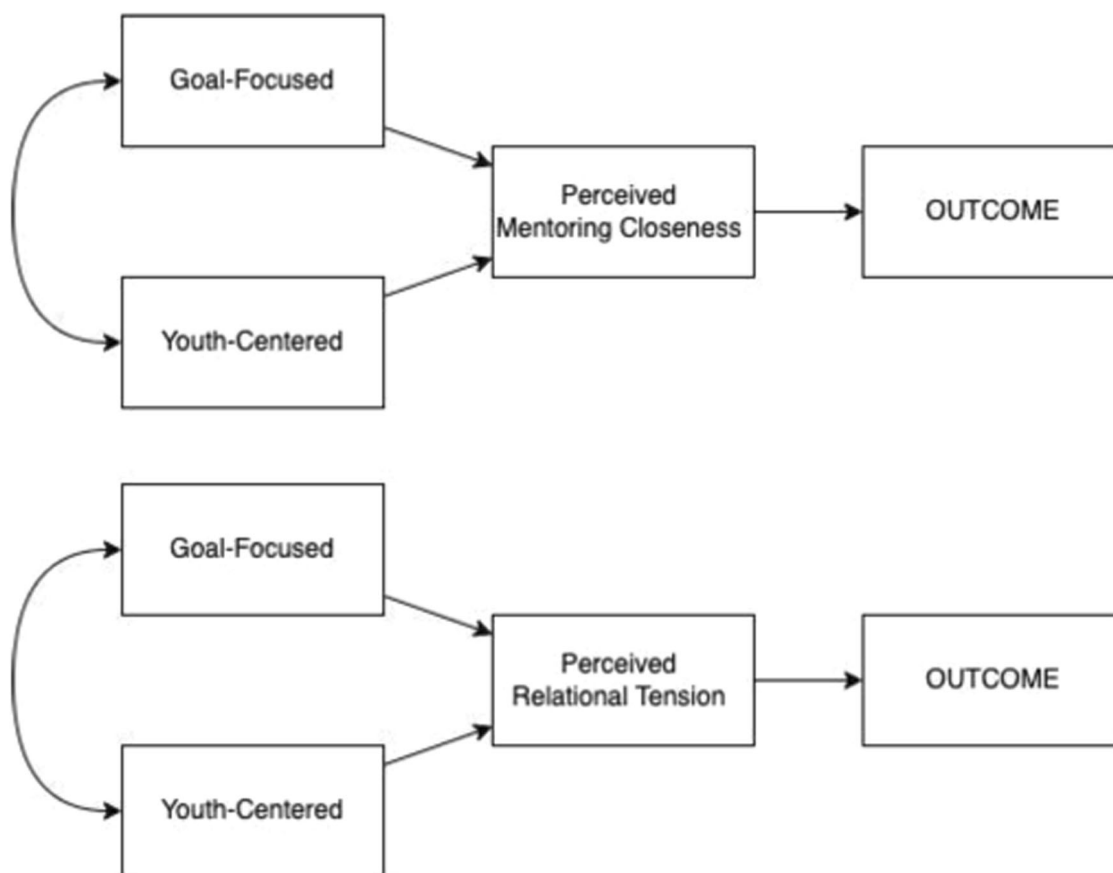


Fig. 1 Hypothesized models

### Covariates

**Sociodemographic variables** These were collected through the parent baseline survey. Age of participant was calculated using the participant's date of birth and the date of baseline data collection. Biological sex was assessed with a dichotomous variable (1 = male, 0 = female). Participants were asked to identify their race by either 'marking' or 'not marking' one or more boxes for Latino or Hispanic, Caucasian or White, African American or Black, Native American or Alaska Native, Asian, Pacific Islander, or Other.

**Treatment condition** Data recorded whether the youth was enrolled in the enhancement or controlled condition in the larger project (1 = enhancement condition; 0 = controlled condition).

