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Former Youth Care Workers' Experiences in Residential Treatment

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Walden University

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Sonja Johnson

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Walden University

2021

Abstract

Former Youth Care Workers' Experiences in Residential Treatment

by

Sonja Johnson

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human Services—Criminal Justice

Walden University

May 2021

Abstract

As juvenile crime increases across the United States, so do the costs to support incarceration programs. Youth care workers play a pivotal role in supporting the rehabilitation of youth. The effectiveness of a youth residential program is critical for the long-term employment of a youth care worker. The purpose of this qualitative transcendental phenomenological study was to obtain the lived experiences of young and departed youth care workers in residential settings about leaving employment. Pragmatism was the ontology that helped to guide this study with the aim of understanding how individuals' reality was shaped by relational dynamics that contributed to varying outcomes for youth care workers. Using semistructured interviews of 10 African American former youth care workers at youth residential treatment facilities, the transcendental phenomenological research data analyses included the use of the modified van Kaam method. Four themes appeared: (a) education of youth care workers, (b) issues with administration, (c) frustration with low pay, and (d) enjoyment from working with youth. This study may contribute to positive social change by prompting policy makers and managers to consider increasing supportive professional development and compensation for supervisors and care workers to promote the longevity of youth care staff, resulting in improved supports for at-risk youth.

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Dedication

My first dedication is to my Lord and Savior Jesus Christ. Without you in my life none of my accomplishments would have been possible. I also want to thank all the individuals that constantly checked on me and offered their emotional support.

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First, I want to give God all the praise. I could not have made this happen without my Lord and Savior. I am grateful for this opportunity to share my passion towards youth care workers. I also would not have been able to make it to this point in my educational endeavor without the love and support of my friends and colleagues. Dr. Heinrich, I will always appreciate you for being my sounding board during my frustrations and cries. I cannot thank you enough for the effort you put into making sure I had a well-done dissertation.

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Chapter 1: Introduction to the Study

Youth-care workers fill a unique role in the lives of youth in residential treatment facilities (Fein, 2014; Leichtman, 2006). Youth care workers have direct and frequent contact with youth in residential treatment, and due to this, their position is essential and impactful (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). Residential treatment programs employ professionals in multiple areas (e.g., medical, clinical, administrative); however, youth care workers are known to be the drivers of youth treatment (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). Youth care workers have been referred to as the “central agents of change” in these settings (Pazaratz, 2003, p. 120).

Background of Problem

In the United States, nine of 100 male youth aged 10 to 17 are arrested yearly (Kirk & Sampson, 2013; Office of Juvenile Justice and Delinquency Prevention [OJJDP], 2009). Over 60,000 U.S. youth are held in residential facilities or jails each day (Mendel, 2011). The chances of youth committing crimes increase as youth enter adolescence (Loeber & Farrington, 2012). Approximately 30% of the U.S. government’s budget is spent toward building and maintaining incarceration programs for youth, and the cost of protecting the public continues to increase as crime escalates in cities across the United States (Zagar et al., 2013). At-risk youth face difficult issues in many areas that require special attention, and outcome predictors of at-risk youth in residential treatment partly depend on the relationships formed between youth and staff, which in turn affect the many services available in residential treatment (Carr, 2009; Gagnon et al., 2012; Karver et al., 2006).

Youth care workers play a critical role in at-risk residential facilities, and the profession can be incredibly challenging and emotionally draining (Barford & Whelton, 2010; Souverein et al., 2013). Youth care workers' perceptions of the effectiveness of a residential program can play a role in whether they continue their employment on a long-term basis (van Gink et al., 2018; Matz et al., 2013). A perception that the program is no longer effective may appear to imply that the youth care workers are doing something wrong (Needham et al., 2005; van Gink et al., 2018; Whittington & Wykes, 1992). In turn, youth care workers tend to perceive that their superiors lack confidence in their ability to do their job (Needham et al., 2005; van Gink et al., 2018; Whittington & Wykes, 1992). When this occurs, youth care workers begin to lack confidence in their ability to effectively perform their job (Needham et al., 2005; van Gink et al., 2018; Whittington & Wykes, 1992). Managing at-risk youth behaviors under these circumstances tends to lead to burnout symptoms in youth care workers (van Gink et al., 2018), resulting in high staff turnover, which, in turn, decreases the quality of services and increases financial hardships for facilities (Garner et al., 2012; van Gink et al., 2018).

When conducting a literature search related to the youth care worker profession, I found little evidence indicating why young youth care workers (ages 18-25) prematurely left the profession. I found a dearth of information regarding specific events experienced by youth care workers that would account for or be correlated with youth care workers' departure from the profession. As a result, there appears to be a gap in the literature regarding youth care workers' lived experiences. This study was conducted to fill a gap in the literature by addressing a population that was minimally documented, specifically

concerning lived experiences that workers had that led to the workers' departure from the profession.

The results of this transcendental phenomenological study may be helpful in filling a gap in the literature, thereby providing beneficial information to administrators and managers of juvenile residential facilities. Themes pertaining to the lived experiences of former young youth care workers that prompted their departure from the workplace may provide leadership personnel with the insight necessary to improve the profession and reduce employee turnover. This information, in turn, may assist with developing human resources (HR) and training activities geared toward addressing the reasons that young employees leave employment in this field.

Problem Statement

The United States has the highest rate of juvenile incarceration in the world (Lambie & Randell, 2013; Sickmund, 2010; Unruh et al., 2018). Over 150,000 juvenile offenders in the United States are placed in residential facilities annually (Lambie & Randell, 2013). Incarcerating at-risk youth costs U.S. taxpayers an estimated \$30 billion annually (Zagar et al., 2013). At-risk youth in juvenile facilities have complex educational, behavioral, and mental health needs (Gagnon et al., 2012; Unruh et al., 2018).

Youth residing in group homes or residential placements are usually resistant to treatment (Barford & Whelton, 2010; van Gink et al., 2018). As such, the youth care profession can be difficult and emotionally taxing (Barford & Whelton, 2010; Krueger, 2002). The challenge is often that youth become verbally and physically aggressive toward support staff (Barford & Whelton, 2010; van Gink et al., 2018), contributing to a

50% turnover rate among youth care workers during the 1st year of employment in adolescent residential facilities (Byrne & Sias, 2010; Curry et al., 2005; van Gink et al., 2018). Youth care workers have the second highest turnover rate among professionals in residential treatment (Connor et al., 2003; Stapleton et al., 2017). High staff turnover negatively impacts the quality of services and increases financial hardships for facilities (Garner et al., 2012). The age of employees plays an important role in job turnover (Barford & Whelton, 2010; Cordes & Dougherty 1993; Lau et al., 2005; Maslach et al., 2001; van Gink et al., 2018), as young employees tend to lack the experience and maturity needed to handle the complex issues of at-risk youth (Barford & Whelton, 2010). Young youth care workers may enter the field with enthusiasm to help others (Stapleton et al., 2017). However, once their expectations of the profession are not met, the enthusiasm of youth care workers diminishes (Stapleton et al., 2017).

A literature review on the youth care industry indicates minimal available research on the lived experiences of young (18-25 years old) youth care workers in juvenile residential facilities and their reasons for leaving the field. The problem is that residential facility managers and HR staff members do not appear to understand how youth care workers' on-the-job lived experiences may influence youth care workers to change their type of employment (E. Garcia, personal communication, November 4, 2016). The retention of youth care workers could yield cost savings and improve quality services for at-risk youth.

I used this transcendental phenomenological study to understand the lived experiences of young former youth care workers who previously worked in juvenile residential facilities but prematurely left the field within 6 months to 1 year of

employment. Pragmatism is concerned with how individuals deal with disputes or problems and the way in which truth is assessed in problems (James, 1975). Recognizing how pragmatism correlates with how former youth care workers come to make the decision to leave the field within 6 months to 1 year of employment, I developed themes to help fill a gap in the available literature and offer possible insights into policy and decision making about how and why former youth care workers left their jobs in juvenile residential facilities across Eastern Central Florida. Exploring the lived experiences of former youth care workers and the lived experiences that they had that led to their departure from the profession is instrumental to promoting healthy behaviors and positive social change.

Purpose of the Study

In this transcendental phenomenological study, I sought to understand the lived experiences of former youth care workers who were employed in residential facilities in Eastern Central Florida. I developed themes from the lived experiences about why such workers leave employment after 6 months to 1 year of full-time employment. Pragmatism is concerned with how individuals deal with disputes or problems and the way in which truth is assessed in problems (James, 1975). Using a transcendental phenomenological approach permitted exploration of the decision-making process related to youth care workers prematurely leaving employment. This information may be helpful to residential facility managers and HR staff who make hiring decisions, in addition to filling a gap in the literature.

Research Question

The study's research question pertaining to former youth care workers who worked in youth residential placements was as follows: What are the lived experiences of young and departed youth care workers in residential settings in decision making about leaving employment?

Theoretical Foundation

Transcendental phenomenology considers the understanding in respect of its purest form (Hanna, 2016; Lu-Adler, 2018). Researchers using transcendental phenomenology aim to discover what it is for something to be a true representation and an experience (Hanna, 2016; Lu-Adler, 2018). From a transcendental phenomenological perspective, participants' cognitive thoughts form their perceptions, their realities, and then their truths (Crump, 2018; Luft, 2011).

Conceptual Framework

Pragmatism is concerned with how individuals deal with disputes or problems and the way in which truth is assessed in problems (James, 1975). This framework was the ontology that helped to guide this study with the aim of understanding how individuals' reality was shaped by relational dynamics that contributed to varying outcomes for youth care workers. Pragmatism and transcendental phenomenological link with reality and the individual's experience (Hammond, 2013; Moerer-Urdahl & Creswell, 2004). I utilized an interpretive framework of pragmatism to explore the lived experiences of former youth care workers who worked in residential facilities. A pragmatic thinker believes in dealing with things sensibly and relies on lived experiences of phenomena to make decisions (James, 1975; Moustakas, 1994).

Simpson (2017) stated that pragmatism is a “thoroughly elaborated philosophy that accounts for the social experience of living and working together” (p. 86). Pragmatism has the potential to give important information relating to business management that is concerned with the development of human and social practice (Simpson, 2017). Pragmatism can offer a useful and appropriate way of addressing the processes of human conduct in social situations (Simpson, 2017). My goal in this study was to analyze, understand, and interpret the lived experiences of former youth care workers who worked in residential facilities. Pragmatism appeared suitable as a conceptual framework because it provided a means to understand how youth care workers assessed the truth in their lived experiences and shaped the study’s understanding of why former youth care workers left their employment within the first 6 months to 1 year of employment.

Nature of the Study

Through this transcendental phenomenological study, I sought to understand the lived experiences of former youth care workers who worked in residential facilities. Interviews were conducted with 10 former youth care workers. This transcendental phenomenological study was conducted to examine lived experiences and behaviors in a combined and parallel way, which is common in transcendental phenomenological research (Moerer-Urdahl & Creswell, 2004). This process allows researchers to experience phenomena (Moerer-Urdahl & Creswell, 2004). The study used the works of Moustakas (1994) to help in understanding the lived experiences of former youth care workers who previously worked in residential facilities in the eastern region of Central Florida and utilized an interpretive framework of pragmatism to explore the lived

experiences of former youth care workers. A pragmatic thinker believes in the truth and relies on lived experiences of phenomena (James, 1975; Moustakas, 1994). Pragmatism and transcendental phenomenology link with reality and the individual's experience (Hammond, 2013; Moerer-Urdahl & Creswell, 2004). I gained a deeper understanding of the lived experiences of former youth care workers who previously worked in residential facilities but left within 6 months to 1 year of employment. Participants for the study were recruited from snowball sampling and was employed to recruit additional participants.

Definitions of Terms

Key terms were defined as follows for this study:

Residential placement: The provision of a residence, which may be secure or nonsecure; public (state or local), private, or tribal; and long-term or short-term (Sickmund, 2010).

Youth care worker: One who works directly with children in residential settings (Bastiaanssen et al., 2012).

Assumptions

In this study, I made several assumptions. The first assumption was that for this transcendental phenomenological qualitative study, participants told the truth and understood the questions in the way in which they were intended to be understood. The second assumption was that the participants who had worked in residential treatment for 6 months to 1 year provided their perspectives in interviews about their experiences in the field. The third assumption was that pragmatism provided me with an understanding of

how individuals dealt with disputes or problems in their work environment and the way in which truth was assessed (James, 1975).

Scope and Delimitations

The delimitations of this study were its boundaries, which encompassed African American male youth care workers between the ages of 18-25 years who lived in Eastern Central Florida and had served in direct youth care roles in residential placement facilities. Excluded from this study were (a) female youth care workers, (b) youth care workers with more than 1 year of experience, and (c) youth care workers who lived outside Eastern Central Florida. The sample did not represent all African American males who previously worked as a youth care workers in residential treatment. The delimitations allowed me to explore the research question thoroughly and obtain a rich description of the lived experiences of former youth care workers who previously worked in juvenile residential facilities but prematurely left the field within 6 months to 1 year of employment.

