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Predictors of Direct Support Professional Turnover at Residential Facilities for Intellectually–Developmentally Disabled Individuals

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Abstract

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by

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Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

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Abstract

Turnover continues to be a problem for residential settings that provide services to intellectually–developmentally disabled (IDD) individuals in the United States. The annual turnover rate in residential facilities serving IDD individuals is 45%. Close to 35% of direct support professionals (DSPs) leave their positions in fewer than 6 months and 22% within 6–12 months. Previous studies of healthcare nurses working in hospitals, nursing homes, and other healthcare settings have found that different factors, such as stress, autonomy, or lack of recognition, contribute to turnover. These factors have not been studied in DSPs working in residential facilities. This quantitative, multiple logistic regression analysis aimed to find if a relationship existed between the independent variables of independence, stress, and employee recognition and the dependent variable turnover in 89 residential settings supporting IDD individuals. The results from this study indicated no statistical significance between stress autonomy, recognition, and turnover in residential settings, demonstrating that the results do not support preceding research regarding stress, autonomy, recognition, and turnover as possible factors for turnover in those facilities. This study suggested that Kalleberg's theory of job satisfaction cannot be solely attributed to intrinsic perceptions of DSPs working in residential facilities. The study suggested that further research is needed to understand how stress, autonomy, and recognition may influence turnover in residential facilities for IDD individuals. The potential positive social change impact of the current study is to bring to the attention of human services agencies that DSPs' perceptions influence employee turnover, which affects their services for IDD individuals.

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Dedication

To Julissa: You made me realize the importance of providing support and understanding to mental disorders at a young age. This dissertation is dedicated to Alexis and Joe. Thank you for all the years of encouragement in completing my degree.

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Chapter 1: Introduction to the Study

Introduction

Across the United States, residential facilities for intellectually–developmentally disabled (IDD) individuals face unprecedented turnover rates. Many factors influence turnover rates, including job stress and low pay rates as the most common causes (Houseworth et al., 2020; Steinmetz et al., 2014). Turnover has been studied in mental health settings; however, no study has focused on residential facilities for IDD individuals. In residential facilities servicing IDD individuals, turnover is an increasing problem for many human services agencies nationwide (Houseworth et al., 2020; Steinmetz et al., 2014). Researchers have studied turnover in residential facilities and are still attempting to identify the factors related to this phenomenon (see Alhamwan et al., 2015).

The results of this study may provide information to human services agencies servicing IDD individuals by addressing the personal perceptions from direct support professionals (DSPs) related to autonomy at work, occupational stress, and work recognition as predictors of staff turnover at residential facilities for IDD individuals (see Klemm, 2017). The information presented in this study may help human services agencies develop retention programs of DSPs working with IDD individuals in residential settings. Understanding some of the staff's perceptions of autonomy at work, occupational stress, and work recognition could enhance the retention of DSPs working for human services agencies servicing IDD individuals.

In previous studies conducted from nurses working in hospitals, nursing homes, and other healthcare settings, researchers have found that different factors, such as stress, working independently without support, or the lack of recognition of their performance, contribute to turnover in those settings. The research demonstrated a high correlation between employees not having supervisory support, high stress at work, and turnover (Clausen et al., 2014). Dyrbye et al. (2017) found in a cross-sectional study of 10,000 registered inpatient nurses and other health care professionals a high prevalence of a lack of supervisory support, a lack of recognition, performance at work, and turnover. These factors have not been studied in relation to DSPs working in residential facilities servicing IDD individuals. In this quantitative multiple logistic regression analysis, I aimed to determine whether a relationship exists between the independent variables of autonomy at work, occupational stress, and work recognition and the dependent variable of turnover for residential DSPs working with IDD individuals. The results of this study may have implications for positive social change by providing data to enable policymakers, human services agencies, and residential facilities servicing IDD individuals to address DSP retention.

Background

Researchers have long noted high rates of turnover in DSPs supporting individuals with IDD (Bogenschutz et al., 2015). In the last decade, attempts have been made to understand turnover rates and implement different services to strengthen DSPs' skills to reduce turnover. The services implemented by human services agencies to reduce turnover assume that the more competent the DSP, the more likely they are to

remain employed in those facilities (Bogenschutz et al., 2015). However, Bogenschutz et al. (2015) did not consider personal factors such as autonomy at work, occupational stress, and work recognition. The current literature regarding turnover in residential facilities servicing IDD individuals has not addressed this problem.

Since the formation of services provided to people with IDD and the foundation of the first institutions housing IDD populations in 1833, different methods for meeting the needs of that population have been developed (Bogenschutz et al., 2015). Approaches have been experimental depending on the stages of psychology, psychiatry, and general medicine (Bogenschutz et al., 2015). Professionals in those areas relied on DSPs to implement and execute those experimental approaches (Noll, 2018). However, different factors need to be included when studying turnover in residential facilities; these factors must include the intrinsic perceptions DSPs experience when considering leaving an agency.

DSPs are essential to health outcomes and patient care for IDD individuals. The care DSPs provide to a person with IDD has been described as the "backbone of the American health and social service system" (Bogenschutz et al., 2014, p. 183). Bogenschutz et al. (2014) suggested that the supports a DSP offers to IDD populations are essential for human services agencies to continue providing essential services needed for protected populations to thrive in society.

A decrease in turnover has been observed when nonprofit community agencies change to for-profit community agencies (Currie-Patterson et al., 2018). The reduction in turnover has been attributed to job stability, increased wages, and improved benefits

(Currie-Patterson et al., 2018). Although a significant reduction in turnover after the change was observed, researchers continue to find that turnover is not only a result of job stability or better benefits. Turnover has been investigated in hospitals, nursing homes, and mental health clinics to find other possible causes.

Researchers started to study turnover among DSPs from a different perspective, as wages, job security, and benefits were initially seen as the only contributors to turnover (Gray & Muramatsu, 2013). Turnover started to be studied from the DSPs' perspective concerning stressors related to the work environment, vocational settings, and the lack of work independence (Gray & Muramatsu, 2013). Those areas influence intentions to quit among nurses and nurse assistants working directly with IDD populations (Gray & Muramatsu, 2013). Researchers have acknowledged the relationship between personal and work-related factors associated with turnover in healthcare (see Clausen et al., 2014; Estryn-Behar et al., 2010; Mitchell & Braddock, 1994; Selden, 2010). However, little research has been conducted regarding interpersonal factors such as autonomy at work, occupational stress, work recognition, and their effects on turnover in residential facilities servicing IDD individuals.

Galletta et al. (2011) described autonomy at work as "the extent to which a job allows freedom, independence, and discretion to make decisions, schedule work, perform activities and choose procedures" (p. 7). The authors found that highly motivated employees depend on their efforts, responsibilities, failures, and successes at work. Autonomy is the capacity in which the employee is responsible for their performance at work.

DSPs experience work stress. Occupational stress occurs when the working conditions are detrimental to the worker mentally, physically, or socially (Galletta et al., 2011). Work stress is experienced when workers perceive work requirements to be greater than their own resources and capabilities (Tziner et al., 2015). Work stress is a recurrent problem for human services agencies, as the stress level of DSPs negatively affects job performance and quality. Stress at work can be perceived in long working hours, low wages, limited opportunities for advancement, and work–life imbalance (Abdullah et al., 2016; Bossink et al., 2019; Clausen et al., 2014). DSPs experience stress at work due to not having ideal working conditions. Factors such as more extensive work requirements than their own resources and capabilities are capable of accommodating, long working hours, low wages, limited opportunities for advancement, and work–life imbalance influence how DSPs perceive stress at work (Abdullah et al., 2016; Bossink et al., 2019; Clausen et al., 2014; Tziner et al., 2015).

Recognition at work refers to appreciation and value in the workplace a DSP receives (Asegid et al., 2014). Asegid et al. (2014) emphasized that promoting and advocating for a culture of recognizing workplace efforts will help employee retention. The authors explained that workers who feel appreciated are most likely to stay in the organization. Recognition is how a worker perceives the company appreciates their work. The feeling of being recognized at work helps an employee improve their efforts and performance (Asegid et al., 2014).

Problem Statement

Residential facilities for IDD individuals face unprecedented turnover rates (Steinmetz et al., 2014). The factors influencing turnover rates, including job stress and low pay rates, have been studied in mental health settings, hospitals, and nursing homes. However, I found no studies that were focused on residential facilities for IDD individuals. DSPs leave their jobs within the first 6 months at residential facilities (Steinmetz et al., 2014). Researchers have studied turnover in mental health settings and are still attempting to identify employee turnover factors (see Alhamwan et al., 2015).

Human services agencies rely on DSPs' services and support to IDD individuals. Turnover in DSPs is an increasing problem for the long-term services and supports industry (President's Committee for People With Intellectual Disabilities, 2017). The annual turnover rate in residential facilities servicing IDD individuals is 45%, with a range of 18%–76% (President's Committee for People with Intellectual Disabilities, 2017). Close to 35% of DSPs leave their positions in less than 6 months and 22% within 6–12 months (President's Committee for People with Intellectual Disabilities, 2017). In 2015, nearly 4.5 million DSPs worked in residential facilities servicing IDD individuals in the United States (President's Committee for People with Intellectual Disabilities, 2017). This number is expected to grow yearly between now and 2030 (Alhamwan et al., 2015; Bogenschutz et al., 2014; Currie-Patterson et al., 2018). Nationwide, the cost of turnover in DSPs is estimated at $2,338,716,600 (Alhamwan et al., 2015; Bogenschutz et al., 2014; Currie-Patterson et al., 2018). Researchers have noted that turnover in DSPs has had an adverse impact on the quality of services provided, the outcomes from those

services, and the length of treatment involved for the care of IDD individuals (see Kazemi et al., 2015; Van der Meer et al., 2018).

Intrinsic and extrinsic factors, such as autonomy at work, occupational stress, and work recognition in nursing homes, hospitals, and other healthcare settings are the principal contributors to turnover among workers in those settings (Clausen et al., 2014; Dyrbye et al., 2017; Enns et al., 2015; Estryn-Behar et al., 2010; Joo et al., 2015; Mitchell & Braddock, 1994; Selden, 2010; Van De Voorde et al., 2016; Yanchus et al., 2017). The personal perceptions of a DSP working in residential facilities servicing IDD individuals have not been considered for turnover.