### Statistical Procedures

Path analyses with maximum likelihood estimation (ML) were conducted to examine the hypothesized models using *lavaan* package (Rosseel, 2012) in *R*. The hypothesized models are presented in Fig. 1. Each of the three models – a *full* model that included both goal focused and youth centered

indicators, a *goal-focus-only* model, and a *youth-centered only* model—were tested to examine their associations with mentoring closeness and relational tension respectively. The analyses were repeated for each identified outcome (conduct problems, emotional symptoms, depressive symptoms). Model fit was evaluated with root-mean-square error of approximation (RMSEA), comparative fit index (CFI), Tucker-Lewis index (TLI) and standardized root-mean-square residual (SRMR). A good model fit was established when RMSEA was close to 0.06 or below, CFI was close to 0.95 or greater, TLI was close to 0.90 or greater and SRMR was close to 0.08 or below (Hu & Bentler, 1999). Subsequently, the best-fit model was identified through chi-square difference tests in assessing the comparative fit of nested fit (Satorra & Bentler, 2001). All models controlled for youth age, gender (female vs. not), race (White vs. not) and ethnicity (Hispanic vs. not) and baseline for the corresponding outcome indicator.

### Results

Descriptive statistics and correlation matrices of key variables are presented in Table 1. Results comparing the full, the goal-focused only, and the youth-centered only models

**Table 1** Descriptive statistics and correlation matrix of key variables in path model

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.
1. Youth Age	Mean (SD)										
2. Youth Gender (Female = 1)	12.41 (1.44)	0.00									
3. Growth Focus	52.52%	0.00									
4. Youth-Centeredness	3.14 (0.76)	-0.10***	0.00								
5. Perceived Mentoring Closeness	3.37 (0.66)	-0.09***	-0.01	0.78***							
6. Relational Tension	3.36 (0.81)	-0.10***	-0.01	0.62***	0.65***						
7. Depressive Symptoms (BL)	1.20 (0.37)	-0.01	-0.04	-0.11***	-0.15***	0.10***					
8. Depressive Symptoms (FU)	0.39 (0.43)	0.11***	0.11***	-0.07**	-0.10***	0.15***	0.41***				
9. Emotional Symptoms (BL)	0.29 (0.39)	0.07**	0.11***	-0.10***	-0.13***	0.02	0.29***	0.17***			
10. Emotional Symptoms (FU)	3.02 (2.40)	0.03	0.06**	-0.06*	-0.04	0.05	0.25***	0.35***	0.50***		
11. Conduct Problems (BL)	2.31 (2.26)	0.00	0.11***	-0.04	-0.05	0.13***	0.20***	0.12***	0.38***	0.18***	
12. Conduct Problems (FU)	2.23 (2.10)	0.04	-0.11***	-0.05	-0.06*	0.15***	0.16***	0.28***	0.26***	0.43***	0.51***

SD Standard deviation, BL baseline, FU follow-up

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$

are presented in Table 2. The full model best fit the data for mentoring closeness and all three tested outcomes: conduct problems, emotional symptoms, and depressive symptoms. Estimates for all models are available in the online supplement. Treatment condition (i.e. enhancement vs. control) was not significantly associated with outcomes in all of the models. For all models, both a goal-focused and a youth-centered orientation were positively associated with stronger perceived mentoring closeness, which in turn was negatively associated with all three outcomes.

Likewise, the full model best fit the data for relational tension and all three tested outcomes: conduct problems, emotional symptoms, and depressive symptoms. Estimates are available in the online supplement. All models indicated that a youth-centered orientation was negatively associated with relational tension while a goal focused orientation was positively associated with relational tension.

A closer examination of path estimates revealed that the associations between goal-focused orientation and youth-centered orientation with relational closeness were similar. Likewise, the associations between goal-focused orientation and youth-centered orientation with relational tension were similar. As such, post-hoc analysis including all indicators in one model was conducted to examine the overall effects. The resulting model was found to be a good fit with the data (CFI = 0.97, TLI = 0.95; RMSEA = 0.035, SRMR = 0.04). Model estimates are presented in Fig. 2. Results in the combined model revealed similar patterns to the separate models. In the final model, 3–47% of the variances are explained in the endogenous variables (Relational Tension  $R^2 = 0.03$ ; Mentoring Closeness  $R^2 = 0.47$ ; Conduct Problems  $R^2 = 0.26$ ; Depressive Symptoms  $R^2 = 0.18$ ; Emotional Symptoms  $R^2 = 0.25$ ).