Limitations

The limitations of the study derived in part from the use of a sample of African American male former youth care workers between the ages of 18 to 25 years who had 6 months to 1 year of employment experience. The use of snowball sampling may have impacted the transferability of this study, in that participants' experiences may have been specific to whom they worked with and where they were employed.

Additional limitations of the study related to methodology and may be summarized as follows:

1. Details of the data might not be genuine.

2. Participants might not have been able to articulate their thoughts and feelings.
3. If this study is duplicated, the results might differ.
4. I experienced difficulty in obtaining participants.
5. This study applied to a specific group.
6. The generalizability of the results is limited to Eastern Central Florida.

There were limitations related to data collection. Due to the sensitive nature of the research topic, participants might not have responded sincerely to questions.

Additionally, the issues identified by the participants could have been specific to their local program.

Significance

This transcendental phenomenological study may have a significant effect on the field of youth care services in relation to staff retention, employee engagement, and employee high-level productivity. Residential and outpatient treatment facilities for youth could benefit from the results of this study by using the information to implement new policies and support services. I hope that the information will help to reduce youth care workers' high turnover rate, job termination, and work-related health issues (Sprang et al., 2011). Filling the gap in the literature and offering insights into policy and decision making about how and why former youth care workers left the workforce within the 1st year of employment could result in substantial changes within the industry. There is a strong correlation between employer engagement and employee performance within a company (Fair, 2018; Kotze et al., 2014). Organizations that exhibit higher levels of employee engagement outperform other organizations (Fair, 2018; Li & Liao, 2014;

Wiley, 2013). As a result, the study results hold a strong potential to significantly help the industry meet the increasing needs of the community through staff retention practices.

The outcome of this study has many potential benefits. Employer disengagement costs companies billions of dollars annually (Brennan & Monson, 2014; Fair, 2018).

Employer engagement and increased retention of youth care workers could yield cost savings and improved services for youth (Brennan & Monson, 2014; Fair, 2018).

Strategies in this study could help to promote the psychological well-being of youth care workers and decrease the potential for burnout and/or high turnover, which negatively impact day-to-day operations involving youth. The results of this study could also help HR and management staff better understand lived experiences of turnover and may, in turn, drive processes to improve retention among youth care workers in residential facilities.

Summary

This chapter included an overview of the research that supported the need for this study related to young African American male former youth care workers (18-25 years old) who previously worked in juvenile residential facilities. This chapter included (a) an introduction to the study and the study's (b) problem statement, (c) purpose, (d) significance, and (e) conceptual framework. Chapter 2 includes a review of literature about the history and current aspects of juvenile incarceration and staffing issues relating primarily to former youth care workers who worked in residential facilities.

Chapter 2: Literature Review

High turnover rates among youth care workers pose a problem to both the profession and residential programs that lose their staff. High staff turnover negatively impacts the quality of services and increases financial hardships for facilities (Brennan & Monson, 2014; Fair, 2018; Garner et al., 2012). Youth care workers play a critical role in at-risk residential facilities, and their profession can be incredibly challenging and emotionally draining (Barford & Whelton, 2010; Souverein et al., 2013). Youth care workers' perceptions of the effectiveness of a residential program can play a role in whether they continue their employment on a long-term basis (Matz et al., 2013; van Gink et al., 2018). Pragmatism is concerned with how individuals deal with disputes or problems and the way in which truth is assessed in problems (James, 1975). I used an interpretive framework of pragmatism to explore the lived experiences of former youth care workers who worked in residential facilities.

In this transcendental phenomenological study, I developed themes from the lived experiences of former youth care workers who worked in youth residential facilities but left employment within 6 months to 1 year. Effort was made to understand the lived experiences of former youth care workers who worked in residential facilities in Eastern Central Florida. This literature review contains information about these elements and the history of juvenile incarceration and staffing issues.

Literature Search Strategy

Articles for the literature review were obtained from scholarly books and research documents retrieved through Walden University Library internet search engines such as ProQuest, PsycINFO, PsycARTICLES, and ProQuest Digital Dissertations. The literature

search was further augmented using reference listings from appropriate titles identified through Google Scholar and by searching for articles on such topics as youth care workers, juvenile residential facilities, employment issues regarding youth care workers, and pragmatic theory. I focused the review on relevant peer-reviewed articles published within the last 5 years. Search terms included *youth care workers*, *challenges in the youth care worker profession*, *job satisfaction*, *adolescent care*, *direct care worker*, *professional training*, *residential facilities*, *youth treatment*, *at-risk youth*, *cost of residential treatment facilities*, *pragmatism*, *workplace turnover*, *juvenile justice system*, *history of disciplining children*, and *youth programs*. Approximately 90 titles were reviewed.

Theoretical Foundation

I used two theories to frame this transcendental phenomenological study: pragmatism and transcendental phenomenology. Pragmatism focuses on individuals' decision-making process based on their lived experiences. Transcendental phenomenology focuses on a person's truth based on the person's reality.

Conceptual Framework

Pragmatism is concerned with how individuals deal with disputes or problems and the way in which truth is assessed in problems (James, 1975). Pragmatism and transcendental phenomenology link with reality and the individual's experience (Hammond, 2013; Moerer-Urdahl & Creswell, 2004). I utilized an interpretive framework of pragmatism to explore the lived experiences of former youth care workers who worked in residential facilities. A pragmatic thinker believes in the truth and relies on lived experiences of phenomena (James, 1975; Moustakas, 1994). As a research

analyst for this transcendental phenomenological study, I used pragmatism to inform my personal ontology for understanding why former youth care workers leave employment after 6 months to 1 year. As a practical researcher, I had the goal of analyzing, understanding, and interpreting the lived experiences of former youth care workers who worked in residential facilities.

I consider myself a pragmatic person in my personal life because I deal with the world from a realistic point of view. I respond to an issue based on how I perceive it in real time. I find this to be a better approach than being idealistic. This conceptual framework appeared suitable for this study and may have shaped the study's understanding of why former youth care workers leave their employment within the first year of employment.

Literature Review

Biblical authors sanctioned corporal punishment as an approved method of disciplining children (Edwards, 1996; Proverbs 13:24, The New King James Version). In Biblical times, many believed that some children were born evil and that severe physical punishment would release the devil (Edwards, 1996; Proverbs 13:24, The New King James Version). The death of a disobedient child at the hands of a parent was an extreme measure; however, it was acceptable in Biblical times (Edwards, 1996; Deuteronomy 21:18-21, King James Version).

In the early 1700s, criminals were publicly punished (Foucault, 1978; Ignatieff, 1981; Linebaugh, 1975, 1977). The public would watch criminals being branded, beaten, hung, or stoned to death (Foucault, 1978; Ignatieff, 1981; Linebaugh, 1975, 1977). These forms of punishment were acceptable in society (Foucault, 1978; Ignatieff, 1981;

Linebaugh, 1975, 1977). Children were given no special treatment and were not considered essential (Nelson et al., 2010).

By the end of the 17th century, the punishment of criminals started to change (Foucault, 1978; Ignatieff, 1981; Linebaugh, 1975, 1977). By 1860, public physical penalties were no longer practiced (Foucault, 1978; Ignatieff, 1981; Linebaugh, 1975, 1977). Children began to be perceived differently and were treated as humans who needed to be cared for and loved (Nelson et al., 2010). Poorhouses, which were also called “reform schools,” were established to keep young offenders from engaging in crime (Nelson et al., 2010). The house staff of these facilities were stern in their use of discipline (Nelson et al., 2010).

Today, youth in legal trouble may be placed in detention centers on a short-term basis (Dix, 2017; Freudenberger, 1975). Youth with an ongoing criminal history are committed to a residential treatment facility for 12 to 18 months (Dix, 2017; Freudenberger, 1975). Typically, these youth have already exhausted all other forms of legal services (e.g., probation, house arrest) and usually have been placed in a detention center several times for various legal infractions (Dix, 2017; Freudenberger, 1975). At-risk youth usually come from dysfunctional families and tend to require constant one-on-one attention (Freudenberger, 1975).

Residential Facility History

In 1855, The House of Refuge in New York became the first institution for delinquents (Friedman et al., 2006; Whittaker & Maluccio, 1989). The number of residential facilities for children with mental disorders increased after World War II (Friedman et al., 2006). During this time, residential facilities became important in

serving children who had been neglected and who were suffering from mental health issues (Friedman et al., 2006; Pappenfort & Kilpatrick, 1969; Whittaker & Maluccio, 1989).

In 1899, the U.S. juvenile justice system was formed with the creation of the first juvenile court in the world in Cook County, Illinois (Nelson et al., 2010). The purpose of the creation of the juvenile court was to focus on youth rehabilitation, as well as keep youth court separate from the adult court system (Nelson et al., 2010).

In 1907, the Probation Act established an alternative to prison (Behar et al., 2007; Munice, 2014). Probation is community supervision and serves as an alternative to incarceration that prevents reoffending through the provision of advising and assistance (Behar et al., 2007; Munice, 2014). During this time, the Children Act prevented children under the age of 14 years from being placed in prison (Behar et al., 2007; Munice, 2014). Detention centers were established for children to remain in before trial (Behar et al., 2007; Munice, 2014). Prison was only recommended for youth whose crimes resulted in them being deemed unsuitable for detention centers (Behar et al., 2007; Munice, 2014).

During the 1920s, the first psychiatric facilities treated children who suffered from encephalitis and who exhibited behavioral problems as a result of the disease (Barker, 1974; Fein, 2014; Munice, 2014; Zimmerman, 1990). These psychiatric facilities soon began to treat other psychiatric conditions as well (Barker, 1974; Fein, 2014; Munice, 2014). This was the time when outpatient mental health centers and day treatment centers were also developed (Fein, 2014; Munice, 2014).

In the 1940s, the pioneers of the residential care movement began their work, and the term “residential care” began to be used. Institutions began to offer mental health

services and to operate with a psychotherapeutic approach (Fein, 2014). Pioneers of residential facilities suggested that adult role models were therapeutic for youth (Fein, 2014). During this time, residential care was looked upon favorably (Fein, 2014). In 1956, the American Association of Children's Residential Centers was established (Fein, 2014; Leichtman, 2006). The focus of residential care during this period was getting youth accustomed to daily life in the residential setting; therapeutic treatment and residential facilities still had not distinguished between children's homes, hospitals, and mental health programs (Fein, 2014; Leichtman, 2006).

In the 1970s and 1980s, residential treatment facilities began to establish their own identity (Fein, 2014; Leichtman, 2006). In contrast to hospitals, which were managed by medical professionals, residential facilities were managed by mental health professionals. Compared to hospitals, residential facilities received lower reimbursements from insurance companies and provided fewer therapies (Fein, 2014; Leichtman, 2006). In the 1980s, the reputation of residential facilities began to deteriorate as they became known for separating youth from their families (Fein, 2014; Leichtman, 2006). During this time, critics complained that residential placement restricted individuals' freedom while exposing youth to other troubled youth who could expose them to disruptive behaviors (Fein, 2014; Leichtman, 2006). Residential treatment centers were considered expensive and deemed not as beneficial and effective as other forms of treatment (Barker, 1982; Fein, 2014). At that time, there was no way to measure positive outcomes or how many youth relapsed once discharged from residential placement (Barker, 1982; Fein, 2014).

There were many issues during the advent of residential programs (Behar et al., 2007). Many of the residential facilities were unregulated, private facilities (Behar et al., 2007). There were reports of exploitation, mistreatment, and abuse of delinquent youth in the care of these facilities (Behar et al., 2007). In 1999, the problems in these unregulated facilities began to surface in the media (Behar et al., 2007). Program officials faced criminal charges and expensive civil suits due to findings of abuse and neglect at several private unregulated residential programs (Behar et al., 2007; Dukes, 2005; Hechinger & Chaker, 2005; Rock, 2005, 2004).

Practices developed to meet the needs of detained and adjudicated youth have been an issue in the past in juvenile justice programs (Ford & Blaustein, 2013; Grisso, 2007; Williams et al., 2005). There have also been challenges with meeting the needs of staff who help provide services to youth (Ford & Blaustein, 2013; Grisso, 2007; Williams et al., 2005). Although many positive changes have occurred with residential facilities, there remains a need for intensive services and support (Nelson et al., 2010).

Today, residential programs are clearly distinguished from other youth programs (Fein, 2014). Youth group homes that hold small numbers of youth (e.g., 7 to 12 youth) provide for residents' basic needs, such as food and shelter (Fein, 2014). Youth group homes also offer therapeutic services (Fein, 2014). Residential treatment centers' mission is to deliver therapeutic services while providing for youth residents' basic needs (Fein, 2014). Residential facilities are distinguished from other youth programs by their degree of restrictiveness (Bates et al., 1997; Fein, 2014). Youth placed in residential treatment facilities are not permitted to leave, in contrast to youth residing in group homes, foster care, and day treatment programs (Bates et al., 1997; Fein, 2014).