Researchers have found that the most common reasons for turnover in residential facilities for IDD individuals are low wages, restrictive health benefits, higher demands, higher levels of stress, and the lack of employee retention programs for the staff working in these facilities. In this study, I focused on filling a gap in the literature by addressing DSPs' perceptions of autonomy at work, occupational stress, and work recognition as predictors of staff turnover at residential facilities for IDD individuals (Alhamwan et al., 2015; Bogenschutz et al., 2014; Currie-Patterson et al., 2018; Klemm, 2017).

Purpose of the Study

A quantitative, predictive research design was used with logistic regression analysis to measure the relationships between the independent and dependent variables in this study. Through this type of design, the assertions of earlier studies were verified regarding the significant relationship between DSPs' perceptions and turnover in

residential facilities. The purpose of this quantitative study was to determine whether autonomy at work, occupational stress, and word recognition have a relationship with turnover of DSS working in residential facilities for IDD individuals.

Research Questions and Hypotheses

The hypothesis for this study was that turnover among DSPs working for residential facilities for IDD individuals is influenced by autonomy at work, occupational stress, and work recognition. Statistical tests, including binary logistic regression, were used to measure this relationship and to address the following research question and null and alternative hypotheses.

RQ: To what extent do autonomy at work, occupational stress, and work recognition have a relationship with turnover among DSPs employed by or who have left employment in a residential facility for IDD individuals?

H_0: There is no significant relationship between the predictor variables of autonomy at work, occupational stress, work recognition, and the outcome variable of turnover, either in linear combination or uniqueness.

H_A: There is a significant relationship between the predictor variables of autonomy at work, occupational stress, work recognition, and the outcome variable of turnover in linear combination or uniqueness.

Framework

For this study, a theoretical framework was incorporated from existing academic literature. The theoretical framework for this study was by Kalleberg (1977), reviewed by Kalleberg and Marsden in 2019. Kalleberg's (1977) original theory of job satisfaction

proposed a framework based on three dimensions used to assess job satisfaction: (a) the employee's intrinsic characteristics, (b) the employee's extrinsic characteristics that determine job satisfaction, and (c) resource adequacy. Intrinsic characteristics are those associated with how an employee can develop and use self-direction at work. Extrinsic characteristics of the employee are those perceived as recognition of their performance at work. The last dimension is resource adequacy, which refers to the many components of employee resources at work, such as help from coworkers, adequate equipment needed for job performance, supervisory assistance, and support. Kalleberg (1977) suggested that the absence of any of the three characteristics for job satisfaction could negatively impact job performance.

In a review of the theory of job satisfaction proposed by Kalleberg (1977), Kalleberg and Marsden (2019) examined the differences in work values and the context of the intrinsic experiences that reflect the experiences gained during work history. Kalleberg and Marsden proposed two different psychological processes influencing work values: reinforcers and problematic rewards. Reinforcers are those processes that help a worker value the recognition received for their work. Problematic rewards are those incentives that make the worker uncertain of obtaining new achievements while taking for granted what is already achieved (autonomy at work and work stress).

Nature of the Study

The objective of this study was to establish an understanding of the relationship between the independent variables of autonomy at work, occupational stress, and work recognition and the dependent variable of turnover in DSPs in residential facilities for

IDD individuals. In this study, I aimed at associating these variables with one another and measuring these associations (Creswell et al., 2007). The nature of this study was quantitative, using binary logistic regression analysis.

Quantitative research was consistent with understanding whether autonomy at work, occupational stress, and work recognition have a relationship with turnover in DSPs in residential facilities for IDD individuals. Regression methods within data analysis described the relationship between a response variable and one or more explanatory variables. The outcome variable in logistic regression was binary or dichotomous (Wright, 1995). Binary logistic regression analysis allowed the establishment of the relationship and described the association between the variables of autonomy at work, occupational stress, and work recognition predicting turnover. The participants in this study were DSPs either working for or who have left employment with the agency.

To better understand turnover in this study, turnover was measured whether the DSP is still working for the agency after 6 months of employment. Occupational stress was measured using the Professional Quality of Life Measure (ProQOL5; Stamm, 2005) to determine the impact of stress on health professionals dealing with IDD individuals. The work values inventory (WVI; Super, 1970) was used to measure autonomy at work and work recognition. Super (1970) developed the WVI to measure the values people seek to develop or increase at work. The WVI was initially designed to analyze the values and causes of vocational choices of students before entering educational programs and the different values a person develops throughout their life span. The WVI measures a

person's values as the foundation of their career development and assists in understanding the values in a career or the interest a person has in a job (Chauvin et al., 2011). The WVI (Super, 1970) is an assessment that includes 15 work values: (a) creativity, (b) management, (c) achievement, (d) surroundings, (e) supervisory relationships, (f) way of life, (g) security, (h) associates, (i) aesthetic, (j) prestige, (k) independence, (l) variety, (m) economic return, (n) altruism, and (o) intellectual stimulation (Super, 1970). For this study, the subscale of independence was used to measure autonomy at work, and the subscale of achievement was used to measure recognition at work.

The participants in this study were DSPs currently working in residential facilities or former DSPs who have left jobs in residential facilities. An email was sent to the director of a human services agency located in central New York to access DSPs to participate in the study. The email requested that DSPs who have worked or are working in residential settings participate in the study. The data used for this study were collected using surveys. Compared with other methods of collecting data, such as focus groups and interviews, surveys are more effective in data collection because they allow for a large sample size to participate in a research study. Previous researchers have also used surveys to collect data to evaluate the connection between occupational stress and employee recognition from mental health staff in hospitals and nursing homes (Dorociak et al., 2017; Weiss et al., 2005).

Definitions

In this research, the following terms were used.

Autonomy at work: According to Super (1970), a valuable resource that fosters an employee's motivation to perform well in a designated task. Autonomy at work promotes an employee's well-being by providing the satisfaction of knowing they are trusted in completing a task. When employees are trusted to work independently, they develop a sense of pride and take ownership of the performed task. Paradoxically, autonomy at work is embedded in the relationship between the employee and employer and hinges on the employer's willingness to grant such trust (Gatti et al., 2019).

Direct support professional (DSP): The New York state office for people with developmental disabilities (OPWDD, 2019) defines DSPs as "the core of New York's system of supports for individuals with developmental disabilities" (p. 8). DSPs are individuals who work with IDD populations, assisting them in achieving full and meaningful lives in the community. A DSP's responsibilities are technical and value-based skills that provide a life-changing experience for the IDD individual they support. DSPs are responsible for supporting IDD individuals with activities for daily living, such as medication administration, meal preparation, housekeeping, recreational activities, and many other activities that, due to these individuals' disability, they do not accomplish by themselves (OPWDD, 2019).

Intellectual–developmental disabilities (IDDs): IDDs are disorders that, in most cases, start at birth. IDDs have a negative effect on an individual's physical, intellectual, and emotional development. Intellectual disability involves impairments of general mental abilities that affect adaptive functioning in three domains or areas: the conceptual domain, the social domain, and the practical domain. Developmental disabilities refer to

those conditions that impair an individual's physical, learning, language, and behavior abilities. These conditions start at a person's developmental stage. Developmental disabilities are lifetime disabilities (Heller, 2017).

Occupational stress: Stamm (2005) defines occupational stress as the different stress processes an employee experiences at work due to the responsibilities, demands, environment, peers, management, or any other perceived pressure. Occupational stress is the psychological response a worker experiences when a task or demand exceeds their knowledge or ability to cope with the presented situation. Occupational stress can be attributed to an employee's perception of having little to no support at work or limited control over work practices.

Residential facilities: For IDD individuals, facilities that provide medical or supervision care 24 hours a day, all year. Residential facilities emphasize community involvement and recreational activities (Bogenschutz et al., 2014).

Turnover: When a DSP either quits or is let go from an agency. There are two types of turnover: voluntary and involuntary. Voluntary turnover refers to the employee deciding to leave the job for personal reasons. Involuntary turnover refers to the many employer-related reasons influencing the employee to leave their job. Involuntary turnover can be understood as the employer deciding to let the employee go.

Work recognition: Super (1970) defines work recognition as the employer acknowledging an employee for their performance, behavior, efforts, and accomplishments at work. The employee is also recognized for the organizational values and goals achieved throughout their work performance. Work recognition encourages the

employee to repeat good performances and can be understood as the employee's motivation to thrive at work. The issue of motivation relies on how the employee is recognized or appraised by management. Employee recognition is derived from the employee's performance to excel in their job. Employees not receiving recognition at work can either work hard to obtain the appraisal or not work at all (Bradler et al., 2016).

Assumptions

Several assumptions were addressed in this study. The first was that the personal perceptions of autonomy at work, occupational stress, and work recognition influence an employee's intention to quit their job. The second assumption was that participants understood the questions posed in the survey and provided accurate and honest responses to questions on the questionnaires related to quitting their jobs or intentions to quit their jobs.

Scope and Delimitations

The purpose of this study was to determine the relationship between autonomy at work, occupational stress, and work recognition and turnover in a residential facility located in central New York. The focus of the study was to understand how personal perceptions from current and former DSPs have influenced or will influence the decision to quit their jobs with the agency. This study's delimitation was that the information collected from current and former DSPs working for or who have left the agency does not fully represent the entire workforce in the United States. Different theories have been used in mental health settings to measure job satisfaction, employee retention, and mental health worker turnover. Those theories have not been implemented in residential facilities

for IDD individuals. (Grund & Sliwka, 2007; King, 1970; Landy, 1978; Quarstein et al., 1992).

Only individuals serving as DSPs working in residential facilities for IDD individuals were included in this study. Although other professionals were working in conjunction with a DSP for the well-being of IDD individuals in a residential facility, those professionals, such as nurses, occupational therapists, physical therapists, and day habilitation services staff, did not participate in this study. Turnover has been investigated in different mental health settings, nursing homes, and hospitals (Dorociak et al., 2017; Weiss et al., 2005), yet it has not been addressed in residential facilities for IDD individuals. The central concept for this study was that the results would benefit human services agencies servicing IDD individuals in creating employee retention programs that consider autonomy at work, occupational stress, and work recognition as possible causes of turnover.