The final model suggests that the presence of goal-focused and youth-centered approaches (from the perception of youth) relate positively to perceived closeness to the mentor, which in turn relates to fewer reported emotional and depressive symptoms. Likewise, although a youth-centered approach was related to lower perceived tension in the relationship, a goal-focused approach was associated with greater tension. In turn, greater tension was associated with greater conduct problems and depressive symptoms.

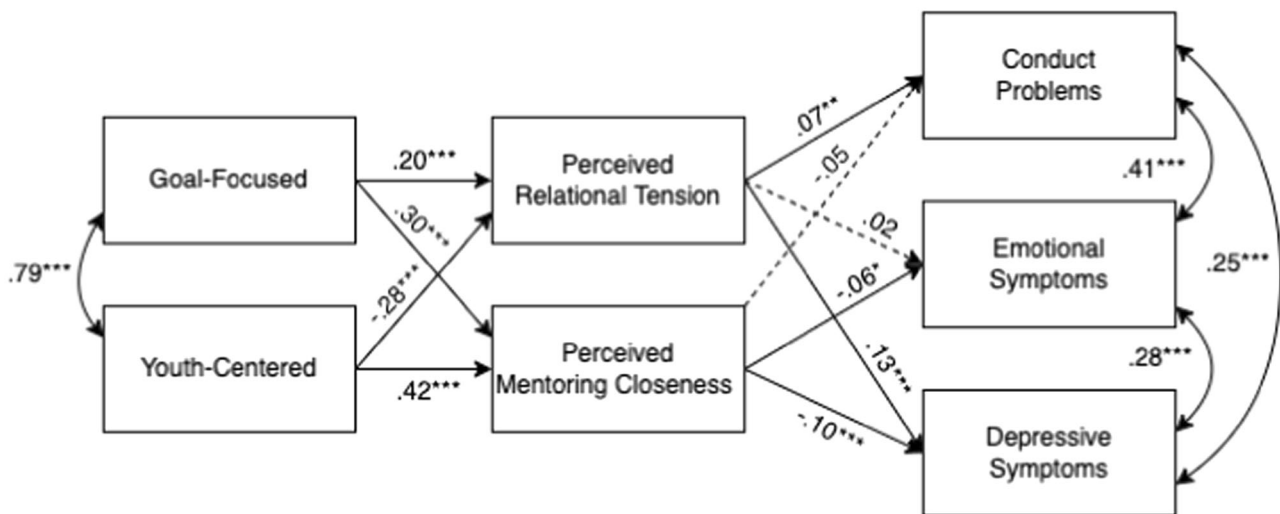
## Discussion

Prior work suggests that a balance of goal-directed activities and a supportive, caring relationship is critical for fostering positive outcomes for youth participating in mentoring programs (Cavell & Elledge, 2013). This balance of approaches to mentoring has been examined from the perspective of mentors (Lyons et al., 2019) and from the explicitly stated goals of the programs (Christensen et al.,

**Table 2** Fit statistics for tested models

	CFI	TLI	RMSEA	SRMR	AIC	BIC	df	$\chi^2$	$\Delta \chi^2 p$
<b>Conduct Problems</b>									
<b>Mentoring Closeness</b>									
Full (GF & CT) model	0.99	0.98	0.031	0.03	11354.59	11453.99	20	56.12	
GF only model	0.93	0.90	0.066	0.04	11484.62	11578.50	21	188.15	<0.001
YC only model	0.95	0.93	0.053	0.03	11427.09	11520.97	21	130.62	<0.001
<b>Relationship Tension</b>									
Full (GF & CT) model	0.97	0.95	0.037	0.03	10020.83	10120.24	20	71.18	
GF only model	0.95	0.93	0.047	0.04	10053.81	10147.69	21	106.15	<0.001
YC only model	0.96	0.94	0.042	0.03	10036.54	10130.42	21	88.88	<0.001
<b>Emotional Symptoms</b>									
<b>Mentoring Closeness</b>									
Full (GF & CT) model	0.99	0.99	0.022	0.03	11828.32	11927.76	20	37.54	
GF only model	0.94	0.91	0.062	0.03	11957.71	12051.62	21	168.93	<0.001
YC only model	0.96	0.94	0.049	0.03	11901.27	11995.18	21	112.49	<0.001
<b>Relationship Tension</b>									
Full (GF & CT) model	0.99	0.98	0.024	0.03	10502.33	10601.76	20	41.05	
GF only model	0.97	0.95	0.038	0.03	10535.35	10629.25	21	76.07	<0.001
YC only model	0.98	0.97	0.031	0.03	10518.07	10611.98	21	58.79	<0.001
<b>Depressive Symptoms</b>									
<b>Mentoring Closeness</b>									
Full (GF & CT) model	0.99	0.98	0.027	0.03	7473.01	7572.97	20	48.03	
GF only model	0.93	0.90	0.063	0.04	7605.07	7699.48	21	182.09	<0.001
YC only model	0.95	0.93	0.051	0.04	7549.07	7643.48	21	126.09	<0.001
<b>Relationship Tension</b>									
Full (GF & CT) model	0.97	0.95	0.036	0.04	6136.90	6236.86	20	69.80	
GF only model	0.95	0.93	0.046	0.04	6170.13	6264.53	21	105.03	<0.001
YC only model	0.96	0.94	0.041	0.04	6153.03	6247.44	21	87.93	<0.001