Residential Treatment

Residential treatment is purposefully constructed to provide protection, support, socialization, education, and treatment for youth in a multidimensional living environment (Whittaker et al., 2014; Whittaker et al., 2016). Residential treatment facilities, in partnership with community-based programs as well as youths' families, enhance treatment (Whittaker et al., 2014; Whittaker et al., 2016). Wrap-around care is important for youth in residential treatment (Whittaker et al., 2014; Whittaker et al., 2016).

A residential treatment center is a 24-hour out-of-home facility designed to provide intensive treatment for persons with social, cognitive, and emotional disorders (Abramovitz & Bloom, 2003; Minjarez-Estenson, 2016). Youth with serious behavioral and emotional issues reside in residential treatment facilities (Abramovitz & Bloom, 2003; Minjarez-Estenson, 2016). Residential treatment for youth is an invasive intervention (Abramovitz & Bloom, 2003; Minjarez-Estenson, 2016). Every aspect of treatment affects not only the youth residents, but also their families (Abramovitz & Bloom, 2003; Minjarez-Estenson, 2016).

A clear difference between inpatient hospitals and residential treatment facilities is that residential programs do not have medical professionals onsite 24 hours a day, 7 days a week (Abramovitz & Bloom, 2003; Fein, 2014; Minjarez-Estenson, 2016). Although residential programs have nurses on staff throughout the day, youth care workers are required to be familiar with the medication dispensing process (Fein, 2014). Youth care workers are required to get specialized training in order to be able to administer medications for youth while on out on trips with them (Baker et al., 2007;

Fein, 2014). Due to youth care workers being present continually in residential treatment facilities, they are expected to monitor all children for medication side effects and to be familiar with timing and food instructions related to the medications (Baker et al., 2007; Fein, 2014). It is also imperative that youth care workers be trained in how to deal with youth who refuse to take their medications (Baker et al., 2007; Fein, 2014).

One important aspect that distinguishes youth residential treatment facilities from other programs is the therapeutic milieu (Fein, 2014; Minjarez-Estenson, 2016). In youth residential treatment facilities, the therapeutic milieu consists of a clinical setting in which youth engage in healthy peer groups, facilitated by staff, that emphasize the strengths of each youth to increase their coping skills (Fein, 2014; Minjarez-Estenson, 2016). The therapeutic milieu also consists of youth building healthy relationships with peers and staff members in an environment separate from their families and communities (Fein, 2014; Minjarez-Estenson, 2016). The youth living situation is always to be considered therapeutic for all youth (Fein, 2014; Minjarez-Estenson, 2016). The therapeutic activities provided in this milieu offer youth validation, support, structure, and containment/safety (Fein, 2017; Gunderson, 1978).

At-risk youth are placed in residential treatment facilities when their behavioral and emotional problems can no longer be managed on an outpatient basis (Abramovitz & Bloom, 2003; Minjarez-Estenson, 2016). At-risk youth usually have grown up with social services involved in their lives (Abramovitz & Bloom, 2003; Minjarez-Estenson, 2016). For some at-risk youth, residing in the family home is no longer an option due to constant parental discord or domestic violence incidents between the youth and their parents (Abramovitz & Bloom, 2003; Baker et al., 2008; Minjarez-Estenson, 2016; Rosen, 1999).

Youth may experience multiple traumas prior to entering a residential facility (Abramovitz & Bloom, 2003; Baker et al., 2008; Minjarez-Estenson, 2016; Rosen, 1999). Residential placement tends to be the last option for at-risk youth (Abramovitz & Bloom, 2003; Baker et al., 2008; Minjarez-Estenson, 2016; Rosen, 1999). For example, youth may have been placed in various group homes, foster homes, or adoptive homes prior to being placed in a residential treatment facility (Abramovitz & Bloom, 2003; Baker et al., 2008; Minjarez-Estenson, 2016; Rosen, 1999).

Challenges in Residential Treatment

Residential treatment facilities for youth are inpatient settings that house and treat adolescents with significant mental health and behavioral issues (Brauers et al., 2016). Youth residing in residential treatment have undergone multiple traumatic childhood experiences (Brauers et al., 2016; Miller et al., 2018). Common childhood traumas experienced by youth in treatment include sexual, physical, and verbal abuse; loss of parent or separation of family; community violence; domestic violence; chronic and severe neglect; and caregiver substance abuse and other forms of impairment (Brauers et al., 2016; Kagan & Spinazzola, 2013).

The most frequent diagnoses that youth in residential care are diagnosed with are Post-traumatic Stress Disorder, Attention Deficit/Hyperactivity Disorder, Oppositional Defiant Disorder and Conduct Disorder (Kagan & Spinazzola, 2013; Rosen, 1999; Yung, 2012). Antisocial behaviors are also common in youth that reside in residential treatment facilities (Kagan & Spinazzola, 2013; Rosen, 1999; Yung, 2012). Antisocial behaviors defy societal norms, such as offensive language, aggression, poor school attendance, failure to follow directions, robbery, and fire starting (Kagan & Spinazzola, 2013;

Sprague & Walker, 2000; Yung, 2012). Youth in residential treatment have severe abuse histories, have difficulty forming attachments, they often feel alienated and have poor social skills (Kagan & Spinazzola, 2013; Rosen, 1999; Yung, 2012). Youth often have had multiple failed placements prior to being placed in residential treatment (Barford & Whelton, 2010; Kagan & Spinazzola, 2013; Rosen, 1999; Yung, 2012). Youth first arriving to residential treatment often feel frightened, unsure of themselves, distrusting, vigilant, and are emotionally detached (Kagan & Spinazzola, 2013; Rosen, 1999; Yung, 2012).

Youth who have traumatic experiences require intensive therapeutic services (Brauers et al., 2016; Kagan & Spinazzola, 2013). Youth exposed to trauma are more likely to exhibit depression, anxiety, academic issues, behavioral problems, and mental health disorders (Brauers et al., 2016; Kagan & Spinazzola, 2013). Youth placed in residential treatment receive therapeutic services in a secure environment to address their significant behavioral and mental health needs (Brauers et al., 2016; Kagan & Spinazzola, 2013). Residential treatment can be challenging for youth (Ford et al., 2016). One challenge that youth face is, youth residing away from home for the first time can have a difficult time adjusting, especially for youth with behavioral or emotional problems (Ford, et al., 2016; Garfinkel, 2010). Another challenge is that residential treatment facilities can geographically distance some youth from their home communities, and this distance from home may lead to difficulty including with caregivers and other supportive adults in treatment (Ford et al., 2016).

Working conditions in residential treatment facilities tend to be stressful (Braxton, 1995; Minjarez-Estenson, 2016). Youth placed in residential care tend to be emotionally

disturbed and can be volatile (Braxton, 1995; Minjarez-Estenson, 2016). Residential treatment programs with small budgets tend to be unable to hire staff with the appropriate skills to manage at-risk youth (Braxton, 1995; Minjarez-Estenson, 2016). A youth care worker's job can be demanding and emotionally challenging for an inexperienced residential youth care worker (Braxton, 1995; Minjarez-Estenson, 2016). Often at-risk youth only know how to express themselves behaviorally which can exacerbate the emotional stress of a youth care worker because youth care workers are in constant contact with youth in residential treatment facilities (Braxton, 1995; Eastwood & Ecklund, 2008; Minjarez-Estenson, 2016). The pay for youth care workers in the human service field tend to be low in pay and youth care workers' attitudes towards their work are influenced by the working conditions in residential treatment facilities (i.e., job satisfaction and support) (Braxton, 1995).

Characteristics of Youth in Care

Historically, youth who are admitted to residential treatment centers have serious psychiatric disorders (Fein, 2014; Pazaratz, 2000). Often youth in residential care have a low frustration tolerance and poor testing skills (Fein, 2014; Pazaratz, 2000). Many youth come into care after experiencing many traumatic events such as neglect, witnessing domestic violence, or other traumatic events such as parental substance use or mental health struggles (Fein, 2014; Pazaratz, 2000). Another common characteristic of youth in residential treatment is that some youth exhibit physically aggressive behaviors as well as suicidal ideations and behaviors (Fein, 2014; Pazaratz, 2000). Many youth in residential treatment whose family were unable to care for them have been placed in adoptive homes, foster homes, or group homes (Connor, Doerfler, Toscano Jr, Volungis, &

Steingard, 2004; Fein, 2014; Pazaratz, 2000). Usually when children and adolescents are not able to remain safe at home or in less restrictive out-of-home settings, children and adolescents will be placed in a more restrictive and intensive environment such as a residential treatment facility (Connor et al., 2004; Fein, 2014; Pazaratz, 2000). Youth in residential treatment have been found to have higher levels of hyperactive/impulsive behavior when compared with individuals in the nontherapeutic population (Connor et al., 2004; Fein, 2014; Pazaratz, 2000).

Many youth in residential treatment facilities are prescribed medication (Fein, 2014; Griffith et al., 2012). Often youth enter residential treatment with a history of medication management. Youth are diagnosed with mental health disorders such as Attention Deficit Hyperactivity Disorder, Post traumatic Stress Disorder, Oppositional Defiant disorder, and Bipolar I or II and many more. Youth that have experienced many out-of-home placements were more likely to be prescribed medication once admitted into residential treatment facility (Fein, 2014; Griffith et al, 2012).

The Helping Profession

The goal of the helping professional is to bring clients to a place where clients can become their best (Fields et al., 2015). It is important for leaders in a helping profession to assist the clients being served into becoming leaders (Fields et al., 2015; Greenleaf, R. K., 1977). Individuals that receive empathy and that are not being judged by their past mistakes by those that lead them can grow stronger mentally, emotionally, and intellectually (Fields et al., 2015; Greenleaf, 1977). The helping professional (youth care worker, therapist, case manager, etc.) identifies that it is not solely their responsibility for bring out the best version of a client, that responsibility lies within the client (Fields et al.,

2015; Greenleaf, 1977). Self-care is also an important aspect to the helping professional (Weekes, 2014). One caring for themselves is defined as self-care (Weekes, 2014). Taking care of self helps enhances one's well-being (Dean, 1989; Richards et al., 2010; Weekes, 2014). Self-care includes psychological, physical, and spiritual well-being and receiving professional support (Dean, 1989; Richards et al., 2010; Weekes, 2014). It is healthy for helping professionals to take time to self-reflect and eat healthily (Dean, 1989; Richards et al., 2010; Weekes, 2014). These are the very things that helping professionals ask their clients to do (Dean, 1989; Richards et al., 2010; Weekes, 2014).

Youth Care Workers History

Since the late 19th century, the youth care workers' occupation has become increasingly high on policy agendas (Moss, 2006). Youth care workers' services are necessary to aid in the success of youth in residential placement (Dahlberg & Moss, 2005; Moss, 2006). The implementation of behavior therapy by professional-level youth care workers has continuously been an interest in the human service field (Berryman et al., 1994; Kazdin, 1978). Youth care workers in residential settings continuously have contact with youth than any other professional working with the youth, which has a direct effect on youth's development (Berryman et al., 1994; Moos, 1974).

Youth Care Worker

It should be noted that, the role of the youth care worker varies in each residential program in each city and state (Fein, 2014; Johnson, 1982). The youth care workers are the ones that facilitate the goals of the milieu not the psychiatrists, therapists, or nurses who are typically in charge of the therapeutic milieu (Fein, 2014). Youth care workers are with youth 24/7 in a residential setting, so youth care workers serve as the main

therapeutic agents (Fein, 2014; Leichtman, 2006). The youth experience and the youth ability to thrive is contingent on the youth care workers' ability to build healthy relationships with the youth (Fein, 2014; Leichtman, 2006). The model of the residential facility will depend on what type of relationship that youth care workers will form with youth (Fein, 2014; Leichtman, 2006).

Youth-care workers fill a unique role in the lives of youth in residential treatment facilities (Fein, 2014; Leichtman, 2006). Youth care workers have direct and frequent contact with the youth in residential treatment, and due to this the youth care workers' position is essential and impactful (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). Residential treatment programs employ multiple professions (e.g., medical, clinical, administrative), however youth care workers are known to be the driver in youth treatment (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). Youth care workers have been referred to as the "central agents of change" (Pazaratz, 2003, p. 120).

Youth care workers provide direct care in the lives of at-risk youth (Catano, 2003). Youth care workers play a key role in the delivery of services to youth in residential facilities (Catano, 2003; Miller, Donohue-Dioh, Niu, & Shalash, 2018). Nurturing, discipline, social skill development, safety, consistency and predictability in daily routine are the responsibilities of a youth care worker (Catano, 2003; Miller et al., 2018). Youth care worker's profession consists of structure and process (Berryman et al., 1994; Catano, 2003; Miller et al., 2018). The individual is likely to have the ability to manage as a substitute parent in the lives of at-risk youth (Berryman et al., 1994; Catano, 2003; Miller et al., 2018). This becomes a daily pattern that mirrors what is going on in

society, including safety, age appropriate behaviors and attending school (Berryman et al., 1994; Catano, 2003; Miller et al., 2018).