Limitations

The data for this study were limited and did not represent the entire workforce in residential settings in the United States. A different conclusion could be reached if a large sample from different states participated in the research. The findings may not be generalizable to the entire population used for the study. Another limitation was that implementing a predictive design using binary logistic regression analysis determined the predictive ability between the predictor and dependent variables. A large sample would improve generalizability in the target population (Creswell, 2013). A different limitation for this study was that participants used self-report answers when responding to the

survey questions. Self-report could compromise the survey results, as the DSP reflects biases regarding the workplace. Another limitation was that other factors influencing turnover in DSPs working in residential settings were not considered for this study.

Significance

Turnover in DSPs working in residential facilities is a problem for many human services agencies nationwide that provide services to IDD individuals (Steinmetz et al., 2014). The factors contributing to turnover in those facilities continue to be investigated by researchers (Alhamwan et al., 2015). This study aimed to provide information to human services agencies on how the personal perceptions of a DSP can influence turnover in those facilities. The results of this study may assist in developing an employee retention program for DSPs working with IDD individuals. The function of a human services agency is to promote quality of life for the IDD individuals residing in those facilities; many times, the personal perceptions of a DSP are not considered for the retention of staff. Understanding some of the staff's perceptions of autonomy at work, occupational stress, and work recognition may enhance DSP retention for human services agencies servicing IDD individuals. This study will promote social change by providing data to enable policymakers, human services agencies, and residential facilities servicing IDD individuals to address DSP retention.

Summary

In this study, I investigated the relationship between autonomy at work, occupational stress, and work recognition and turnover for residential DSPs working with IDD individuals. Previous researchers conducting studies regarding turnover in mental

health settings have long noted high turnover rates in DSPs supporting such individuals (Bogenschutz et al., 2015). There is limited literature regarding autonomy at work, occupational stress, work recognition, and turnover in residential facilities for IDD individuals. I used the theory of job satisfaction by Kalleberg (1970), reviewed in 2019 by Kallegerg and Marsden. Kalleberg's (1977) theory of job satisfaction proposed a framework based on three dimensions used to assess job satisfaction: the employee's intrinsic characteristics, the employee's extrinsic characteristics, and resource adequacy.

The nature of this study was quantitative, using binary logistic regression analysis. Quantitative research was consistent with understanding whether autonomy at work, occupational stress, and work recognition predict turnover in DSPs in residential facilities servicing IDD individuals. Binary logistic regression analysis allowed the establishment of the relationship and described the association between the variables of autonomy at work, occupational stress, and work recognition predicting turnover. A limitation of this study was that the data collected using a survey do not represent the entire workforce for DSPs across the United States. The conclusions for this study could be different if a large sample from different states participated in the study. A second limitation of the study was that DSPs would self-report when answering the survey, which may convey biases regarding the workplace. Another limitation of the study was that other factors influencing turnover in residential settings were not considered.

The literature review in Chapter 2 addresses the current literature regarding turnover in mental health settings. In Chapter 2, I present an overview of the theory used for the research and provide the definitions implemented for the study.

Chapter 2: Literature Review

Introduction

DSPs deliver necessary services and support to many residential facilities for IDD individuals. Turnover among DSPs is an increasingly prevalent problem for the long-term services and supports industry (President's Committee for People with Intellectual Disabilities, 2017). The annual turnover rate of residential facilities servicing IDD individuals is 45%, with a range of 18–76%. Nearly 35% of DSPs leave their positions within less than 6 months, and 22% leave within 6–12 months. In 2015, nearly 4.5 million DSPs worked in residential facilities for IDD individuals in the United States. This number is expected to grow yearly between now and 2030. Nationwide, DSP turnover costs are estimated at $2,338,716,600 (President's Committee for People with Intellectual Disabilities, 2017). Researchers have noted that DSP turnover has had an adverse impact on the quality of services and the outcomes and lengths of treatment required by IDD individuals (Van der Meer et al., 2018; Kazemi et al., 2015).

In previous studies of healthcare nurses working in hospitals, nursing homes, and other healthcare settings, researchers have shown that factors such as stress, working independently without support, and a lack of performance recognition contribute to turnover in these settings (Clausen et al., 2014; Dyrbye et al., 2017; Enns et al., 2015; Estryn-Behar et al., 2010; Joo et al., 2015; Mitchell & Braddock, 1994; Selden, 2010; Van De Voorde et al., 2016; Yanchus et al., 2017). However, these factors have not been studied in DSPs working in residential facilities for IDD individuals.

Researchers have acknowledged a relationship between personal and work-related factors associated with turnover in healthcare settings (Clausen et al., 2014; Estryn-Behar et al., 2010; Mitchell & Braddock, 1994; Selden, 2010). However, there has been little research on interpersonal factors—such as work independence, occupational stress, and employee recognition—and their effects on turnover among DSPs in residential facilities for IDD individuals. To address this gap in knowledge, I examined work independence, occupational stress, and employee recognition as predictors of turnover among DSPs working with IDD individuals. Work independence refers to the individual characteristics of the employee as an indicator of maturity and responsibility in the workplace (Birecikli et al., 2016). Occupational stress occurs when working conditions (e.g., job demands, physical conditions, and social conditions) are mentally, physically, or socially detrimental to the worker (O'Brien & Beehr, 2016). Although working with IDD individuals can create a stressful environment, little literature has linked occupational stress to turnover in healthcare facilities serving these individuals.

Employee recognition refers to an employee's motivation to thrive at work (Bradler et al., 2016). The issue of motivation relies on how the employee is recognized or appraised by management. Employee recognition is derived from the employee's efforts to excel in their job. Employees who do not receive recognition at work can either work hard (e.g., positive appraisal) or not work at all (Bradler et al., 2016). There is limited literature on employee recognition and turnover in residential facilities for IDD individuals. The present research aimed to fill this gap in the literature by focusing specifically on how interpersonal factors—such as work independence, occupational

stress, and employee recognition from DSP—affect turnover in residential facilities for IDD individuals.

The present quantitative correlational study aimed to determine whether significant relationships exist between the independent variables (work independence, occupational stress, and employee recognition) and the dependent variable (turnover) among residential support staff working with IDD individuals. In this literature review, I explore the variables of work independence, occupational stress, and employee recognition and their relationships with turnover. I begin the review by explaining the literature search strategy employed to identify literature related to the study variables. An overview of the theoretical foundation for this research is presented alongside an exploration of the fields of study that led to this research. The literature review concludes with an investigation of the variable of turnover in residential settings for IDD individuals.

Literature Search Strategy

I used many databases to find supporting articles, including Academic Search, ProQuest Central, and Google Scholar. Apart from online databases, search engines (e.g., Google, Google Scholar, and that of the Walden University Library) were also used to search for relevant literature. The initial keywords, terms, and phrases were *direct support staff turnover, turnover in mental health workers, burnout in staff working with intellectually disabled individuals, staff retention in residential facilities, job stress, job satisfaction, work recognition,* and *job satisfaction*. These keywords were related to mental health, medical, nursing, and residential facilities for IDD individuals. Apart from

seminal works, all the materials used for this study were published between 2014 and 2021. In instances of insufficient resources on a given topic, the scope of the search was broadened to include searches for theses, dissertations, and information published on university websites. Furthermore, I also used articles cited in the materials obtained from the search.

Overview of the Theory

The theoretical foundation of this study was based on the framework of work values and job rewards, a theory of job satisfaction proposed by Kalleberg (1977) and reviewed by Kalleberg and Marsden in 2019. Kalleberg (1977) proposed this framework based on three dimensions used to assess job satisfaction: (a) the employee's intrinsic characteristics, (b) the employee's extrinsic characteristics that determine job satisfaction, and (c) resource adequacy. Intrinsic characteristics are those associated with the employee's development and self-direction at work. The extrinsic characteristics of the employee are those perceived as recognition received for performance at work. The final dimension, resource adequacy, refers to the many components of employee resources at work, such as help from coworkers, adequate equipment for job performance, supervisory assistance, and support. Kalleberg (1977) suggested that an employee can foster a negative view of work, and their capacity for performance can be affected if the three personal characteristics are not present.

Kalleberg and Marsden (2019) reviewed Kalleberg's theory and indicated that this theory is still helpful in identifying job satisfaction factors. In conjunction with Kalleberg's theory, they added that employment growth is also driven by the employer's

need to have flexibility in the place of work and to lower the cost of labor. Thus, these factors should be included when assessing job satisfaction.

Kalleberg's (1977) theory has been widely used to understand better job satisfaction (De Cuyper et al., 2008), which is the leading cause of turnover. Kalleberg's (1977) theory has been implemented in business sectors and the health industry, such as in studies of hospitals and nursing homes (De Cuyper et al., 2008). Furthermore, Kalleberg's theory aligns with the present study's aim to establish whether significant relationships exist between the independent variables (work independence, occupational stress, and employee recognition) and the dependent variable (turnover) for DSP working with IDD individuals.

Literature Review

History of the Crisis

Turnover among DSPs and the associated crises can be traced back to the community living and deinstitutionalization movements of the 1970s. As the workforce shrank, the duties of DSPs changed from providing care for basic needs, including health and safety, to helping people achieve community integration, positive relationships, and other goals. The move from institutional services to inclusive community support had adverse effects on direct support jobs. By mid-1977, everyone who needed residential services received care in institutions with at least 16 workers. The estimated number of IDD individuals living in residential facilities in 1977 was 20,720; by 2005, the number of IDD individuals living in residential facilities increased to 344,1439 (Prouty & Lakin, 2000). Underfunding, increased workloads and a diminished ability to provide services

due to an absence of training are some of the factors that have led to high DSP turnover nationwide.

In contemporary times, high turnover continues to affect DSPs despite recent hiring surges in facilities that provide services to IDD individuals. There is a general consensus among DSPs that satisfaction at work can only be obtained from knowing how their assistance helped IDD individuals achieve their goals (Friedman, 2018). However, their duties are often emotionally and physically draining. DSPs are also referred to as personal care aides; DSPs provide personal and often individualized assistance to people with disabilities and older people. DSPs offer a broad range of services, including services that help people perform daily living activities and attain physical and emotional health. The most common responsibilities for a DSP are assisting an IDD individual with personal care, household tasks, financial management, community living, and crisis prevention. The DSP monitors the IDD individual's safety and health (Bogenschutz et al., 2014). Given the wide range of services they offer, combined with the stressful and intense nature of their jobs, DSPs are prone to exhaustion, which increases the chance of making mistakes and reduces overall performance.