GF growth focus, YC youth-centeredness, CFI comparative fit index, TLI Tucker-Lewis index, RMSEA root-mean-square error of approximation, SRMR standardized root-mean-square residual, AIC Akaike information criterion, BIC Bayesian information criterion, df degrees of freedom



**Fig. 2** Standardized path coefficients of post-hoc analyses of full model

2020), however the youth mentee's perspective was missing. This study addressed this gap by examining youth perspectives on their mentors' approaches, youth's experiences of closeness and conflict, and specific mental health outcomes. Together, the results indicate that focusing on both goals and the youth's preferences leads to youth perceiving a closer relationship with their mentor. However, focusing on goals also relates to tension in the relationship, which relates to poorer outcomes (conduct and depressive symptoms).

The large, nationally representative sample permitted model comparisons and greater generalizability than previous studies. As predicted, mentee perceptions of both youth-focused approaches (e.g., mentor listens to youth's preferences in activities) and goal-focused approaches (e.g., mentor helps the youth set and reach goals) contributed significantly to the path model. In line with hypotheses, higher youth-centered approaches were associated with a stronger relationship and less relational tension, and higher goal-focused approaches were associated with a stronger relationship and higher relational tension. Further, more relational tension was associated with greater reported conduct problems and depressive symptoms in mentees at follow up, and higher perceived mentoring closeness was associated with lower depressive and emotional symptoms in mentees at follow up. The findings highlight the importance of incorporating both goal-focused and youth-oriented behaviors in formal mentoring relationships serving adolescents. This is consistent with recent findings where a balance of relational talk, leisure-activities (i.e. games, creative), and goal-focused activities (i.e. academic, social issues) were associated with better youth outcomes (Kanchewa et al., 2021). Notably, this dual approach is also consistent with the proposition that targeted-approach mentoring should remain as a relational intervention, and that mentors should be aware of mentor-mentee alliance and relational quality while working on skills and goals with their mentees (Cavell & Elledge, 2013).

In the current model, goal- and youth-focused approaches of mentors (rated by mentees) were strongly correlated with each other, suggesting that mentors who listened and engaged with the preferences of their mentees also encouraged them to set and achieve goals. And, although the orientations were strongly correlated, a model that included both was the best fitting with the data, suggesting that goal- and youth-focused approaches in mentoring uniquely contribute to relational tension and perceived closeness.

This study also shows that stronger goal focus in mentoring relationships corresponded with a closer relationship with the mentor, however also related to more tension in the relationship. This is unsurprising, as working with their mentors towards goals can be challenging for youth (e.g.,

working on building academic skills). It is also important to consider that working towards goals with a mentor may violate expectations of the youth, who may go into the relationship thinking that it is a friendship with an adult with no expectations. As mentioned previously, the most common activities in youth mentoring relationships are leisure activities (Jarjoura et al., 2018). If youth have the expectation that they are going to have fun and not focus on challenging goals, then these violated expectations may have a negative impact on the mentoring relationship.