The role of the youth care worker is so significant due to their uninterrupted direct contact with the youth from the time of the youth admission (Fein, 2014). From admission, youth care workers are responsible for always providing direct care to youth (Fein, 2014; Seti, 2008). Youth care workers interact with and monitor the youth in a range of activities at various times throughout the day (Fein, 2014; Seti, 2008). Treatment team members in residential programs consist of education, mental health, Director of Operations, and medical staff. Youth care workers are also part of the treatment team and are usually present at the treatment team meetings to inform the team of their observations and perceptions of what are happening with the youth in care (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975).

Youth care workers help youth build competencies by providing youth with positive experiences (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). One goal for youth in care is for youth to feel successful so that youth will be motivated to seek more success, and this is accomplished by youth care workers providing the opportunities (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). Before a youth is discharged from their residential program, youth care workers allow youth to practice making their own decisions in a safe environment (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). Youth care workers facilitating this experience helps youth to feel confident in their decision making once released from their residential program (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975).

Youth family involvement is an important part of the youth residential program and youth care workers are expected to engage with youth family members (Fein, 2014; Pazaratz, 2000). Youth care workers oversee youth family visitations and greet family members who visit the program (Fein, 2014; Pazaratz, 2000). Youth care workers are expected to help each youth engage in healthy interaction with the youth family members (Fein, 2014; Pazaratz, 2000). Additionally, youth care workers are often asked to be present in a family therapy session to offer support to the youth (Fein, 2014; Pazaratz, 2000).

Youth care workers act in a role of a parental figure (Fein, 2014; Moses, 2000; Pazaratz, 2003). Youth care workers are responsible for making sure youth eat, sleep, make sure youth appropriately participate in their education and peer groups, and monitor youth in outside activities (Fein, 2014; Moses, 2000; Pazaratz, 2003). Youth care workers implement youth treatment plans and juggle the responsibilities of establishing therapeutic relationships with all youth in care (Bertolino & Thompson, 1999; Fein, 2014; Moses, 2000; Pazaratz, 2003). Youth care workers oversee youth daily self-care and are responsible for maintaining the safety of all youth (Bertolino & Thompson, 1999; Fein, 2014; Moses, 2000; Pazaratz, 2003).

In addition to caring for youth, youth care workers are responsible for maintaining safety in crisis situations (Bertolino & Thompson, 1999; Fein, 2014; Moses, 2000; Pazaratz, 2003). Youth care workers are responsible for being familiar with institutional policies and knowing what to do in emergency situations (Bertolino & Thompson, 1999; Fein, 2014; Moses, 2000; Pazaratz, 2003). Youth care workers are also responsible for youth emotional safety by nurturing youth in care (Bertolino & Thompson, 1999; Fein,

2014; Moses, 2000; Pazaratz, 2003). It is imperative that youth care workers form a supportive and positive relationship because this helps create an effective treatment experience (Bertolino & Thompson, 1999; Fein, 2014; Moses, 2000; Pazaratz, 2003). Prior to a youth entering a residential program, the youth only have known harmful or insecure relationships (Bertolino & Thompson, 1999; Fein, 2014; Moses, 2000; Pazaratz, 2003).

Youth care workers are expected to develop healthy relationships with the youth (Catano, 2003; Dix, 2017). Youth in residential treatment look to youth care workers as role-models (Catano, 2003; Dix, 2017). Youth care workers are to demonstrate effective communication, act as advisors and be ready to manage impulsive behavior exhibited by the youth (Catano, 2003; Dix, 2017). To help keep youth motivated, youth care workers are required to keep creative treatment modalities (Dix, 2017; Hamama, 2012). For each adjudicated youth in residential treatment facilities, requires youth care workers to provide behavior management, peer conflict mediation, one-on-one monitoring, daily living support and violence prevention (Dix, 2017; Hamama, 2012).

It is important that youth care workers exhibit good communication skills (Catano, 2003; Dix, 2017; Fein, 2014). Youth care workers communicate among each other especially during shift change, as the outgoing youth care workers report to the incoming youth care workers their observations of the youth during the previous shift (Catano, 2003; Dix, 2017; Fein, 2014). Youth care workers also engage in written communication with each other (Catano, 2003; Dix, 2017; Fein, 2014). Youth care workers are responsible for documenting the youth daily activities and experiences (Fein, 2014; NRCYS, 2005).

Youth care workers play a larger role than therapists have because they spend more time with the youth (Dix, 2017; Schaefer & Mills, 1975; Yung, 2012). Furthermore, youth care workers provide for youth basic needs, process them through crises (e.g., physical restraint), and act as therapeutic parents (e.g., cooking, cleaning, doing laundry, and helping with homework) (Dix, 2017; Yung, 2012). For these reasons, youth care workers are likely to form stronger attachments with youth and have a huge impact on their treatment (Dix, 2017; Yung, 2012). A predictor of a positive treatment outcomes is the therapeutic alliance between the youth care workers and youth (Foltz, 2004; Dix, 2017; Yung, 2012).

In addition to their multiple interpersonal roles and responsibilities, it is important that youth care workers be aware of their internal emotional and cognitive processes (Fein, 2014). Many emotions can arise in youth care workers when youth care workers are dealing with youth in crisis (Fein, 2014). It is imperative that youth care workers be able to deal the experiences that might be triggering (Donnellan, 1986; Fein, 2014). Youth care workers are expected to handle their job responsibilities while being able to deal with their own trauma or difficult family situations (Crouch, 1998; Donnellan, 1986; Fein, 2014; Pazaratz, 2003). Youth care workers that do not learn to manage their emotions are in danger of causing a problematic dynamic in the youth lives (Crouch, 1998; Donnellan, 1986; Fein, 2014; Pazaratz, 2003).

Youth care workers play an important role in getting youth prepared to be released back into the community (Crouch, 1998; Donnellan, 1986; Fein, 2014; Pazaratz, 2003). In Central Florida, some residential programs are equipped with Career Coordinators and job recruiters on-site to help with job search or other discharge-

planning components (A. Wheatley. personal communication, December 4, 2019). Youth can seek employment while residing in the residential program, if they are maintaining good grades and behavior (A. Wheatley. personal communication, December 4, 2019). Youth getting the opportunity to have this experience, prepares youth to transition back into the community without many difficulties (A. Wheatley. personal communication, December 4, 2019). Once hired, youth could do a job transfer to their hometown, if available once discharged from their residential program (A. Wheatley. personal communication, December 4, 2019).

Working in Residential Treatment

A youth care worker's motivation for choosing to work directly with youth modulates the treatment of youth (Moses, 2000; Stapleton et al., 2017). Youth care workers have personal reasons for seeking and maintaining childcare work (Moses, 2000; Stapleton et al., 2017). One reason for seeking to work with youth is relating to the youth's personal troubled past (Moses, 2000; Stapleton et al., 2017). Youth care workers tend to want to give back to others after experiencing a traumatic or troubled past of their own (Moses, 2000; Stapleton et al., 2017). However, despite personal driven motivations, many workers dislike the working conditions and tend to view their positions as temporary (Moses, 2000; Stapleton et al., 2017). Youth care workers work directly with youth for periods of eight-to-ten hours per day, five days a week (Moses, 2000; Stapleton et al., 2017).

The position of a youth care worker is an important position which can be difficult at times, especially for young youth care workers (Moses, 2000; Pazaratz, 2000; Stapleton et al., 2017). Lack of maturity in a youth care worker may result the

relationship between the youth and youth care worker to become contentious (Moses, 2000; Pazaratz, 2000; Stapleton et al., 2017). Youth tend to show respect towards adults that exhibit respectful and consistent daily behaviors (Moses, 2000; Pazaratz, 2000; Stapleton et al., 2017). They are many aspects to the youth care worker's job (i.e., nurturing, disciplining, providing meals, managing crises, helping set goals, facilitating psycho-educational groups, supervising recreational activities and charting (Moses, 2000; Stapleton et al., 2017). Along with the responsibility of the job, high staff turnover can decrease the quality of services and increase financial hardships for facilities, and for individuals not invested in the job, performing the daily tasks of a youth care worker may result in the youth care worker becoming resentful (Garner et al., 2012; Moses, 2000; Stapleton et al., 2017).

Staff Turnover

Turnover in the workplace occurs when employees leave their position of employment (Bliss et al., 2010; Edmonds, 2019). Staff turnover rates are high in non-profit residential treatment facilities (Claiborne et al., 2015; Edmonds, 2019). Staff turnover can have positive and negative effects on an organization (Claiborne et al, 2015; Edmonds, 2019). Eliminating employees that are a poor fit with the organization and bringing in employees with new and fresh ideas can have a positive effect on an organization (Bliss et al., 2010; Edmonds, 2019; Young, 2015). In many cases, employee turnover is a serious concern and can have a negative impact on a human service organization (Bliss et al., 2010; Edmonds, 2019; Middleton & Potter, 2015). High turnover in human service organizations face poor staff morale, high financial costs, and poor client outcomes (Benton, 2016; Shim, 2014; Edmonds, 2019; Young, 2015). High

staff turnover results in an increased workload for the remaining employees which can lead to staff resentment and a contentious relationship between the youth care workers and youth in treatment (Edmonds, 2019).

Challenges of a Youth Care Worker

Youth care workers who work with traumatized and vulnerable youth in residential placements are at risk of burnout (Hidalgo et al., 2016). Burnout is often described as emotionally tired and stressed, when dealing with complex individuals (Hidalgo et al., 2016; Figley, 1995). Youth care workers working directly with youth often face this dilemma (Hidalgo et al., 2016). The feelings associated with burnout can lead to other problems in one's life: relational problems, decrease in work performance, resentment towards youth and the risk of becoming physically aggressive towards youth (Hidalgo et al., 2016).

Youth care workers work directly with the youth throughout their shift (Dix, 2017). Over time, the life history of the youth is exposed including their academic status, family issues, psychological issues, social issues including any physical or sexual abuse (Dix, 2017). Usually when the therapists go home for the day, the youth care workers are the ones that assist youth with the issues (Dix, 2017). The interaction for both youth care worker and youth can create stress (Dix, 2017; Maslach, 1978). Every youth care worker stress is unique to each individual and their cognitive process (Dix, 2017).

Chronic and uncontrollable work stress is contributed to burnout and burnout usually happens in individuals who are emotionally vested in their work (Dix, 2017; Maslach et al., 2001). Mental and physical health problems can occur from psychological stress in the workplace and as stress levels increase, productivity at work can fall (Dix,

2017; Maslach et al., 2001). Youth care workers that provide support to youth with intellectual disabilities are exposed to stressful work environments (Dix, 2017; Maslach et al., 2001). Work related stressors including client behavior were found to be related to emotional exhaustion (Dix, 2017).

Pragmatically, an employee who has decided to remain on the same job for 10 years or more are usually considered a committed employee (Smith, 2018). Moreover, employees who have remained on the same job for 10 years or more often have surpassed many events that result in an employee turnover (e.g., preparing for marriage, childbirth, pursuing higher education) (Smith, 2018). Aspects that can relate to a negative turnover and a positive commitment are on a jobs or lack of opportunities for raises and growth within the company) (Smith, 2018) . An employee with many years on the same job is expected to have a higher pay rate, seniority, and advanced skills (Smith, 2018).

Training

To retain the current workforce of youth care workers, administrators need to hire youth care workers who have the skills and training to prepare them for working in the field (Mallon & Hess, 2014). Youth care workers are required to do 80 hours of online training, 32 hours of P.A.R. (Protective Action Response) and 8 hours of CPR. Trainings are usually completed before a youth care worker can be in direct contact of youth. Due to the shortage of staff in some residential treatment facilities, youth care workers at times are being placed in direct care of youth before completing all trainings. Youth care workers that are placed on the floor prior to completion of trainings are still required to complete the trainings although the trainings may take longer to complete.

Youth care workers who had completed required trainings are likely to feel confident in their job duties than youth care workers who had not completed their trainings (Mallon & Hess, 2014). Trained staff may be more equipped to handle the job responsibilities efficiently (Mallon & Hess, 2014). Also, youth care workers who had obtained proper training before being placed in direct care of youth were able to handle the complex cases involving youth and use their problem-solving skills effectively than those who had not completed their trainings (Mallon & Hess, 2014).

Supervisory Support

Supervisory support plays an important role in the retention of youth care workers (Lizano et al., 2014). When supervision is effective for youth care workers, especially the newly hired employees, youth care workers will experience a commitment to their employer and job satisfaction (Lizano et al., 2014; Mallon & Hess, 2014). Youth care workers would also experience a sense of accomplishment and competence in their field (Mallon & Hess, 2014). How much support one receives depends on the skills of their supervisors (Mallon & Hess, 2014).

Social support is particularly important in the human service field. When a worker has an unsupportive supervisor, he/she may feel the only resolve is to quit because of the worker's emotional stress (Lizano et al., 2014; Maslach et al., 2001; Maslach, 1982; Yung, 2012). Validating workers' accomplishments, a supportive supervisor can reduce the workers' stress (Lizano et al., 2014; Maslach, 1982; Yung, 2012). Supervisor support may be more important than coworkers' support in the prevention of turnover (Lizano et al., 2014; Maslach et al., 2001; Yung, 2012). A supportive and effective supervisory experience by way of emotional and social support, assigned tasks, and assisting youth

workers through the stresses of the job can provide youth care workers with a sense of protection from the demands of the job as well as improvement in their overall well-being (Lizano et al., 2014).