The duties of DSPs not only require complex competency balancing tasks but are also labor intensive. The support of a DSP applies to various settings, from residential settings and job support programs to nursing homes. According to Friedman (2018), in 2011, there were approximately four million DSPs in the United States, with approximately one million providing care for IDD persons. The need for DSPs in residential settings has increased faster than in any other sector. The increased need for

DSPs in those settings can be attributed to the aging baby boomer generation, the continued need for support in residential settings for IDD individuals, and the growing community of people with disabilities. Official estimates indicate that DSPs would make up the most significant job sector in the United States by 2030, with approximately five million positions nationwide (Friedman, 2018).

Researchers found substantive evidence that DSPs perceive their work environments as inadequate to suit their personal and professional needs in a previous study. Other researchers have focused on long-term care and the effects of burnout and vicarious trauma, job satisfaction, and training in residential facilities among DSP staff (Amirsadri et al., 2018; Purpora & Blegen, 2015; Woodhead et al., 2016).

Turnover Statistics for Direct Support Professionals (DSPs)

The annual turnover of DSPs is very high, with typical organizations assisting older adults and people with disabilities recording estimates of 30% to 70% turnover per year. The overall vacancy rate of DSP positions has been recorded at 12%, while approximately 38% of DSPs quit their work within 6 months. Most of this turnover results from employees leaving rather than being fired from their jobs. This high turnover rate has adverse effects on DSPs and residential facilities, most nonprofit organizations. These agencies struggle with resource shortages, and the costs associated with turnover are significant (Larson et al., 2016). Filling vacant positions can cost approximately $3,278 per person due to recruitment and training costs (Larson et al., 2016). High turnover also affects DSPs, as some are discouraged by their inability to sustain gainful employment. Therefore, the most skilled workers could be discouraged from remaining

in or entering the field. High turnover also hinders the government from meeting its statutory obligations. The interpretation of the Americans with Disability Act put forward in *Olmstead v. Zimring* (1999) reaffirmed and recognized that there should be a national commitment ensuring that institutionalized persons have the option of residing within a community and receiving necessary support (Rosenbaum, 2016).

High turnover has adverse effects on organizations, both operationally and financially. Van Bogaert et al. (2012) concluded that work engagement and practice environment significantly influence healthcare outcomes. Therefore, organizational goals must ensure a stable workforce with the knowledge, capacity, and skills needed to provide adequate care. Factors that influence high turnover include job satisfaction, salary, management style, the potential for career growth, employee commitment, and the chance of promotion. Inefficiencies associated with employee turnover are pervasive in the public and private sectors. Turnover in organizations serving IDD people is high nationwide, and various research efforts have been made to identify the root cause of this phenomenon. Understanding these effects on the workforce could help policymakers reduce employee turnover and bring social change by increasing productivity in the human services sector. At the macro level, improvements nationwide in standardized training for DSPs could help them cope with the challenges of their work. Studies on DSP turnover can also be used to shape government agendas regarding work environments for DSPs working in residential settings. Bossink et al. (2019) explained that DSP training, among other measures, has a favorable impact on support quality due to its tendency to increase motivation.

Lack of Support

In many cases, DSPs lack direct support from management and are required to use complex techniques without mentoring or direct oversight (Friedman, 2018). In a study of DSPs working with IDD individuals, Houseworth et al. (2020) highlighted that many DSPs cited the absence of supervisory help as a primary motive for quitting their jobs. One reason for this lack of direct support is the absence of proper supervisory training and education for program managers (Houseworth et al., 2020). Supervisors working in residential settings often lack the training to provide constructive feedback and offer quality support to DSPs. Often, supervisors lack knowledge of delivering support functions for their juniors (Houseworth et al., 2020). Most supervisors are former DSPs with no formal training on how to serve in a supervisory capacity. In addition to lacking guidance on carrying out their duties, management often does not have the time or resources to recognize DSPs for their work and efforts.

Extraordinary feats go unnoticed and unrewarded due to the absence of supervisors. In some instances, the individual supported by DSPs may lack the ability to show appreciation due to their psychological and physical limitations, which may prevent them from communicating verbally. Gray-Stanley et al. (2010) explained that work-related stress due to a lack of support depends on how employees perceive their workloads and sufficient resources to carry out their roles. Workers who receive sufficient supervisory guidance have good relationships with their colleagues or who are adequately equipped with coping mechanisms have been found to fare better (Gray-Stanley et al., 2010).

Turnover Intention

Turnover intention refers to an employee's estimation that they may permanently quit working with their organization sometime in the near future (Yanchus et al., 2015). Labrague et al. (2020) measured turnover intention with a self-report questionnaire to predict turnover in nurses from six hospitals. The results indicated that job stress was one of the primary factors that caused nurses to consider leaving the hospital (Labrague et al., 2020). Employee turnover negatively affects an organization by reducing performance if the leaving employee is skilled and incurring costs for the recruitment and training of new employees. In healthcare settings, turnover affects worker morale and causes patient outcomes to decline. Yanchus et al. (2015) explained that turnover costs in residential facilities for IDD individuals result in gaps in the patient care process. When a DSP quits their job, they leave with their skills, abilities, knowledge, and understanding of the various individuals they have served.

Work Stress and Burnout

Employees tend to rate their work as stressful if their external work requirements exceed their resources and capabilities (Tziner et al., 2015). Work stress is problematic for organizations as it can affect performance (Khamisa et al., 2017). Stressed employees may exhibit destructive behavior, such as drinking, smoking, depression, and anxiety (Liu & Aungsuroch, 2019). Prolonged stress typically leads to acute job dissatisfaction, low performance, and absenteeism. Once employees perceive their work as exceeding their capabilities and resources to discharge their duties, they may assess the work environment as stressful (Liu & Aungsuroch, 2019). Healthcare workers encounter

numerous stressors, including long work hours, a lack of autonomy, low wages, low chances of promotion, and work-life imbalance. Workplace stress is an important issue, as it can have far-reaching effects on both an organization and its employees (Khamisa et al., 2017).

Highly stressed employees may perform poorly, resulting in adverse attitudinal and behavioral work outcomes. Previous research has underpinned that chronic work-related pressure can result in energy drain, undermining a person's wellbeing. This occurs when job-related personal resources do not consistently meet work demands. Stress arises when individuals perceive their resources as unstable or threatened or when workers cannot preserve or attain resources within their capabilities (Khamisa et al., 2017).

Gnerre et al. (2017) showed that work demands could exceed job boundaries, depleting all the necessary resources to perform regular tasks. This prolonged depletion of individual resources leads to burnout. Burnout is a progressive psychological reaction to chronic workplace stress that involves depersonalization, emotional exhaustion, and feelings of diminished personal achievement. Among healthcare workers, burnout impairs healthcare outcomes and workers' health. In turn, burnout is associated with malpractice, health problems, absenteeism, and employee turnover.

Scanlan and Still (2019) noted that work in mental healthcare is emotionally demanding and can increase one's chances of developing burnout, which is associated with lower job satisfaction in addition to increased rates of turnover intention. The research findings of Tziner et al. (2015), Gnerre et al. (2017), Khamisa et al. (2017), and Liu and Aungsuroch (2019) have shown that there is a relationship between turnover,

burnout, and job satisfaction. Increased burnout is associated with a lack of perceived support from supervisors and colleagues, client-related factors, a lack of perceived autonomy, and workload pressure. Knowledge gaps and limited experience have also been cited as contributing factors to burnout and turnover (Sullivan et al., 2014). Perceived competence can reduce one's chances of burnout, as workers who feel confident with their work experience high levels of job satisfaction and low levels of burnout. Adequate supervision can also reduce one's chances of burnout, as it can provide the support needed to handle negative client interactions. Furthermore, having no feelings of work-related despair leads to increased job satisfaction and decreased chances of burnout (Livni et al., 2012).

Recognition

Recognition at work refers to the feeling of being appreciated and valued in the workplace. Recognition of employee initiatives is a cost-effective strategy that can increase the retention of experienced staff. A cross-sectional study showed that 49% of nurses at South Carolina Hospital were not satisfied with the levels of recognition they received (Asegid et al., 2014). Consistent with this result, 48% of the nurses reported considering leaving the hospital. Asegid et al. (2014) asserted that promoting a culture of recognizing outstanding efforts in the workplace can increase staff retention. Healthcare workers who perceive that they are receiving adequate recognition report higher intention to remain with their organizations. These findings support Maslow's and Herzberg's theories that job satisfaction is influenced by the nature of work, recognition, achievement, advancement, and responsibility. Herzberg argued that motivational

factors—such as recognition, rewards, promotion, and meaningful work—have intrinsic value and can reduce employee turnover (Asegid et al., 2014)

Due to limited funding, mental healthcare workers often receive low salaries. Kadis (2001) called for organizations to recognize this group of workers through monetary and non-monetary gestures. Non-monetary gestures include gift certificates, inscribed trophies/plaques, and time off work, among other measures. Low job satisfaction resulting from a lack of recognition is associated with high staff turnover (Kadis, 2001). Recognition shows workers that their supervisors and organizations are confident in their work, and a confident workforce is beneficial to an organization. Abdullah et al. (2016) noted that organizations with workers who feel recognized have higher employee commitment, reduced staff turnover, and higher customer loyalty appraisals. Mngomezulu et al. (2015) explained that employee recognition comes with benefits such as improved morale, which increases organizational loyalty; this provides employees with a sense of ownership, leading to increased retention rates. Organizations are also obliged to recognize and reward workers as part of an initiative to balance organizational and employee goals.

Work Independence

Galletta et al. (2011) described job autonomy as "the extent to which a job allows freedom, independence, and discretion to make decisions, schedule work, perform activities and choose procedures" (p. 3). Employees working in a highly independent environment can perceive job outcomes as highly dependent on their efforts and may feel responsible for the failure or success of their actions. Therefore, job independence can

promote psychological states that support positive workers, such as intrinsic motivation, depending on job characteristics. Longitudinal studies have shown that job independence can favorably influence self-determined motivation. Furthermore, job autonomy can stimulate high levels of commitment to an organization, such as affective commitment. Affective commitment refers to a worker's willingness to sustain their membership in an organization to help the organization accomplish its goals (Galletta et al., 2011).