Although what happens within the mentoring relationship is ultimately between the mentor and mentee, mentoring programs serving adolescents should provide support for mentor-mentee dyads to mutually set goals that are beneficial for the youth and within the mentors' capacities. Working together toward a youth's goal provides structure to the relationship, and when going well, likely allows mentors and youth to feel a sense of accomplishment together. However, when youth perceive that their preferences are not being considered and there is a top-down approach, the youth may feel pushed into activities that do not align with their priorities or values. This may lead to disappointment, which may harm both the youth and the relationship (Grossman & Rhodes, 2002). The current results highlight the importance of youth participation in setting clear goals in the relationship and the need to further explore the processes that contribute to relational tension. Moreover, programs should be clear in their communications (e.g., marking materials for families or potential new mentors) on the purpose of the mentoring program. If both youth and mentors come into the relationship with similar expectations for whether goals will be set and worked on together, it may reduce the likelihood of tension in mentoring relationships and lead to positive effects on youth mental health.

Although youth mentoring programs do not necessarily set out to treat mental illness among youth, there is evidence to suggest that mentoring can have a positive impact on psychological wellbeing. For example, trusting mentoring relationships are associated with decreased rejection sensitivity among youth and greater prosocial and assertive behavior (Kanchewa et al., 2016). Recent results from the data used in the current study also suggest that depression symptoms among youth decreased after participating in a mentoring program (Browne et al., 2022). Depression is a serious condition and was estimated to have affected 17% of US adolescents in 2020 (SAMHSA, 2021). Unfortunately, barriers exist to treatment for depression, and in 2020 fewer than half of those adolescents diagnosed with depression reported seeking treatment (SAMHSA, 2021). One of those barriers is the lack of mental health professionals (USA Facts, 2021). In an effort to increase access to mental health services, some have argued for a



paraprofessional workforce - including trained youth mentors - as a supplement to services (McQuillin et al., 2022). The current findings suggest that a mentoring program that incorporates a focus on both goals and youth's preferences may be one route to reducing mental health symptoms among this population.

Several limitations should be noted. This study focused on the extent to which the mentoring relationship focused on goals broadly, however did not examine the extent to which specific goals (e.g., regulating feelings, learning math skills) could have related to relationship closeness and tension. It is likely that working towards specific goals are related to different youth outcomes. This study also did not account for the length of the mentoring relationship. Moreover, this study only examined the associations cross-sectionally; as such, further longitudinal investigations between goal- and youth-focused approaches and youth outcomes can allow a better understanding on the temporal associations between variables. Finally, the sample consisted primarily of one-to-one mentoring programs; future work should evaluate whether these results replicate in samples of youth in group mentoring programs specifically.

## Conclusion

As the field of mentoring corrects for an overemphasis on intuitive approaches and moves towards more targeted, evidence-based directions, it should resist veering too far from what sets the field apart from pure tutoring or other skills-training classes: the role of a caring relationship. Recent research has shown the importance of integrating goal-focused and youth-centered approaches, and the results from the current study build on these findings by examining the youth mentee's perspective on mentor's approaches in the relationship. Striking the balance between feeling understood and working collaboratively on valued goals may be particularly important during adolescence, when feelings of belonging are often defined through others (Crosnoe, 2011). As adolescents gain greater autonomy from their parents, achieving goals in the context of caring relationships with older peers and non-parent adults can take on particular importance (Collins & Steinberg, 2006). These findings also have practical and theoretical implications, especially for training and supporting mentors who work with adolescent mentees. Trainings in skill-building activities need to be integrated with the focusing on relationship-building activities. The relationship-building helps to cultivate rapport, increases youth engagement, and serves as a catalyst to strengthen the intervention.

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**Data Sharing Declaration** The data that support the findings of this study are available from Mentoring Enhancement Demonstration Project but restrictions apply to the availability of these data, which were used under license for the current study, and so are not publicly available. However, data are available from the authors upon reasonable request and with permission of Mentoring Enhancement Demonstration Project.

## Compliance with Ethical Standards

**Conflict of Interest** The authors declare no competing interests.

**Ethical Approval** Authors received approval from their institution's ethical review board to analyze this data.

**Informed Consent** Participants provided informed consent prior to participating.

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