Why People Stay in One Profession

While personal life factors may affect why youth care workers leave, researchers discovered that their professional life has a larger contribution toward turnover in the human service field (De Hauw, & Greenhaus, 2015; Mor Barak et al., 2001). Professional life includes organizational factors such as supervisory support, salary and benefits, availability of resources, trainings, organizational climate and culture, opportunities for promotion within the profession and job satisfaction (Mor Barak et al., 2001; De Hauw, & Greenhaus, 2015). All these factors contribute toward youth care workers being dissatisfied and wanting to leave their place of employment (Mor Barak et al., 2001). The more dissatisfied a youth care worker is with his or her workplace, the more likely the worker will leave his or her employer (Mor Barak et al., 2001).

With improvements in hygiene and medical care, many people are living longer (De Hauw & Greenhaus, 2015). Due to this, employees prolong careers to contribute to the household income, the experience of job satisfaction and wanting to secure a nice pension (Cappelli & Novelli, 2010; De Hauw & Greenhaus, 2015). To help obtain longevity in one profession, employers and employees benefit from having multiple on-job incentives (De Hauw & Greenhaus, 2015). The world is constantly changing along with the advancement in technology (De Hauw & Greenhaus, 2015). One thing that has not changed is what keeps one happy in the profession which in turn produces longevity (De Hauw & Greenhaus, 2015).

A sense of security helps employees remain employable on a job (De Hauw & Greenhaus, 2015; Forrier & Sels, 2003; Greenhaus & Kossek, 2014). Employers that offer ongoing trainings for employees to develop the necessary skills to keep job security and good financial income helps employees to decide whether the employees want to stay employed on that job long-term. Offering opportunities for growth within also creates job retention (De Hauw & Greenhaus, 2015; Forrier & Sels, 2003; Fugate et al., 2004; Greenhaus & Kossek, 2014; Van der Heijde & Van der Heijden, 2006). Creating opportunities for employees to rejuvenate (e.g., access to counseling services, physical fitness classes, working from home) creates a sense of well-being (De Hauw & Greenhaus, 2015; Newman, 2011). Professions where the job and career fit with the core values of the employees create job longevity (De Hauw & Greenhaus, 2015; Greenhaus & Kossek, 2014).

Employers that offer employee incentives to employees benefits the employers as well (De Hauw & Greenhaus, 2015). Employees are likely to produce high levels of productivity when working in a healthy environment (De Hauw & Greenhaus, 2015). Employees remain employable when employees can enhance the skills needed through ongoing trainings and be allowed flexibility when needed (De Hauw & Greenhaus, 2015; Van der Heijde & Van der Heijden, 2006). Employees that are healthy and happy produce long-term performance. This gives employees the necessary energy and drive to work effectively throughout the course of a career (De Hauw & Greenhaus, 2015).

There is a strong correlation between employer engagement and employee performance within the company (Fair, 2018; Kotze, van der Westhuizen, & Nel, 2014). Organizations that exhibit higher levels of employee engagement out-perform other

organizations (Fair, 2018; Li & Liao, 2014; Wiley, 2013). Employees will increase work productivity when engaged by a supervisor (Kotze et al., 2014).

In the United States, 50% of the workers are disengaged due to employers' lack of engagement (Fair, 2018). Employer disengagement costs companies billions of dollars annually (Fair, 2018; Brennan & Monson, 2014). An employee's commitment will be contingent upon ongoing on the job trainings, opportunities for growth and performance evaluations which are all strategies to increase employee productivity (Chabok et al., 2013).

Job Meaning and Satisfaction of Youth Care Workers

Withdrawal behaviors (i.e., tardiness, absenteeism) happens right before one is getting ready to leave their employment (Hulin et al., 1985; Minjarez-Estenson, 2016). Withdrawal behaviors from one or more employees can also produce a toxic work environment (Hulin et al., 1985; Minjarez-Estenson, 2016). Toxic work environments no longer focus on the mission of the organization and can also be costly to the organization (Hulin et al., 1985; Minjarez-Estenson, 2016). Employees that are dissatisfied with their job tend not to perform well intentionally (Hulin et al., 1985; Minjarez-Estenson, 2016).

Employees having organizational support relates positively with job satisfaction. (Eisenberger et al., 1986; Minjarez-Estenson, 2016). An employee that has concern about the welfare of the organization and sense of commitment as well as the organization having a commitment towards the employee will create a job satisfaction environment (Eisenberger et al., 1986; Minjarez-Estenson, 2016). Each employee would like to feel a sense of belonging which helps create employee motivation (Eisenberger et al., 1986; Minjarez-Estenson, 2016). Employees will form perceptions about the

organization that they work for to the degree to which the organization value and care for them (Duke et al., 2009; Minjarez-Estenson, 2016).

Employees that are rewarded with pay raises and professional development trainings will put an effort to increase the organization's mission and goals (Duke et al., 2009; Lynch et al., 1999; Minjarez-Estenson, 2016). An employee will develop a negative attitude and display negative behaviors, if the employee does not feel the organization cares about him or her (Duke et al., 2009; Lynch et al., 1999; Minjarez-Estenson, 2016). An employee work performance is based on how they are being treated at work (Duke et al., 2009; Lynch et al., 1999; Minjarez-Estenson, 2016). Employee job satisfaction consist of supervisor support, fairness, job conditions, and employee rewards (Eisenberger et al., 1986; Minjarez-Estenson, 2016).

The work environment plays an important role whether an organization's turnover will be high (Dix, 2017; Stewart & Terry, 2014). Stressed staff can negatively impact critical elements of the job (Dix, 2017; Eisenberger et al., 1986; Minjarez-Estenson, 2016; Stewart & Terry, 2014). Youth care workers change in attitude could affect their perspective on the quality of their work regarding youth being served (Dix, 2017; Stewart & Terry, 2014). It is important for organizations to invest time and energy into their employees to promote their well-being by exploring avenues of support, training in psychosocial interventions, and adequate supervision (Dix, 2017; Eisenberger et al., 1986; Minjarez-Estenson, 2016; Stewart & Terry, 2014).

Vulnerability to stress can occur when unrealistic organizational expectations are placed on employees (Stewart & Terry, 2014). Both job resources and demands were significant factors regarding employee stress and work engagement (Chirkowska-

Smolak, 2012; Stewart & Terry, 2014). A lack of resources can cause stress for employees and enough resources were found to motivate employees to become invested in their organization (Chirkowska-Smolak, 2012; Stewart & Terry, 2014). Organizations that focus on health and well-being and provides the necessary resources helps reduce employee turnover (Chirkowska-Smolak, 2012; Stewart & Terry, 2014).

Youth care workers hold a pertinent and challenging position in residential treatment because of their job duties (i.e., keeping youth safe, supervising recreational activities, facilitating psycho-educational groups, disciplining, managing crises, transporting, and charting, etc.) (Stapleton et al., 2017; Pazaratz, 2000). Although there are challenges in the profession, some youth care workers can look beyond the challenges and find job satisfaction. When referring to job satisfaction, youth care workers often talk about the special times the workers have with youth or express joy in helping others (Berryman et al., 1994; Catano, 2003; Krueger, 1996; Miller et al., 2018). Working with youth is a helping profession and can also be a self-discovery journey for the youth care worker. Being a youth care worker, personality is the key to making a connection with the youth (Berryman et al., 1994; Catano, 2003; Krueger, 1996; Miller et al., 2018).

Summary

In summary, this chapter contains a brief history of residential facilities, youth care workers and the challenges in the profession. Minimal evidence was found in the literature as to reasons why young youth care workers (ages 21-25) left the profession. Specific search was conducted for evidence of lived experiences that workers had that led to the worker's departure from the profession. The next chapter includes the research

method in detail for exploring the lived experiences of former youth care workers that worked in residential treatment.

Chapter 3: Research Method

This transcendental phenomenological study was conducted to identify the lived experiences of former youth care workers who worked in residential facilities in Eastern Central Florida. Themes were developed from participants' lived experiences related to why youth care workers leave employment within 6 months to 1 year of full-time employment. Using a transcendental phenomenological approach allowed the exploration of the decision-making process related to youth care workers leaving employment. This information may be helpful to residential facility managers and HR staff in making hiring decisions.

In this chapter, I discuss the transcendental phenomenological study and my rationale in choosing the study methodology. Second, I describe my role as the researcher in this study. Third, I explain the participant selection logic for the sample and the use of purposeful snowball sampling. A detailed description of the methodology and the data collection process follow. Data analysis procedures, validity, reliability, and an explanation of ethical concerns make up the rest of the section before I conclude with a summary.

Research Design and Rationale

Interviews were conducted using the in-depth interview method to collect data by focusing on the lived experiences of former youth care workers who worked in a youth residential facility. The in-depth interviewing process allows a researcher to experience a phenomenon of interest (Moerer-Urdahl & Creswell, 2004; Moustakas, 1994). Focusing on the wholeness of an experience is a common feature of human science research (Moerer-Urdahl & Creswell, 2004; Moustakas, 1994).

Approaches used by qualitative researchers include case study, phenomenology, narrative, grounded theory, and ethnography. A researcher uses a phenomenological design to identify the essence of human lived experiences (Moerer-Urdahl & Creswell, 2004; Moustakas, 1994). The phenomenological approach focuses on how realization presents itself and its duties (Giorgi et al., 2017; Moustakas, 1994). The transcendental phenomenological approach was appropriate for this study because this approach helped in delineating an accurate description of the participants' lived experiences as youth care workers who worked in residential facilities. The lived experiences of youth care workers were explored. Conducting a transcendental phenomenological study presented an opportunity for new information to emerge about the meaning of the lived experiences of youth care workers in residential facilities (Freeman, 2016). Themes derived from the lived experiences of former young youth care workers about leaving the workplace may provide leadership personnel with the insight needed to improve the profession and reduce employee turnover. This information, in turn, may be helpful for considering HR and training activities as avenues to address why young employees leave employment.

When individuals start to reminisce about their experience, they are attempting to convey their understanding (Kaam, 1959). This is a necessary step prior to communicating subjective phenomena (Kaam, 1959). Transcendental phenomenological research involves forming an understanding of existing relations that is meaningful through the original description of experience in a particular situation (Moustakas, 1994). In this study, I used the works of Moustakas (1994) to help in understanding the lived

experiences of former youth care workers who worked in residential facilities in Eastern Central Florida.

Role of Researcher

In transcendental phenomenological research, the role of the researcher is to try to access the feelings and thoughts of research participants (Freeman, 2016; Sutton & Austin, 2015). My role as the researcher involved designing the study to address a gap in the literature through an established methodology.

I previously worked with youth care workers like those I recruited for this study when I worked in youth residential treatment facilities. I had the opportunity to work closely with youth care workers in conducting groups, going on trips, and planning activities. My experience had always been from an outside point of view. I had no influence or authority over the potential participants in this study, and the participation of these individuals was voluntary and confidential.

Methodology

For this transcendental phenomenological study, snowball sampling was used. The reasoning for snowball sampling lies in the ability to select study participants who can provide in-depth information of importance to the purpose of the inquiry (Gentles et al., 2015; Patton, 2015). The study participants were African American male former youth care workers 18 to 25 years of age who had a history of working in a youth residential facility. After receiving approval from Walden University's Institutional Review Board and approval from the university administration to conduct the research, based on sampling requirements, I used social media to find research participants. After I had interviewed the first acquaintance who previously worked in a youth residential

facility, that individual passed along the invitation to participate (Appendix A) to other individuals who met the participation criteria. Thus, snowball sampling was used.

Snowball sampling occurs when a qualified participant refers other subjects who fulfill the qualifications defined for the targeted population (Berg, 2006; Dusek et al., 2015).

This sampling method is particularly useful in research on hard-to-reach populations (Atkinson & Flint, 2001; Dusek et al., 2015; Faugier & Sargeant, 1997).

The invitation included information about the study, its purpose, and possible benefits and indicated that participants would receive a \$10 gas gift card. The invitation letter included my contact information to enable potential participants to contact me, at which time I specified the date and time for an interview. The snowball sampling approach was used to find 10 participants.

Before interviews were conducted, a signed informed consent from each participant was required. The informed consent document was sent to each participant via email. The informed consent process was explained to each participant, and time was allowed to review instructions and answer questions. Interviews were conducted via Zoom due to COVID-19.

Instrumentation

Researchers conducting phenomenological studies often use open-ended questions because questions can lead to meaningful answers by participants (Moustakas, 1994). I interviewed 10 participants, all of whom were African American male youth care workers who previously worked in a residential facility but left the workforce within the first year of employment. All participants were asked to explain the on-the-job challenges that they experienced. Interviews were used to understand the lived experiences of

African American male youth care worker participants between the ages of 18 and 25 who previously worked in a residential facility. I met with each potential participant via Zoom, and each participant was emailed an informed consent. Once the informed consent was acknowledged and received from each participant, the interview proceeded. To promote accuracy, each interview was audio recorded. After completion of each interview, I asked the participant for permission to make contact to review the transcript for accuracy to improve internal validity.