Schmalenberg & Kramer (2008) concluded that increasing responsibility and autonomy at work could be an initiative to create a positive working environment and increase worker retention. According to self-determination theory, the degree to which the work environment promotes and sustains workers' job independence allows workers to initiate positive and independent work behaviors. This condition is a vital factor capable of enhancing employee motivation, satisfaction, and well-being. The need for independence is fundamental to activating intrinsic motivation, which is the motivation to perform driven by pleasure and pure interest (Kramer et al., 2008).

In the past, organizational structures enforced strict oversight at the lower ranks of organizations. However, recent studies have shown that increased autonomy can reduce employee turnover and improve job satisfaction (Schmalenberg & Kramer, 2008). Independence can also include team autonomy. Autonomous teams are groups that are self-managed and receive little guidance from supervisors. When team members coordinate their efforts, they can enhance their collective strengths while compensating for the weaknesses of every member. In the study by Pron (2012), healthcare employees with higher degrees of job autonomy reported greater satisfaction with their work. This

linkage is particularly essential for healthcare workers dealing with mental illnesses, considering that their work requires high levels of discretion. This is also especially relevant to DSPs, who often require decision-making skills to provide therapeutic care to patients. Yanshu et al. (2015) explained that community health workers express greater job satisfaction when they have autonomy at work.

Job Satisfaction

Job satisfaction significantly impacts employee turnover and refers to the positive emotional state derived from doing one's job. Kalleberg (1977) described job satisfaction as the cognitive and affective attitudes workers hold about the various aspects of their careers. Job satisfaction may come from multiple sources, such as the degree of job ambiguity, social relationships, the quality of supervision, and the level of assistance at work. Previous studies have shown that job satisfaction is a critical indicator of employee well-being, including psychological health and positive organizational outcomes (Weiss & Merlo, 2015). Job satisfaction is derived from both intrinsic and extrinsic factors. Extrinsic motivation is derived from the desire to gain resources, such as recognition, money, or power. Conversely, Ismail et al. (2015) described intrinsic motivation as what comes from within the employee.

Job satisfaction is associated with citizenship behavior, such as cooperative and constructive gestures that contribute to organizational success (Ismail et al., 2015). Every job requires interaction with other workers from the agency and management. It requires that everyone abide by organizational policies and rules and accept work conditions, even when those conditions are not ideal. After evaluating all job characteristics, job

satisfaction is a positive feeling that one experiences (Ismail et al., 2015). Therefore, workers who have high levels of perceived job satisfaction, including those in residential facilities for IDD individuals, are less likely to quit their work. High levels of job satisfaction translate to low turnover rates.

Summary and Conclusion

While researchers have presented comprehensive findings on how turnover is affected by different variables, there is a consensus that the phenomenon of turnover still requires much investigation. Researchers have long noted high rates of turnover in DSPs supporting IDD individuals (Bogenschutz et al., 2015). In the last decade, many attempts have been made to understand turnover rates better and implement various services to strengthen the skills of DSPs and thus reduce turnover. The services implemented by human services agencies to reduce turnover are based on the assumption that a more competent DSP is more likely to remain employed in their facilities (Bogenschutz et al., 2015). The current literature has focused on the factors that characterize the individuals who provide services to these agencies (e.g., gender, age, and education). However, there is limited literature regarding the interpersonal characteristics of a DSP in residential settings.

Many researchers have acknowledged the relationship between personal and work-related factors associated with turnover among healthcare workers (Clausen et al., 2014; Estryn-Behar et al., 2010; Mitchell & Braddock, 1994; Selden, 2010). However, there is limited research on the effects of interpersonal factors—such as work independence, occupational stress, and employee recognition—on turnover in residential

facilities servicing IDD individuals. To better comprehend the relationships between these interpersonal factors and turnover, it is essential to understand how these variables contribute to turnover.

Chapter 3: Research Method

Introduction

In this study, I evaluated how interpersonal factors, such as independence, stress, and recognition, can be used to predict staff turnover at residential facilities for people with IDDs. Specifically, in this quantitative study, I used responses from staff working at residential facilities for people with IDD to identify whether recognition, stress and independence influence staff turnover. In previous research on nurses working in nursing homes, hospitals, and other health care facilities, researchers evaluated the effects of factors such as stress, lack of recognition, and working independently without support on staff turnover in those settings. However, no researcher has studied these factors in DSPs working in residential facilities for IDD individuals. As a result, a gap has developed in the literature with respect to the relationship between staff turnover at these facilities and stress, lack of recognition, and independence. I used a quantitative research method to collect data and analyze the findings. In this chapter, I describe the research design, sampling procedures for the selected population, ethical considerations, potential limitations, and procedures for collecting, analyzing, and evaluating the reliability and validity of the data.

Study Variables

A variable is anything that has a varying quality or quantity and refers to a phenomenon, thing, place, or person that a researcher wants to measure. Various categories of variables exist. A researcher must make informed, judicious choices about which variables to include when conducting a research study, including independent,

dependent, and extraneous variables. On the other hand, a dependent variable depends on other measurable factors. The dependent variable in this study was turnover in residential facilities serving people with IDDs. I used independent and dependent variables only.

According to Seawright (2016), an independent variable does not rely on, nor is it affected by other variables. I used three independent variables in this study: stress, independence, and recognition. Occupational stress occurs when working conditions, such as job demands and physical and social situations, are mentally, physically, or socially detrimental to the worker (O'Brien & Beehr, 2016). Working with people with IDD can create a stressful environment; the literature linking occupational stress to turnover in those facilities is limited. Work independence refers to an employee's characteristics as indicators of maturity and responsibility in the workplace. Employee recognition refers to the formal or informal acknowledgment of the person's efforts at work. Recognition refers to how the employee perceives the organization's support (Bradler et al., 2016).

Research Design

Researchers in other studies have used the quantitative methodology to evaluate the effects of stress, lack of recognition, and working independently without support on staff turnover in these settings (Barnham, 2015). Quantitative research involves examining the relationship between measurable variables to facilitate the use of statistical procedures in analyzing numerical data, which assists in testing objective theories. Moreover, quantitative research involves formulating a generalized observation of the whole based on measurements obtained from a sample of data collected from specific

populations. Thus, quantitative was the most appropriate methodology for evaluating the relationship between interpersonal factors such as work independence, occupational stress, and employee recognition and how they affect turnover among DSPs in residential facilities for people with IDD.

I used binary logistic regression analyses to determine the relationship between the independent and dependent variables. Binary logistic regression is used when two or more measurement variables could affect one nominal variable. Binary logistic regression analyses can help predict the relationship between a particular variable and its association with the values of other variables and can be used to test hypotheses about how an independent variable explains variation in a dependent variable (Seawright, 2016). The data used for this study were collected using surveys. Compared with other methods of collecting data, such as focus groups and interviews, surveys are more effective because they allow for a large sample size. Previous researchers have also used surveys to collect data to evaluate the connection between occupational stress and employee recognition on DSPs turnover in mental health facilities for IDD individuals (Weiss et al., 2005; Dorociak et al., 2017).

Methodology

A quantitative binary logistic regression methodology was used in this study. Demographic data were gathered from voluntary participants using survey questionnaires before measuring interpersonal factors. A human services agency located in Central New York that provides residential services to IDD individuals was contacted to provide access to DSPs for completing the survey for the study.

Participants

The inclusion criteria allowed only DSPs who have worked or are currently working in residential facilities serving individuals with IDD to participate in the study. The sample comprised current and former staff in residential facilities settings. Questions included in the demographic questionnaire allowed the inclusion of those DSPs currently working on who had worked for a minimum of 6 months for the residential facility.

Sample Size Analysis

Two power analysis methods were conducted to establish an appropriate sample size for the study. According to Quintana (2017), a quantitative study uses a power analysis to mitigate the risks of Type 1 and Type 2 errors experienced when calculating the appropriate sample size. Type 1 errors are present when no relationship exists between the study variables. Type 2 errors, on the other hand, occur when a relationship exists between study variables, but the researcher does not find it. First, the sample size was estimated using the G*Power software, which accounts for the acceptable margin of error, the desired relationship magnitude, and the probability of finding a statistically significant result. For this study, the G*Power analysis was conducted with three independent variables and an estimated 80% chance of having a statistically significant relationship between the independent and dependent variables. An effect size of 0.15 and a 95% confidence interval were also estimated to exist and were included. G*Power calculated that a sample size of 89 participants was needed for the study.

Sampling Procedure

I used convenience and nonprobability sampling methods. A nonprobability sampling method does not ensure all members in the large population within the sample because it does not randomly choose the sample from the large population (Kohler et al., 2019). According to Kohler et al. (2019), the samples are selected because they are accessible to the researcher. The convenience and nonprobability sampling will consist of current and former DSPs whose workplaces have included residential facilities serving people with IDDs.

Recruitment

DSPs currently working or who have worked in a residential facility serving individuals with IDD located in central New York were recruited as the study participants. The participants were recruited by soliciting the support of a clinical director at the residential facility. An email, which included a brief description of the study's aim and a request for assistance with recruiting study participants, was sent to the residential facility director (Appendix A). The clinical director was provided with two options for recruitment: (a) providing an email list of all the staff working or have worked at their facility, or (b) communicating with their staff about the study and asking them to participate in the survey without sharing their email addresses. The facility's clinical director chose for the agency's human resources department to forward the survey invitation to current and former DSPs.

I emailed the director of residential settings (Appendix B) a message to request the participation of staff members in this study, including a link to the survey on Survey

Monkey and informed consent information. I sent a reminder email during the fourth week after the initial direct email was sent to the human resources department to be distributed to current and former staff working or who worked at residential facilities serving people with IDD through their director's permission. The purpose of the email was to thank the staff for accepting the invitation to participate in the survey and remind them to complete it. During the same period, I sent another reminder email to the residential facilities' directors to thank them for organizing their staff and remind them to send the survey link to their staff members.

Participation

The participants who agreed to participate in the study had the opportunity to go through the study overview, provide informed consent (Appendix C), and access the survey link once they received the participation invitation. The informed consent information described the potential risks of participating (Grady, 2015). Participants were given the option of withdrawing from the study at any time without consequences. The identities of the participants remain confidential and anonymous. As Grady (2015) recommended, protocols for storing, using, disseminating, and destroying participants' data and when the data will be destroyed were also disclosed in the consent. The participants were informed that the survey link provided in the email would take them to a customized page via Survey Monkey.