Data Collection

For this transcendental phenomenological study, I collected data by interviewing 10 participants using seven structured questions. Scholars use a phenomenological approach to understand different perspectives on various lived experiences through an interview process (Moustakas, 1994). To achieve data saturation, it is necessary to use structured interviews and ask multiple participants the same questions (Bernard, 2012; Fusch & Ness, 2015). My data collection effort involved retrieving information from interviews using such an instrument.

The interview transcription process began by breaking down each interview word by word, modify identifying information and address corrected transcripts. Immediately preparing and transcribing information collected in interviews is important for validity purposes (Garrett, 2018; Trochim, 2006). This process includes interviewing, reviewing content, and evaluating (Garrett, 2018). To ensure the accuracy of the information collected, participants had an opportunity to review their interview transcripts. All participants were emailed their transcripts to ensure accuracy.

Data Analysis Procedures

Researchers conduct data analysis using codes to highlight significant statements and key words from interviews to describe the essence of participants' lived experiences (Freeman, 2016). I used the seven-step modified van Kaam analysis for this transcendental phenomenological study. The data analysis phase used the seven-step process designed by van Kaam and modified by Moustakas (Moustakas, 1994). The seven-step modified van Kaam process involves hierarchical treatment of the interview data (Moustakas, 1994).

Phenomenological is a description of the phenomenon, as well as an interpretive process (Moustakas, 1994). The phenomenological method uses three descriptive steps and four analytic steps. The three descriptive steps require the establishment of narrative descriptions representing the awareness of the individual participants as well as the hope of the participant group as a whole (Moustakas, 1994). The four analytic steps include phenomenological reduction, epoche, synthesis of meanings and essences, and imaginative variation (Moustakas, 1994). Moustakas's (1994) modified van Kaam method consists of seven steps:

1. *Horizontalization*: List expressions relevant to experience.
2. *Reduction and elimination*: Determine the invariant constituents by testing each expression.
3. *Clustering and thematizing the invariant constituents*: The clustered and labeled constituents are the core themes of the experience.
4. *Validation*: Check the invariant constituents against themes from the participants' transcribed records.

5. *Construction of textural description*: Validated invariant constituents and themes are obtained word by word from descriptions of experiences.
6. *Construction of structural description*: Structural descriptions are constructed based on the individual textural descriptions of the experience and imaginative variations.
7. *Construction of textural descriptions for participants*: Textural description of the meaning and essences of the experiences, including invariant constituents and themes, are constructed representing the group as a whole.

The NVivo software program works in conjunction with the seven-step modified van Kaam analysis, which helps in organizing and categorizing data (Moustakas, 1994). Modified van Kaam analysis is often used to gain an understanding of participants' lived experiences when researchers conduct qualitative phenomenological studies (Moustakas, 1994). Van Kaam developed the modified method of analysis to explore lived experiences (Moustakas, 1994). NVivo is used often in qualitative studies because of its ability to automate analytical processes (NVivo, 2014).

Issues of Trustworthiness

For data to be accepted as trustworthy, researchers must demonstrate that data analysis has been conducted in a consistent, precise, and exhaustive manner (Bonsu, 2018; Lincoln & Guba, 1985). Trustworthiness is an important aspect of qualitative research. Establishing trustworthiness in a qualitative study involves four criteria: credibility, transferability, confirmability, and dependability.

Credibility

The organized and coherent presentation of findings of a study that conveys a clear meaning to readers confers credibility (Miles et al., 2014). The reasoning underlying the use of snowball sampling lies in the ability to select study participants who will provide in-depth information of importance to the purpose of inquiry (Gentles et al., 2015; Patton, 2015). Information was collected through interviews with 10 participants. Scholars use the phenomenological approach to understand different perspectives on various lived experiences through the interview process (Moustakas, 1994).

Transferability

The relatedness of the conclusions of a study to other contexts and settings is transferability (Bonsu, 2018; Miles et al., 2014). Participants' lived experiences of being former youth care workers derived from working in different youth residential facilities, rather than one location, increasing the possibility of revealing unique observances or variances. The essence of transferability for a study is that readers relate to, identify, and apply findings of the study to another context and specific environment (Patton, 2015).

Dependability

Dependability refers to the reliability and stability of the methodology used in a study over time, which involve techniques to ensure reproduction and across researchers (Bonsu, 2018; Miles et al., 2014). Thorough examination of raw data and process notes that helped with consistency in data, this study is reliable and replicable (Abdul et al., 2016; Campbell, 1996).

Confirmability

It is important to retain detailed records on a study, including methods of data collection and analysis, to allow an outside auditor to examine the consistency of the research findings, logic, interpretations, and recommendations, which supports confirmability (Bonsu, 2018; Lincoln & Guba, 1985). The identification and removal of biases from interpretations of participant experiences occur through the process of bracketing (Patton, 2015). Comparison and analysis of information from different former youth care workers to provide understanding ensured triangulation, accordingly, supporting confirmability of results (Bonsu, 2018; Patton, 2015).

Ethical Procedures

Ethical procedures were put in place to protect participants. An informed consent document was sent to each participant and acknowledged. Participants' names and identifiable characteristics did not become publicly available. Role names (e.g., Participant 1) were used to replace the real names of the participants. The risks and benefits of the study were acknowledged on each consent document. The participation of each participant was voluntary, and the individuals reserved the right to withdraw from the study at any time. All data have been protected and will be secured for 5 years after publication, after which the research data will be destroyed.

Summary

In this chapter, I outlined the specific design of this qualitative, transcendental phenomenological study, in which I explored the lived experiences of youth care workers in residential treatment. I discussed my role as the researcher, including how I obtained informed consent, protected the confidentiality of the data, and collected and analyzed the

data. This chapter also contained information on the method, rationale for the selection of the method, sampling, data collection and analysis, validity and reliability, and ethical issues, concluding with a summary.

In Chapter 4, the research is summarized, and the findings are reported, with detailed descriptions of the lived experiences discovered through face-to-face interviews with participants.

Chapter 4: Results

I used a transcendental qualitative phenomenological research study to explore the lived experiences of former youth care workers who worked in youth residential treatment facilities but left employment within 6 months to 1 year. I collected data by interviewing 10 former youth care workers via Zoom. I developed interview questions with the intent of eliciting responses from the participants to address the research question. Themes emerged during data analysis describing the participants' experiences and perceptions of their lives as youth care workers. This chapter addresses the purpose of the study, the research question, the setting, demographics of the participants, and the findings.

Purpose of the Study

This transcendental phenomenological study was conducted to understand the lived experiences of former youth care workers who were employed in residential facilities in Eastern Central Florida. I developed themes from participants' lived experiences concerning why they left employment after 6 months to 1 year of full-time employment. Pragmatism is concerned with how one deals with disputes or problems and the way in which truth is assessed in problems (James, 1975). Using a transcendental phenomenological approach permitted exploration of the decision-making process related to youth care workers prematurely leaving employment. This information may be helpful to residential facility managers and HR staff who make hiring decisions, in addition to helping to fill a gap in the literature.

Research Question and Answer

The main research question of this study was the following: What are the lived experiences of young and departed youth care workers in residential settings in decision making about leaving employment?

All 10 participants left employment within 6 months to 1 year of employment due to the issues that emerged as major themes in this study, even though they found enjoyment in working directly with the youth. Participants expressed the need for change in the way that administrators and immediate supervisors handle youth care workers' issues. The participants also expressed that lack of pay and the desire to obtain higher education were contributing factors in their decision to depart early from their employment. Using a phenomenological lens, I sought to capture the essence of the entire lived experience of young, departed youth care workers in residential settings related to decision making about leaving employment, as shown through direct quotations, distinctive themes, and narrative.

In the next section of this chapter, I document general details about the setting and demographics of the study. I also discuss data collection, the data analysis process, evidence of trustworthiness, and the study findings. This chapter concludes with a summary and transition into Chapter 5.

Setting

All interviews took place via Zoom due to the COVID-19 pandemic. Because the state of Florida was undergoing a surge in coronavirus cases at the time of this study (Centers for Disease Control and Prevention, 2019), the interviews took place over Zoom for the safety of everyone involved.

The location from which I could recruit participants was limited to the Eastern Central Florida region. Recruitment of subjects outside this area would have been costly. There are many Florida nonprofit organizations that work toward meeting the goals of rehabilitation and crime reduction (Gonzalez, 2016). There are nonprofit organizations that are funded entirely by private donors (Gonzalez, 2016). In other cases, these organizations rely on a mix of private donors and government funding (Gonzalez, 2016).

Demographics

Youth care workers were the desired participants in this research study because of their implied familiarity with the study's purpose. The role of the youth care worker varies in each residential program in each city and state (Fein, 2014; Johnson, 1982). Youth care workers are the personnel who facilitate the goals of the milieu—not the psychiatrists, therapists, or nurses, who are typically in charge of the therapeutic milieu (Fein, 2014). Youth care workers are with youth 24 hours a day, 7 days a week in a residential setting, so youth care workers serve as the main therapeutic agents (Fein, 2014; Leichtman, 2006). Youth residents' experience and ability to thrive are contingent on the youth care workers' ability to build healthy relationships with them (Fein, 2014; Leichtman, 2006). The model of a residential facility depends on what type of relationship youth care workers form with youth residents (Fein, 2014; Leichtman, 2006). Table 1 is a depiction of the participants' demographics.

Table 1*Participant Demographics*

Participant	Degree or no degree	Time in position	Age	Race
P001	Degree	Less than 1 year	21	African American
P002	No degree	1 year	18	African American
P003	No degree	1 year	22	African American
P004	Degree	9 months	21	African American
P005	Degree	1 year	24	African American
P006	Degree	6 months	24	African American
P007	Degree ^a	Less than a year	20	African American
P008	Degree	11 months	22	African American
P009	Degree	7 months	23	African American
P010	Degree	1 year	22	African American

^a Second degree.

Demographics pertaining to personal information were not included in this study to protect the identity of the participants and to ensure confidentiality. The 10 former youth care workers were African American men between the ages of 18 and 25 years who had previously worked at a youth residential facility. Approximately 40% of the participants were dual majors in college and shared that they had earned two bachelor's degrees. All youth care workers left employment between 6 months to 1 year of employment.

Data Collection

For this transcendental phenomenological study, snowball sampling was used. The reasoning for snowball sampling lies in the ability to select study participants who will provide in-depth information of importance to the purpose of inquiry (Gentles et al., 2015; Patton, 2015). The study included participants who (a) were male former youth care workers, (b) were African American, (c) had a history of working in a youth residential facility, and (d) were 18 to 25 years of age. After I interviewed the first acquaintance who previously worked in a youth residential facility, that acquaintance passed along the invitation to participate (Appendix A) to other prospective participants who met the interview criteria.

The third person whom I interviewed for the study was able to forward invitations (Appendix A) to participate in the study to several people who met the study criteria. I received several messages on my personal cell phone and/or at my Walden University email account from the potential participants. The interviews took a total of me weeks. The interview process was slow due to scheduling conflicts with participants and participants being slow to reach out to me.

The potential candidates identified themselves as former youth care workers who previously worked in a youth residential facility. The potential participants agreed to be interviewed via Zoom due to the COVID-19 pandemic. Based on the potential participants' availability, we scheduled dates and times to conduct interviews. I assigned each participant an alphanumeric reference number to maintain his confidentiality in this study. I identified the first volunteering participant as P001, and each participant

thereafter was assigned the letter “P” and a number in chronological sequence (i.e., P002 ... P010).

Seven-Step Modified van Kaam Analysis Process

The seven-step modified van Kaam process involves hierarchical treatment of interview data (Moustakas, 1994). Phenomenological is a description of the phenomenon, as well as an interpretive process (Moustakas, 1994). The phenomenological method uses three descriptive steps and four analytic steps. The three descriptive steps require the establishment of narrative descriptions representing the awareness of individual participants as well as the hope of the participant group as a whole (Moustakas, 1994). The four analytic steps include phenomenological reduction, epoche, synthesis of meanings, and essences and imaginative variation (Moustakas, 1994). The seven steps in the method are discussed below.

Moustakas’s Step 1: Horizontalization

The first step in Moustakas’s analysis method was implemented by listing and grouping the relevant experience. I transcribed each participant’s data into Microsoft Word documents. I then analyzed each participant’s response that described an element, or horizon, of the lived experience. Irrelevant responses were not included in the phenomena. Each participant’s statement was relevant and treated equally. I listed every quote relevant to the participant’s experience under investigation. A researcher gains a better understanding of each participant’s experience through the horizontalization process (Moustakas, 1994).

I formed codes from direct quotes of participants relative to the research question. Table 2 is a depiction of relevant quotes.