Survey Monkey is an internet-based survey administrator that many researchers use due to the confidentiality and security provided to the researcher and participants. An informed consent form was included in the survey apart from the instruments for

measuring the dependent and independent variables and the demographic questionnaire (Appendix D). The inclusion criteria for the participants comprised questions related to working or having worked in a residential facility for individuals with IDD. Participants were asked whether they currently work in a residential facility for individuals with IDD and have been working for at least 6 months in their current position or worked in a residential facility for individuals with IDD and did so for 6 months or longer. If the participant answered "no" to both the questions, the participant was redirected to a thank you page and exited the survey.

Before the participants began the study, they were asked to review the consent information. Participants who chose to participate in the online survey selected "yes" to give informed consent. Those who did not want to participate in the survey could select "no." The survey was designed so that those who selected "no" immediately exited the survey. Participants had the option to log into the website again and select "yes" to participate in the study if they changed their minds. Those participants who decided to return to Survey Monkey after exiting began the survey afresh. A participation duration of 12 to 15 minutes was allocated. The demographic questionnaire, the ProQOL 5 (Stamm, 2005), and the WVI (Super, 1970) were the survey instruments included in the study. The final information page in Survey Monkey provided participants with information about stress, lack of recognition, independence, and other interpersonal factors essential to increasing work retention at residential facilities serving people with IDD.

Data Collection

Survey Monkey was used to collect online data. Survey Monkey is a website intended to provide secure and confidential internet-based surveys that also assist users in creating and customizing collected data (Survey Monkey, 2018). Survey Monkey employs a range of security measures to protect survey data, such as mandatory monitoring requirements for entry and the use of accredited data centers; all data transmitted from participants through Survey Monkey is encrypted to provide maximum security (Survey Monkey, 2018).

Only the faculty committee and I had permission to view the data collected via Survey Monkey. Moreover, I was allowed to use the data collected via Survey Monkey for research purposes only. A password different from any personal account was created to protect the Survey Monkey account. The password was not shared with anyone, nor could other parties access the account. The data downloaded from Survey Monkey were stored securely on a flash drive, which was also protected with a password.

Data were collected for 4 weeks. The collection began when the facility director received an email requesting to mobilize their staff members to participate in the study. The timeframe for data collection was not included in the initial email to seek community partnerships with the directors of the residential facilities. The data collection process was carried out throughout the estimated time frame to ensure planned data analysis and sufficient power for the study until a minimum of 89 participants was reached. If the 4-week timeframe for collecting the data failed to meet the threshold of 89 DSPs fully participating in the survey, the timeframe was to be extended by 2-week increments until

the required number of surveys was obtained. An email was sent to the study participants 4 weeks from when the initial email was sent. The second email thanked participants and requested that they participate in the study.

Study Instruments

Demographic Questionnaire

The demographic questionnaire collected data by identifying participants who work or have worked in a residential setting to meet the designated criteria. Some of the items presented in the questionnaire included questions related to gender, age, the highest level of education attained, the type of residential agency the participant is working for, and the length of time they have worked in residential facilities. The demographic questionnaire included questions used to measure the dependent variable of turnover. The questions were used to screen participants before participating in the study. If the participant answered "no" to both of the questions asking whether they currently work, or have worked in a residential facility for individuals with IDD, and have they been working for at least 6 months in their current position, or have worked in a residential facility for individuals with IDD, and did they work for 6 months or longer, the participant was redirected to a thank you page and exited the survey

ProQOL 5

The ProQOL 5 was used to measure stress. The ProQOL 5 was developed by Stamm (2005) to determine the impact that stress has on health professionals who have been working with IDD individuals. The ProQOL 5 has subscales to assess burnout, secondary traumatic stress levels, and compassion satisfaction. Secondary traumatic

stress scores were used in the data analysis section of this study. Secondary traumatic stress is the second compassion fatigue component. Secondary traumatic stress is related to the traumatic experiences a worker is exposed to. Secondary traumatic stress relates to significantly or traumatically stressful events (Stamm, 2005). The question used for this study were 2, 5, 7, 9, 11, 13, 14, 23, 25, and 28. An example of the questions in this subscale is: I am preoccupied with more than one person I assist. Because of my assisting, I have felt "on edge" about various things. The average of scores for each participant will be used for the analysis. The construct validity for the ProQOL 5 has been reported in more than 100,00 articles and journals using the scale as a reference and with psychometric properties of α reliability ranging from .84 to .90 on the three subscales (Stamm, 2010). For this study, the subscale of Secondary Traumatic Stress was used. Secondary Traumatic Stress has an average score of 13, a standard deviation of 6, and alpha reliability of 0.8

Researchers have used the ProQOL 5 instrument to explore vicarious traumatic stress with nurses working in mental health settings (Perkins & Sprang, 2013). Stamm (2005) argues that nearly half of the studies investigating stress, independence in the workplace, and recognition measure the construct using the ProQOL 5. The group norms can apply to any helping profession, although the initial norming group used by Stamm (2005) consisted of mental health professionals. The ProQOL 5 is among the most-used instruments in measuring turnover due to stress for professionals working with people with IDD. The 30 items of the ProQOL5 are rated on a five-point Likert scale, depending on how frequently the DSP perceives stress in the work environment. Each of these

questions would then have the following responses to choose from 1 (never), 2 (rarely), 3 (sometimes), 4 (often), and 5 (very often). The five-point Likert scale is a validated instrument used in this study to measure recognition and independence. Permission to use ProQOL 5 was obtained from the website (www.proqol.org). A copy of the instrument was provided for free as long as the author was credited. As such, a copy of the instrument and permission granted to use the ProQOL 5 was obtained at no charge.

WVI

The WVI (Super, 1970) was used to measure autonomy and recognition. According to Super (1970), competent work development can be understood in three different areas: abilities, values, and skills. He further explained that work values need to be considered when assessing work performance (Super, 1970). The WVI (Super, 1970) was developed to help select a choice of occupation and the most appropriate setting for the worker (Chauvin et al., 2011).

The WVI is a 45-item measure that assesses 15 work values. Each subscale has three questions related to a specific area of work satisfaction: achievement (e.g., get the feeling of having done a good day's work), altruism (e.g., help others), associates (e.g., are one of the gang), creativity (e.g., try out new ideas and suggestions), aesthetic (e.g., need to have artistic ability), economic returns (e.g., can get a raise), intellectual stimulation (e.g., have to keep solving problems), independence (e.g., have freedom in your area), management (e.g., have the authority over others), prestige (e.g., know that others consider your work necessary), security (e.g., know your job will last), supervisory relations (e.g., have a reasonable boss), surroundings (e.g., have an adequate lounge,

toilet, and other facilities), variety (e.g., look forward to changes in your job), and way of life (e.g., have a way of life, while not on the job, that you like). The response format consists of a five-point Likert scale ranging from 1 (unimportant), 2 (little importance), 3 (moderately important), 4 (important), and 5 (very important) (Super, 1970). Only the subscales measuring autonomy (independence; questions 5, 21, and 40) and recognition (achievement; questions 13, 17, and 44) were used for this study.

In the study conducted by Pike (1996), the validity of the WVI was examined. In the study participated social worker students at a master's level (MSW) (n = 22, response rate = 58%). The alpha coefficients ranged from .53 to .84 (Pike, 1996). In the study conducted by Robinson & Betz (2008), the validity of the WVI was examined. 426 undergraduate students enrolled in Introductory Psychology at a large midwestern university participated. The internal consistency reliability of the WVI scales ranged from .70 (Variety) to .89 (Achievement); the median internal consistency reliability was .82. The median test-retest reliability of the WVI scales was .83, with a range of .74 to .88 (Robinson & Betz, 2008).

Data Analysis

For this study, the SPSS software was used to analyze data. The responses were collected from Survey Monkey and transferred into a spreadsheet. Incomplete surveys were eliminated from the study. The responses in the spreadsheet were coded for analysis and imported into IBM SPSS Statistics 27.0.1.0 predictive analytics software to compute the regression analysis.

The data collected were screened for missing data and accuracy. The irrelevant data were removed. In the event of missing data, a pairwise exclusion was used. A pairwise exclusion does not delete the case with the missing data. Pairwise takes into account the variables that are missing (Mirazael et al., 2021). A scaled score was created for each independent and dependent variable using the scoring protocol for the questionnaires used for the study. The questionnaires will require an average score for the subscales used to create a scale score for every variable.

Research Question, Hypotheses, and Measures

RQ: To what extent do autonomy at work, occupational stress, and work recognition have a relationship with turnover among DSPs that are employed by or who have left employment in a residential facility for IDD individuals?

Ho: There is no significant relationship between the predictor variables of autonomy at work, occupational stress, work recognition, and the outcome variable of turnover, either in linear combination or uniqueness.

H_A: There is a significant relationship between the predictor variables of autonomy at work, occupational stress, work recognition, and the outcome variable of turnover in linear combination or uniqueness.

Data Analysis Plan

SPSS was used to create descriptive statistics. The data collected from the ProQOL 5 and WVI was measured at the scale level, and there was no need for a pilot study. Data analysis conducted using the SPSS software allowed finding the relationship

between the independent variables of stress, autonomy, and recognition and the dependent variable turnover for DSP working in residential settings for IDD individuals.

Analytic Strategy and Justification

The statistical analysis selected for this study was binary logistic regression. Binary logistic regression assisted in determining if a significant relationship exists between the independent and dependent variables.

The justification for this study was based on the exclusion from the academic literature. The variables of independence, stress, and recognition have been linked to turnover in healthcare (see Clausen et al., 2014; Estryn-Behar et al., 2010; Mitchell & Braddock, 1994; Selden, 2010).

Validity and Reliability

According to Golafshani (2013), validity refers to the appropriateness of the processes, data, and tools used in quantitative research. A researcher can use various methods to make a study valid. Although the WVI has different subscales measuring distinct work values, only the subscales of achievement and independence were used. Each subscale's average score was examined to find the relationship between the independent and dependent variables. Golafshani (2013) argues that reliability depends on the stability, consistency, and repeatability of the participant's accounts and the researcher's ability to collect and analyze data accurately. The staff members were urged to take the survey without rushing to make the study reliable. Moreover, the questions presented in the survey questionnaire are simple and clear to increase research reliability.

Ethical Procedures

Consistent with the principles of the APA Ethical Principles of Psychologists and the Code of Conduct (American Psychological Association, 2002), all participants in this study were protected by having access to informed consent before their voluntary participation. The participants had the option to withdraw at any time without consequences. The responses were anonymous and not linked to personal information from the participants. The data collected will be stored in a hard drive for at least seven years. After this period, the data will be destroyed unless it will be needed for further research. The participants were informed that their participation in this study was voluntary, and their participation or failure to participate had no consequences in their employment.

A consent to participate in the study was at the beginning of the survey describing the procedures, risks, benefits, confidentiality, record keeping, and contact information of the researcher and Walden University. The data collection started after the participant agreed and electronically signed the informed consent, indicating the understanding of the conditions of the study and their willingness to participate. There was a minimum risk to the participants in this research.

Summary

The research method chapter has described the research design, sampling procedures for the selected population, ethical considerations, and procedures for collecting, analyzing, and assessing the reliability and validity of the data. Binary logistic regression research design was used to evaluate the link between stress, recognition,

independence, and turnover. One dependent variable and three independent variables were used in the study. The study's dependent variable was turnover in residential facilities serving individuals with IDD, while the independent variables included stress, independence, and recognition. The inclusion criteria allowed only DSPs who have worked or are currently working within residential facilities for IDD individuals to participate in the study. The study used purposive and nonprobability sampling methods. The data was collected using Survey Monkey software. A questionnaire for the participants' demographics and preexisting measurement scales (ProQOL 5 and the WVI) was used to collect data for the study. The study was made valid by formulating appropriate survey questions. Providing a link to the survey questionnaire, the reliability of the study was maintained by ensuring that the participants responded honestly and without rushing. The survey questions were neither difficult to answer nor required much time to answer. The analysis of the study's results will be presented in Chapter 4.

Chapter 4: Results

Introduction

In this study, I addressed the intrinsic perceptions of DSPs related to work stress, work independence, and work recognition as possible predictors of turnover in residential settings for IDD individuals. The results may help human services agencies develop a retention program for DSPs working in residential settings with IDD individuals. Understanding the perceptions of work stress, work independence, and work recognition could enhance the retention of DSPs in the many human services agencies servicing IDD individuals. There was one research question in the study. The responses from participants were analyzed based on the question. The research question for the study was as follows: To what extent do autonomy at work, occupational stress, and work recognition have a relationship with turnover among DSPs employed by or who have left employment in a residential facility for IDD individuals?

The hypothesis for this study was that turnover among DSPs working for residential facilities for IDD individuals was influenced by autonomy at work, occupational stress, and work recognition. Statistical tests, including a binary logistic regression, were used to measure this relationship of the variables to address the research questions and offer details on the null and alternative hypotheses indicated below.

> H_0: There is no significant relationship between the predictor variables of autonomy at work, occupational stress, work recognition, and the outcome variable of turnover, either in linear combination or in uniqueness.

H_A: There is a significant relationship between the predictor variables of autonomy at work, occupational stress, work recognition, and the outcome variable of turnover in linear combination or uniqueness.

In this chapter, I describe the research setting for the study, including participants' demographic data. I present the results from the quantitative data analyses followed by the testing assumption and analysis of data validity and reliability for the study. The chapter concludes with a summary of the research findings.

Data Collection and Analysis

Data Collection

The data collection took 12 weeks as planned and approved by the IRB (Approval # 07-16-21-0034991). The data required for this study were analyzed once the required sample of 89 participants completed the survey. The intended population for this study was DSPs working in residential settings for IDD individuals. To obtain a sample for this study, I contacted the executive director of a nonprofit agency in central New York. I requested that the agency email the survey to DSPs working or who have worked for the agency for a minimum of 6 months. The DSPs who received the survey and agreed to participate completed the survey through Survey Monkey. The survey included a demographic questionnaire and questions to measure the three predictor and outcome variables. The survey included questions from the ProQOL-5 (Stamm, 2005) to measure stress. The survey also included questions from the WVI (Super, 1970) to measure independence and recognition at work. The demographic questionnaire included questions related to turnover.

I collected data from July 19, 2021, to October 30, 2021, to achieve the adequate sample size needed for the study, a total of N = 89 participants. The sample for this study consisted of 65 women (73.0%) and 24 men (27.0%). The participants' ages ranged from 21 to 51+ with a mean age of (M) = 35. Participant responses indicated that 36 (40.4%) DSPs worked for four to five agencies, 25 (28.1%) have worked for two to three agencies, and 28 (31.5%) DSPs have worked for one agency (see Table 1). The sample consisted of 48 Caucasian participants (53.9%), 25 African American participants (28.1%), 10 Hispanic participants (11.2%), and six (6.7%) participants from other ethnic backgrounds (see Table 1). The sample used for this study does not represent the entire workforce of DSPs in the United States working in residential settings for IDD populations. The sample used only represents a fraction of the workforce in New York state.

Table 1

Demographic and Gender Distribution

Variables	Frequency (n)	Percentage (%)
Gender		
Female	65	73.0
Male	24	27.0
Ethnicity		
African American	25	28.1
Caucasian	48	53.9
Hispanic	10	11.2
Other	6	6.7
Total	89	100.0

Results

I started the process for data analysis by screening, cleaning the data, and then testing the assumptions for the data analysis methods. Quantitative instruments used in data collection included the demographic questionnaire (Brad-burn et al., 2004), ProQOL-5 (Stamm, 2005), and WVI (Super, 1970). The demographic questionnaire was used to collect data by identifying participants working or who have worked in a residential setting to meet the designated criteria. This was to measure the dependent variable of turnover and screen participants before allowing study participation. The ProQOL-5 was used to measure stress. The ProQOL was created to establish the impact

of stress on health professionals working with IDD individuals in hospital or healthcare facilities settings. The WVI measures work values using five subscales. Only the subscales that measure recognition (achievement; Questions 13, 17, and 44) and autonomy (independence; Questions 5, 21, and 40) were used for this study. After obtaining permission to use the ProQOL (Stamm, 2005) and the WVI (Super, 1970), the subscales related to this study were transferred to an online survey on Survey Monkey to collect data.

Data Screening and Cleaning

The first step in the data analysis process was downloading the data collected through Survey Monkey into SPSS. My next step in the data analysis process was to check the data for outliers. Outliers are scores that are significantly different from the majority of the scores in the data set (Aguinis et al., 2013). I used graphs, including histograms and boxplots, to identify potential outliers. Based on the graphs, I did not find outliers in the work stress, work recognition, and work independence variable data sets and the turnover variable data set.

Descriptive Statistics

The review was completed of trends in the data by calculating the mean, median, mode, range of scores, the standard deviation, and the lowest and highest score for each of the predictor variables (stress at work, work recognition, and independence at work) and the outcome variable turnover of DSPs working in residential facilities. The ProQOL-5 was used to measure the variable stress at work. Using a 5-point Likert scale ranging from *never* to *very often*, the participants reported how often they experienced

stress in the workplace. Scores less than 22 are considered a low level of stress at work, scores between 23 and 41 are considered an average level of stress at work, and scores of 42 or more are considered a high level of stress at work. The participants' mean score was 25.91, with a standard deviation of 10.78. The median score was 27, and the mode was 33.0. The range was 40, with the lowest score of 10 and the highest score of 50 (see Table 2).

The predictor variable of autonomy was measured with the WVI. Study participants rated how often they perceive their efforts at work being recognized in a 5-point Likert scale that ranged from *unimportant* to *very important*. The highest possible score on the scale is 15. The mean score for work autonomy was 10.87, with a standard deviation of 3.56. The median score was 12.0, and the mode was 12.0. The range was 12.0 points, with the lowest score of 3 and the maximum of 15 (see Table 2).

Lastly, the predictor variable of work recognition was measured with the WVI. Study participants rated how often they perceive their efforts at work being recognized in a 5-point Likert scale that ranged from *unimportant* to *very important*. The highest possible score on the scale is 15. The mean score for work recognition was 7.30, with a standard deviation of 3.569. The median score was 7.0, and the mode was 3.0. The range was 12.0 points, with the lowest score of 3 and the maximum of 15. These data indicate that most study participants enjoy having their work recognized by the employer (see Table 2).

Table 2

Descriptive Statistics

Variable	N	Min.	Max.	Mean	SD
Stress	89	10.00	50.00	25.91	10.78
Autonomy	89	3.00	15.00	10.87	3.56
Recognition	89	3.00	15.00	7.30	3.69
Valid N (listwise)	89				

The statistical assumption for this study was that the predictor variables of autonomy at work, occupational stress, work recognition have a relationship with the outcome variable of turnover.

Statistical Analysis

Binary Logistic Regression

Binary logistic regression data analysis was conducted to answer the research question and test the study's hypotheses. Binary regression uses predictor variables to predict an outcome of a binary categorical variable. Binary regression uses one or more predictor variables, either categorical or continuous, to predict the target variable. Binary regression helps identify factors that may affect the target variable and the nature of the relationship among the predictor variables and the predicted variable (Shipe et al., 2019).

The research question for this study was: To what extent do autonomy at work, occupational stress, and work recognition have a relationship with turnover among DSPs employed by or who have left employment in a residential facility for IDD individuals?

Binary logistic regression examined whether work stress, work independence, and work recognition are related to turnover in residential settings. The model was not statistically significant X^2(2, N = 89) =2.18, p = .53, suggesting that stress, autonomy, recognition did not predict turnover. The results from the study accept the null hypothesis as there is no significant relationship between the predictor and dependent variables. As shown in Table 3, neither one of the variables used for the study contributed a unique prediction to the model.

Table 3

Binary Logistic Regression Predicting the Likelihood of Turnover

	B	*SE*	Wald	*df*	*p*	*OR*	95% C.I. *OR*	
							LL	*UL*
Stress	.05	.17	.11	1	.738	1.06	.75	1.50
Autonomy	.21	.25	.71	1	.399	1.23	.75	2.02
Recognition	–.28	.44	.40	1	.523	.75	.31	1.79
Constant	–3.35	1.44	5.37	1	.020	.03		

Summary

This binary logistic regression quantitative study aimed to determine the relationship between the turnover of DSPs working in a residential setting for IDD individuals. Binary logistic regression analysis was used to test the relationship of the predictor variables predicted turnover. The regression analysis indicated that the

combination of the predictor variables of work stress, work independence, and work recognition could not significantly predict turnover.