Table 2*Relevant Quotes*

Participant	Relevant quote
P001	I did not feel like I was supported at times by the higher ups. I feel that the administration including corporate was a “good ole boy” system. It was “who you know” kind of thing. If they do not personally know you, it’s like you do not matter.
P002	My responsibilities were safety and security of the youth. As a youth care worker, I was responsible for conducting like skills groups with youth. As a youth care worker, you also serve as a support system especially when the youth are having personal issues with family or each other. A lot of the kids opened up to me.
P009	I resigned because of the pay. I would have stayed if they would have paid what I needed.

Moustakas’s Step 2: Reduction and Elimination

The second step involved reducing the data to the important ideas of the experience. Statements that did not meet these criteria were eliminated. Vague, repetitive statements and data that overlapped were deleted or presented in more descriptive terms. This helped in separating the invariant constituents of the experience from information that was no longer needed. According to Moustakas (1994), like horizontalization, it is important to recognize each statement as a single, important component of the experience. Meaning units are part of the process of phenomenological reduction whereby the researcher can extend listening to creating textures and meaning from the statements made by participants (Moustakas, 1994). Examples of this type of coding

included participants' repetitive statements about how much they enjoyed working with the youth.

Table 3 is a depiction of shared commonalities/experiences.

Table 3

Shared Commonalities/Experiences

Participants	Shared commonalities/experiences
P001	"The kids kept me motivated even during bad times."
P002	"I felt if I could reach one youth, then I am doing a good job, and this kept me motivated."
P003	"I enjoyed telling my life story to the youth to help motivate them, in turn the youth motivated me."
P004	"The youth helped keep me motivated."
P005	"The kids kept me motivated and I believe you got to keep the kids motivated."
P007	"What kept me motivated is that I always wanted to work with kids."
P008	"I dealt with the challenges of the job by staying focus on the job and by staying focus on the youth. I knew this was not my forever job, although I enjoyed helping the youth."
P009	"Interacting with the kids kept me motivated."

Moustakas's Step 3: Clustering and Thematizing the Invariant Constituents

The third step consisted of organizing the invariant constituents into themes related to the participants' lived experiences regarding being former youth care workers who previously worked in a youth residential treatment facility. Data such as items not relating to the former youth care workers' experiences were removed. Themes may be

found in the data once repetitive statements are removed (Moustakas, 1994). After reviewing the data for horizons and meaning units, Moustakas (1994) suggested that researchers notice and report the meaning units found in the responses made by each participant. The unchanging patterns began to result in themes being formed in the research. The themes expressed the experience for each participant. An example of this type of coding appears in Table 2. Table 4 is a depiction of the themes formed.

Table 4

Themes Formed From Interview Questions

Theme	Description	Interview questions
Theme 1	Education	<ol style="list-style-type: none"> 1. Tell me about yourself (where did you grow up, family, educational background) 2. How long did you work in a youth residential setting? What were your responsibilities? 5. How did you deal with the challenges that came with being a youth care worker? How did you stay motivated?
Theme 2	Issues with administration	<ol style="list-style-type: none"> 3. What positive and negative lived experiences of being a youth care worker did you have? 4. Did you feel supported by your supervisor and corporate? If yes, explain how they supported you. If no, explain why you did not feel supported.
Theme 3	Frustrated with low pay	<ol style="list-style-type: none"> 6. What led you to decision to resign after 6 months to a year of employment? 7. What else would you like to share with me about your lived experiences with youth in residential treatment?
Theme 4	Enjoyment from working with youth	<ol style="list-style-type: none"> 3. What positive and negative lived experiences of being a youth care worker did you have? 5. How did you deal with the challenges that came with being a youth care worker? How did you stay motivated?

Moustakas's Step 4: Validations

Following the formation of themes, the next step is checking the invariant constituents against themes of the participants' completed transcribed records. I examined the themes against the dataset to make sure that the themes were a representation of the participants' experiences. According to Moustakas (1994), to illustrate the collection of data, it is necessary to include verbatim examples. These descriptions provide verbatim examples from the transcriptions capturing the experience of the former youth care workers. Excerpts provide a clear understanding of the essence and what the experience means to each participant (Moustakas, 1994). The following narratives present the feelings, thoughts, and descriptions of former youth care workers as well as the elements described firsthand by research participants. Transcendental phenomenological research involves an understanding of existing relations that are meaningful in the original description of experience in a particular situation (Moustakas, 1994). The participants' cognitive thoughts form their perceptions, their realities, and then their truths (Crump, 2018; Luft, 2011).

Moustakas's Step 5: Construction of Textural Description

Validated meaning units and themes are obtained from word-by-word descriptions of the experiences. Quotes were taken directly from the participants' experiences as youth care workers. Using phenomenological research as suggested by Moustakas (1994) allowed me to hear the experiences of former youth care workers who previously worked in a youth residential treatment facility. This allowed me to understand their thoughts, their feelings, and the impact of the experience on each of them. Many of the participants did not feel supported by the administration. Participants

felt that the pay for the position was low for the work required. Participants expressed that they enjoyed the experience of working directly with youth despite the challenges of working in the position.

Conducting a transcendental phenomenological study presented an opportunity for new information to emerge about the meaning of the lived experiences of youth care workers in residential facilities (Freeman, 2016). I utilized an interpretive framework of pragmatism to explore the lived experiences of former youth care workers who worked in residential facilities.

Pragmatism and transcendental phenomenological link with reality and the individual's experience (Hammond, 2013; Moerer-Urdahl & Creswell, 2004; Simpson, 2017). For the participants that had more than a high school education when things became difficult on the job, the participants felt confident in their decision to resign from the youth care worker's position early due to their educational background. Having a higher education made the ability to obtain a higher paying job more achievable. A pragmatic thinker believes in dealing with things sensibly and relies on the lived experiences of the phenomena to make decisions (James, 1975; Moustakas, 1994).

Moustakas's Step 6: Construction of Structural Description

The composite structural description is described by Moustakas (1994) explains the participants' perceptions of the phenomenon as a whole and how the group formed their feelings. Listening to audio recordings repeatedly and rereading written notes taken during the interviews, I developed a composite of the textural information. The participants' full experiences are realized when combining the written notes with the audio recorded notes. Primary interpretation of the data comes from descriptions that

examined the social, emotional, and moral connections between what the participants said. Examples of this type of coding included participants sharing their experiences about the issues with administration, the low pay, and the enjoyment of working directly with the youth. Pragmatism is concerned with how one deals with disputes or problems and the way truth is assessed in problems (James, 1975). The participants' shared experiences regarding issues with their employment led them to make the decision to resign within six months to a year of employment.

Moustakas's Step 7: Construction of Textural Descriptions for Participants

Moustakas (1994) described how this section integrates the meanings derived from the composite textural description as well as the composite structural description. In this step, I merged both the structural and the textural to get an extensive understanding about the phenomenon. After eliminating and reducing the data, themes were formed, and the invariant constituents were created and provided the true experience of the former youth care workers in this research. An example of this coding includes the experiences of working in a youth care worker position which has a high turnover rate, which in turn creates an unstable environment for the youth.

Table 5 is a depiction of formed meanings that led to an early departure from employment for some of the participants.

Table 5*Formed Meanings of Participants*

Participant	Formed meanings of participant
P001	“The work environment was toxic; everyone appeared unhappy. The turnover was high.”
P003	“I wasn’t getting paid enough and program was getting worse. The kids were jumping on staff (physically aggressive).”
P008	“I decided to resign due to the mistreatment from admin and the lack of pay.”
P007	“I left because I wanted to do field work, so I got into probation. The lack of pay was also part of it.”
P004	“I knew that I was going to leave the job soon and I planned to apply for master’s degree programs to attend. I wanted to further my education in order to increase my chances of obtaining better employment in the criminal justice field.”

All participants decided to leave employment in a year or less due to various common reasons. Pragmatism focuses on one’s decision-making process based on their lived experiences. This transcendental phenomenological study helped to understand the lived experiences of young, former youth care workers who previously worked in juvenile residential facilities but prematurely left the field within six months to a year of employment. Using a transcendental phenomenological approach permitted exploration of the decision-making process related to youth care workers prematurely leaving employment. Scholars use a phenomenological approach to understand different perspectives of various lived experiences during the interview process (Moustakas, 1994).

Evidence of Trustworthiness

For data to be accepted as trustworthy, researchers must demonstrate that the data analysis has been conducted in a consistent, precise, and in an exhaustive manner (Bonsu, 2018; Lincoln & Guba, 1985). Trustworthiness is an important part qualitative research. Establishing trustworthiness in qualitative study includes four criteria: credibility, transferability, confirmability, and dependability.

Credibility

Organized and coherent presentation of findings of a study that conveys a clear meaning to readers is credibility (Miles et al., 2014). The reasoning for snowball sampling lies in the ability to select study participants that will provide in-depth information of importance to the purpose of inquiry (Gentles et al., 2015; Patton, 2015). Information was collected through interviews from 10 participants. Scholars use a phenomenological approach to understand different perspectives of various lived experiences during the interview process (Moustakas, 1994).

To promote accuracy of information, participants had an opportunity to review their interview transcripts (Garrett, 2018; Houghton et al., 2013). I forwarded each participant their transcript for verification of accuracy. Two participants responded back expressing satisfaction. Eight participants did not respond back, also indicating satisfaction. I ensured data was in-depth by spending between 30-45 minutes with each participant and by establishing a rapport-driven interview.

Transferability

Relatedness of the conclusion of a study to other contexts and settings refers to transferability (Bonsu, 2018; Miles et al., 2014). To ensure strengthening of

transferability, I followed qualitative study criteria of ensuring that 10 participants provided detailed information to attain saturation. Participants' lived experiences of being a former youth care worker derived from working in different youth residential facilities, rather than one location, increasing the possibility of revealing unique observances or variances. The essence of transferability of study is that readers relate, identify, and apply findings of this study to another context and specific environment (Patton, 2015).

Dependability

Dependability refers to the reliability and stability of the methodology used in the study over time, techniques to ensure reproduction and across researchers (Bonsu, 2018; Miles et al., 2014). Thorough examination of raw data and process notes that helped with consistency in data, this study is reliable and replicable (Abdul et al., 2016; Campbell, 1996). I accurately recorded the process and followed my research plan exactly to ensure dependability. Together with my committee, Dr. Randy Heinrich, and Dr. Garth den Heyer a thorough check for accuracy, was conducted on data collection procedures and findings.

Confirmability

Retaining detailed records of the study, including methods of data collection and analysis to allow an outside auditor to examine consistency of research findings, logic, interpretations, and recommendations refers to confirmability (Bonsu, 2018; Lincoln & Guba, 1985). To maintain confirmability in this study I employed bracketing. Identifying and removal of biases from interpretation of participants' experiences is bracketing (Patton, 2015). Comparison and analysis of information from different former youth care

workers to provide understanding ensured triangulation, accordingly confirmability of results (Bonsu, 2018; Patton, 2015).

Results

The research problem was specified in the research question. The research question addressed, what are young and departed youth care workers in residential settings lived experiences in decision making about leaving employment? In this study, I found that former youth care workers left employment within six months to a year due to issues with administration and low pay. However, participants expressed joy from working directly with the youth. Youth care workers experienced emotions such as stress, frustration, and happiness while working as a youth care worker in a youth residential facility. The findings were supported by modified van Kaam. Data were separated by expressions, words, phrases, or emotional responses that were related to lived experiences of working as a youth care worker in a youth residential facility. The emerging themes of the lived experience were college educated, lack of pay, issues with administration and love for working directly with youth. In conjunction with modified van Kaam, I used NVivo10 software developed by QSR International designed for organizing and managing qualitative data.

Summary

In summary, 10 former youth care workers that previously worked in a youth residential treatment facility were interviewed. The participants described their lived experiences while working at a youth residential treatment facility. Chapter 5 includes the study results, conclusions, and recommendations.

Chapter 5: Summary, Conclusions, and Recommendations

In this chapter, I summarize the key findings of this study, provide an interpretation of the findings, report on the limitations of the study, make recommendations for future research, and describe the study's potential impact for positive social change. The research question driving this study was as follows: What are the lived experiences of young and departed youth care workers in residential settings in decision making about leaving employment? Through purposive snowball sampling, I recruited 10 men who participated in structured phenomenological interviews. Data analysis followed the seven-step modified van Kaam method, leading to themes and a synthesis of the participants' lived experiences.

Rich descriptions of this phenomenon conveyed the voices of these men and what it is like to work in a youth residential treatment facility. Key findings concerning the essence of the experience included four major themes: education, issues with administration, low pay, and enjoyment from working with youth. Each major theme was supported by direct quotations. The essence of the experience was captured in short narrative form. Themes from lived experiences of former young youth care workers that prompted departure from the workplace may provide leadership personnel with insight necessary to improve the profession and reduce employee turnover. This information, in turn, may assist with developing HR and training activities geared toward addressing the reasons that young employees leave employment in this field.

To achieve the purpose of discovering and describing the phenomenon, I conducted interviews following the structured interview guide (Appendix B), which generated all data to answer the research question and describe the former youth care

workers' experiences of working in a youth residential treatment facility and why the youth care workers left employment within 6 months to 1 year of employment. The study analysis concluded with a synthesis of the participants' experience demonstrating the structure and essence of that experience, as discussed in the Chapter 4 presentation of the findings.

Interpretation of the Findings

The results of the literature review in Chapter 2 revealed the complexities of the youth care workers' position and what leads to early departure. Issues that can relate to turnover and lack of commitment to the job are lack of opportunities for raises, stress, and lack of growth within the company (Smith, 2018). The position of a youth care worker is an important position that can be difficult at times, especially for young youth care workers (Moses, 2000; Pazaratz, 2000; Stapleton et al., 2017). Supervisory support plays an important role in the retention of youth care workers (Lizano et al., 2014). When supervision is effective for youth care workers, especially newly hired employees, youth care workers will experience commitment to their employer and job satisfaction (Lizano et al., 2014; Mallon & Hess, 2014). All discussions in this section will relate back to answering the single research question concerning the lived experiences of young and departed youth care workers in residential settings in decision making about leaving employment. I will interpret the key findings for this study and discuss how the findings relate to the literature review.

Pragmatism focuses on individuals' decision-making process based on their lived experiences. Transcendental phenomenology focuses on a person's truth based on the person's reality. The 10 participants who were interviewed shared their experience as

youth care workers and what led to their decision to resign after 6 months to 1 year of employment.

Training and Education

The literature regarding training for youth care workers indicates that employees are required to do 80 hours of online training, 32 hours of Protective Action Response (PAR), and 8 hours of cardiopulmonary resuscitation (CPR) training. Trainings are usually completed before a youth care worker can be in direct contact with youth. Due to the shortage of staff in some residential treatment facilities, youth care workers at times are placed in positions providing direct care to youth before completing all trainings. Youth care workers who are placed on the floor prior to completion of trainings are still required to complete the trainings, although the trainings may take longer to complete.

In reviewing past research, I found a dearth of information regarding specific events experienced by youth care workers that would account for or be correlated with youth care workers' early departure from the profession. Education was not one of these events. However, education led to the emergence of a theme in this study. Although no formal education is required to fulfill the role of a youth care worker, eight out of the 10 participants whom I interviewed had or was working on a Bachelor of Science degree or higher at the time of working in a youth care worker position. Individuals have various motives when making the decision to invest in a higher education (Belfield et al., 2020). Education acquired at early stages can open opportunities for better career attainment at later stages (Belfield et al., 2020). The eight participants expressed feeling confident at the end of their youth care worker career due to having the ability to pursue better career opportunities because of their education status.

Issues With Administration

Issues that were presented in Chapter 2 as associated with supervisors and administration surfaced during participants' interviews. Social support is particularly important in the human service field. When workers have an unsupportive supervisor, they may feel that their only recourse is to quit because of emotional stress (Lizano et al., 2014; Maslach, 1982; Maslach et al., 2001; Yung, 2012). Receiving validation for their accomplishments and having a supportive supervisor can reduce workers' stress (Lizano et al., 2014; Maslach, 1982; Yung, 2012). Supervisor support may be more important than coworkers' support in the prevention of turnover (Lizano et al., 2014; Maslach et al., 2001; Yung, 2012). A supportive and effective supervisory experience by way of emotional and social support, assigned tasks, and assisting youth workers through the stresses of the job can provide youth care workers with a sense of protection from the demands of the job as well as improvement in their overall well-being (Lizano et al., 2014).

The participants described their relationship with their supervisor in ways that led to the emergence of a theme of issues with administration. The participants stated they did not feel supported by their supervisor and corporate. P010 elaborated and stated that he had a good relationship with his supervisor, but not with corporate. P010 left after 1 year of employment. The participants stated that they felt that their supervisor and/or corporate did not care to listen to their concerns about the job, that their supervisor and/or corporate did not put their safety first, and that they felt that the system was set up as a "good ole boy" system.

Supervisors tend to naturally lead from their individual cultural standpoint and find it uncomfortable to move out of their comfort zone (Hair & O'Donoghue, 2009; Lusk et al., 2017). As supervisors, many are taught to focus on obligations, assignments, and performance and may exclude other considerations, including interpersonal communication (Lusk et al., 2017). The participants' shared experience included a perception that this was a lasting phenomenon. The participants' experience with their supervisor was another factor that led to the decision to resign early from employment as a youth care worker.

Pay

Another common theme that rose from the shared experiences of the participants was the low pay received from employment as a youth care worker. Previous research indicated that the pay for youth care workers in the human service field tends to be low and that youth care workers' attitudes toward their work are influenced by the working conditions in residential treatment facilities (i.e., job satisfaction and support; Braxton, 1995). Employees who are rewarded with pay raises and professional development trainings will put effort toward supporting the organization's mission and goals (Duke et al., 2009; Lynch et al., 1999; Minjarez-Estenson, 2016). All participants expressed that one of their main reasons for resigning within 6 months to 1 year of employment was "lack in pay."

Enjoyment

Based on the participants' description of their experience of the youth, the word *enjoyment* appeared meaningful to their perception of the phenomenon. This phenomenon is new compared to the literature in Chapter 2. Participants stated that they

stayed focused on the youth to help deal with the challenges of the job. Participants expressed enjoyment in working with the youth directly. P009 expressed that he would not trade the experience of working with youth for anything in the world, though he resigned from employment after working only 7 months.

Youth care workers provide direct care in the lives of at-risk youth (Catano, 2003). These workers play a key role in the delivery of services to youth in residential facilities (Catano, 2003; Miller et al., 2018). Providing nurturing, discipline, social skill development, safety, consistency, and predictability in daily routine are the responsibilities of a youth care worker (Catano, 2003; Miller et al., 2018). Youth care workers' profession consists of structure and process (Berryman et al., 1994; Catano, 2003; Miller et al., 2018). Youths' experience and ability to thrive are contingent on youth care workers' ability to build healthy relationships with them (Fein, 2014; Leichtman, 2006; Smith et al., 2017).

In sum, this study captured and supported many of the ideas reported in previous youth care worker studies. The new theme of enjoyment from working with youth was discovered in the participants' shared experience. By asking open-ended questions, I encouraged participants to share as much or as little as they chose, which they did without signs of hesitation. All 10 participants left employment within 6 months to 1 year of employment due to the major themes they expressed, although enjoyment was found from working directly with the youth. Participants expressed the need for change in the way that administration and immediate supervisors handle youth care workers' issues for those looking for longevity in the position. Using a phenomenological lens, I captured the essence of the entire lived experience of young and departed youth care workers in

residential settings in decision making about leaving employment through direct quotations, distinctive themes, and narrative.

Limitations of the Study

This study had several limitations. First, the sample was limited to African American men. Although this study was about former youth care workers' experiences in residential treatment facilities, the sample of participants does not represent men or women of other racial or ethnic groups. Therefore, findings from this study may not be transferable to other racial, ethnic, or culturally diverse populations. Additionally, participation was limited to former youth care workers with 6 months to 1 year of employment experience who were between the ages of 18 and 25 years. Generalizability of the findings may also be limited because the sample was drawn only from Eastern Central Florida.

Recommendations

The results of this study revealed that although previous research on this subject was authentic, there continues to be a need for further research. Several research studies have been conducted on former youth care workers' experiences in residential treatment facilities; however, not many have addressed the positive aspects of working in the position of a youth care worker. Participants expressed enjoyment from working with the youth directly, despite the challenges of the job. Employees who are rewarded with pay raises and professional development trainings will put effort toward advancing the organization's mission and goals (Duke et al., 2009; Lynch et al., 1999; Minjarez-Estenson, 2016).

Based on the evidence, recommendations that emerged from this study included corporate offering additional annual professional development courses for supervisors and managers, twice-a-year symposia to address the concerns of staff, increases in pay, and cross trainings for staff to promote employee longevity in the company.

Replicating this study by employing the same methods with a different researcher and group of participants would be beneficial, in that it could validate this study's findings, add to the qualitative data available to other researchers, and reveal new understandings. Research conducted with a more diverse group of participants could involve consideration of culture, ethnicity, and geographic location. The age range of the participants could be expanded to 18 to 55 years, and participants could include individuals who worked in the profession for more than a year. This could supply researchers with a wealth of information on the subject.

Implications

In the United States, over 60,000 youth are held in residential facilities or jails daily (Mendel, 2011). Youth care workers have direct and frequent contact with the youth in residential treatment, and due to this, youth care workers' positions are essential and impactful (Fein, 2014; Moses, 2000; Schaefer & Mills, 1975). This research study explored the lived experiences of former youth care workers who worked in residential treatment facilities.

The insights put forward by this study offer an opportunity to enact social change at the individual and corporate levels. Youth care workers could conduct their job responsibilities in a more confident manner and feel fully supported by their administration. On the corporate level, increased demand for retention of youth care

workers could yield cost savings and improve the quality of services for at-risk youth.

The information obtained from the former youth care workers' in this study may be used to emend policies associated with youth care workers' positions.

The following emerged from the findings of this study:

1. Youth care workers lack the support of their supervisors and administration.
2. Administration needs to ensure adequate pay, annual raises, and pay increases for youth care workers who obtain higher education while working in their positions to help maintain retention.
3. The youth care workers in this study enjoyed working directly with the youth, despite the challenges of the job.

The literature suggests that while personal life factors may affect why youth care workers leave their jobs, researchers have discovered that these workers' professional life has a larger contribution toward turnover in the human service field (De Hauw & Greenhaus, 2015; Mor Barak et al., 2001). Professional life includes organizational factors such as supervisory support, salary and benefits, availability of resources, trainings, organizational climate and culture, opportunities for promotion within the profession, and job satisfaction (De Hauw & Greenhaus, 2015; Mor Barak et al., 2001). All of these factors contribute toward youth care workers being dissatisfied and wanting to leave their place of employment (Mor Barak et al., 2001). Pay for youth care workers in the human service field tends to be low, and youth care workers' attitudes toward their work are influenced by the working conditions in residential treatment facilities (i.e., job satisfaction and support; Braxton, 1995).

Additionally, in literature referring to job satisfaction, youth care workers often talk about the special times they have with youth or express joy in helping others (Berryman et al., 1994; Catano, 2003; Krueger, 1996; Miller et al., 2018). Those who work with youth occupy a helping profession, and this work can be a self-discovery journey for the youth care worker. For a youth care worker, personality is the key to making a connection with youth (Berryman et al., 1994; Catano, 2003; Krueger, 1996; Miller et al., 2018).

A pragmatic thinker believes in dealing with things sensibly and relies on lived experiences of phenomena to make decisions (James, 1975; Moustakas, 1994). The 10 participants decided to end their employment early with their employer due to their lived experiences as youth care workers in a youth residential setting. Recommendations for this study include corporate offering additional annual professional development courses for supervisors and managers, twice-a-year symposia to address the concerns of staff, increases in pay, and cross trainings for staff to promote longevity in the company.

Conclusion

The intent of this research was to capture the lived experiences of former youth care workers who previously worked in a residential treatment facility. This research study accomplished this and captured the essence of this unique phenomenon of being a youth care worker. The findings may contribute to awareness of the need for change that impacts youth care workers' profession and the youth they serve. The former youth care workers enjoyed working directly with the youth despite the challenges of the profession. It was necessary to investigate and document this because such information is lacking in the existing literature.

This research study contributes to existing literature concerning the growing and significant issues of youth care workers' positions. This research may encourage positive change by providing a foundation for adequate pay and supportive supervisors to foster healthy supervisee–supervisor relationships in the profession, thereby helping to maintain employee longevity in the position.

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Appendix A: Invitation Email to Participate in the Research Study

Dear (former youth care worker),

I am conducting interviews as part of a research study to increase the understanding of youth care worker lived experiences in residential treatment facilities.

You are invited to be involved in the study if you are:

- (A) a male former youth care worker
- (B) African American
- (C) have a history of working in a youth residential facility
- (D) 18 to 25 years of age.

The interview takes 30 to 45 minutes and is very informal. I am simply trying to capture your lived experience of being a former youth care worker. Your responses to the questions will be kept confidential. Each participant will be assigned a number to help ensure that personal identifiers are not revealed during the analysis and write up of findings. Each participant will receive a \$10.00 gift card. The benefit of this research is that you will be helping increase the understanding of why youth care workers leave employment within 6 months to a year. This information should help to better address the problems in the youth care worker's profession.

If you are willing to participate and for more information regarding the study, please contact me at email: Sonja.johnson2@waldenu.edu

Thanks!

Sonja Johnson, PhD Candidate

Appendix B: Interview Questions

- Tell me about yourself (where did you grow up, family, educational background)
- How long did you work in a youth residential setting? What were your responsibilities?
- What positive and negative lived experiences of being a youth care worker did you have?
- Did you feel supported by your supervisor and corporate? If yes, explain how they supported you. If no, explain why you did not feel supported.
- How did you deal with the challenges that came with being a youth care worker? How did you stay motivated?
- What led you to decision to resign after 6 months to a year of employment?
- What else would you like to share with me about your lived experiences with youth in residential treatment?