This data analysis suggests there are additional factors not explored in this study that contributed to the turnover of these professionals. Information is provided by discussing these findings, limitations, and implications for the DSPs field in Chapter 5.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

In this research study, I aimed to expand the literature regarding turnover in residential facilities servicing IDD individuals. There is limited literature addressing the intrinsic perceptions of DSPs regarding independence, stress, and recognition as predictors of staff turnover at residential facilities for IDD individuals. Steinmetz et al. (2014) identified low pay rates as the most common cause of turnover in mental health settings. In the present study, I analyzed independence, stress, and recognition as predictors of staff turnover at residential facilities for IDD individuals. The research question for this study was: To what extent do autonomy at work, occupational stress, and work recognition have a relationship with turnover among DSPs that are employed by or who have left employment in a residential facility for IDD individuals?

The theoretical framework used for this study was based on the work satisfaction theory proposed by Kalleberg (1977) and reviewed by Kalleberg and Marsden in 2019. Kalleberg (1977) proposed three domains to assess job satisfaction: (a) the employee's intrinsic characteristics, (b) the employee's extrinsic characteristics, and (c) resource adequacy. Intrinsic characteristics of the employee refer to the positive attitude the employee has regarding the place of work, such as feeling supported, appreciated for the performed job, and treated equally among other workers. Extrinsic characteristics of the employee refer to those resources the employee receives for performing a job. Extrinsic characteristics can be the benefits received at work, salary rates, and recognition from management for a completed job. The last dimension proposed by Kalleberg (1970) is

resource adequacy. Resource adequacy is those resources the employee can use at work, such as help from coworkers, adequate equipment needed for job performance, supervisory assistance, and support from other departments within the agency. Kalleberg (1970) noted that the absence of any of those dimensions at work could produce a negative performance at work from the employee.

Interpretation of Findings

The results of this study contradict previous research regarding DPS turnover in residential settings for IDD individuals. In previous studies regarding turnover in mental health settings, researchers have indicated that stress, independence, and work recognition are significant causes for turnover in those settings. However, those previous studies were not conducted in residential settings for IDD individuals.

The findings presented in Chapter 4 do not support Kalleberg's theory. DSPs endure many pressures while caring for an IDD individual. However, intrinsic perceptions of independence, stress, and recognition are not the leading cause of turnover in those facilities. The services a DSP provides to an IDD individual are essential for the individual's well-being. Those services vary from meal preparation and personal hygiene to money management. A DSP plays the role of caregiver and the role of mentor. The relationship between the IDD individual and the DSP goes beyond the expectancy of services from a DSP. The increased need for and retention of DSPs working in residential settings is an issue many human services agencies struggle with.

Stress at Work

In previous studies regarding nurses working in healthcare settings in direct contact with IDD individuals, researchers found that stress levels of nurses working in those environments may be associated with turnover. Those studies also revealed that supervisors micromanaging the nurses' work or nurses not receiving enough recognition for their performance influenced their perceptions regarding their place of employment (Clausen et al., 2014; Dyrbye et al., 2017; Enns et al., 2015; Estryn-Behar et al., 2010; Joo et al., 2015; Mitchell & Braddock, 1994; Selden, 2010; Van De Voorde et al., 2016; Yanchus et al., 2017).

Autonomy

According to Risinger and Fetterer (2021), workers need to have autonomy at work, which catalyzes human success and fulfillment. Autonomy at work is derived from self-determination (Risinger & Fetterer, 2021). Self-determination is composed of three areas: (a) competence, (b) autonomy, and (c) readiness. Autonomy at work can be defined as the desire to be self-sufficient when performing and completing a task. A DSP perceiving they have autonomy at work is self-encouraged to continue demonstrating engagement, self-determination, greater satisfaction, and fulfillment at the workplace. A DSP perceives those achievements as the ability to perform better.

According to Sönmez and Yıldırım (2018), autonomy at work should be a practice for employers to promote stability in their workforce. For an agency providing services to IDD individuals, managing the employee's time helps them control how the employee spends their time at work. That means an agency that manages an employee's

time to maintain productivity may lose the employee's loyalty to the agency. Affective commitment can be understood as the intrinsic motivator and the autonomy a worker experiences at the worksite, deviating from intentions to leave the agency. Autonomy at work can also promote affective environments and opportunities for workers to develop a sense of responsibility related to work performance (Bouraoui et al., 2019).

Job autonomy has been linked to workers' well-being as well. An increase in mental health problems for workers has been linked to low autonomy at work (Madsen et al., 2017; Theorell et al., 2015), disability retirement (Clausen et al., 2014b; Knardahl et al., 2017), somatic health problems (Ferrie et al., 2016; Theorell et al., 2016), sickness absence (Clausen et al., 2014a), and turnover (Clausen & Borg, 2010; Hayes et al., 2012). Sönmez and Yıldırım (2018) suggested a need for further exploration of work autonomy as insufficient data has suggested work autonomy is directly linked to turnover in mental health settings.

Stress

Zhong et al. (2020) demonstrated that when a DSP experiences work-related stress, a series of psychological conditions are also observed. Higher levels of depression can be observed as a response to stress at work. The DPS experiences feelings and thoughts regarding their capacity to resolve problems for the IDD individual they support. Zhong et al. (2020) found that 40% to 70% of those DSPs have clinically significant symptoms of depression as a result of stress at work. Half of the percentage meet the criteria for a major depressive disorder. Zhong et al. (2020) also found that with stress at work, a DSP experiences feelings of frustration, anger, energy drained, guilty, or

helplessness due to providing care to IDD individuals. A DSP may develop secondary feelings of depression due to experiencing stress at work; such secondary feelings include the DSP feeling a loss of self-identity, lower levels of self-esteem, constant worry, or feelings of uncertainty (Zhong et al., 2020). According to Zhong et al. (2020), 16% of DSPs experience emotional strain, and 26% have expressed that caring for a care recipient is hard emotionally; an additional 13% of DSPs feel frustrated with the lack of progress made with the IDD individual due to feeling stressed at work. DSPs experiencing chronic stress may be at greater risk of cognitive decline, including a loss in short-term memory, attention, and verbal IQ (Zhong et al., 2020).

Shapiro et al. (2019) indicated that many DSPs experience caregiver stress syndrome due to high levels of stress at work. Caregiver stress syndrome is characterized by mental, physical, and emotional exhaustion resulting from the DSP neglecting their emotional and physical well-being when taking care of IDD individuals. The stress a DSP experiences can also contribute to feeling overwhelmed by the constant demands of taking care of an IDD individual or having unrealistic expectations for the assistance of IDD populations (Shapiro et al., 2019).

According to Nodell (2014), providing care for a person with disabilities is on the top of the life stressors list. Nodell (2014) further explained that insufficient data supports the claim that providing care for a person with disabilities promotes high distress levels in a DSP. Nodell (2014) hypothesized that DSPs or caregivers might have an existent high level of stress before committing to a person with a disability.

Recognition

Employee recognition allows an agency to acknowledge and praise DSPs' achievements. Recognition can be an expression of appreciation, motivating the workforce and promoting better results in work performance. Recognizing the work of a DSP and how they deliver services to IDD individuals must be a continuous process for agencies providing services and support to those individuals. Asegid et al. (2014) studied nurses in mental health settings and asserted that promoting a culture to recognize employees' efforts can increase staff retention. A healthcare worker who perceives receiving recognition for a job well done is most likely to remain working for the agency.

Robbins (2019) argued that employees from all sectors need recognition and appreciation. Employers often perceive recognition and appreciation as having the same outcome; however, these concepts have different meanings in the mental health industry. *Recognition* refers to the capacity to provide clear and positive feedback based on the results or job performance of a DSP. Recognition can create a sense of ownership, loyalty, and high performance in a DSP related to working for the agency. Recognition at work also has its limits. Recognition can be conditional based on past performance and uncommon practice. Appreciation, however, refers to acknowledging the DSP for who they are regardless of job achievements. Appreciation is how an agency values a DSP for their ideals as a person, not as a worker. Recognition is about work performance, and appreciation is about valuing the DSP as a person (Robbins, 2019).

Limitations of the Study

The following limitations were identified in this study. The study was conducted in one specific residential setting. Thus, the findings associated with this study do not generalize to all the residential settings for IDD individuals in the United States. The participants for the study were primarily women, such that the findings do not generalize to male DSPs. The majority of participants for the study were Caucasian workers, so the findings do not generalize to different racial or ethnic groups of DSPs. The data collected for the study were self-reported from current and previous DSPs; these data cannot be independently verified. The self-reported data could be influenced by selective memory, exclusion, and exaggeration.

Another limitation of this study was that the agency implemented communication restrictions on the use of emails to communicate with potential participants. The information needed for this study was collected using the target number of participants. Additional areas for research regarding possible causes of turnover in residential settings are identified for further research on this topic. The theoretical implications for this study suggest that Kalleberg's theory of job satisfaction cannot be solely attributed to intrinsic factors for turnover of DSP working in residential settings. DPSs may be concerned about other areas when contemplating leaving a job. Autonomy, stress, and recognition are only some of the areas that may influence turnover in those settings.

Recommendations

The findings from this study indicate that there is no correlation between the predictor variables of stress, independence, and work recognition and turnover for DSPs

working in residential facilities for IDD individuals. The results imply that other factors that were not investigated may influence a DSP to leave an agency. Other causes that may be hypothetically associated with turnover may include long working hours, health insurance benefits, retirement benefits, inadequate managerial supports for DSPs, and excessive demands experienced as a result of agency policies and procedures (Temple, 2017).

Other studies suggest that many other factors may contribute to turnover in assisted living facilities. Such factors include low pay rates, employee evaluations, or employee retention programs (Morgan, 2020). Another possible cause for turnover is that recently graduated individuals may seek employment in such residential facilities to gain experience in their field. The majority of these young professionals may then find better employment opportunities after gaining the necessary experience.

A different area associated with turnover not included in this study is compassion fatigue in residential facilities (Purdy & Antle, 2021). Compassion fatigue is the impact that one individual receives for helping another individual. The impact may be physical, emotional, or psychological. A DSP serves as personal support to an IDD individual in a residential setting. The DSP may play several different roles during day-to-day interactions. These roles include acting as a counselor, financial advisor, or personal chef, or even acting as a crisis manager (Jameson & Parkinson, 2021). The DPS may experience compassion fatigue as a result of having so many various roles to fulfill when assisting an IDD individual. Further research exploring other possible factors may help expand the literature and the knowledge related to the factors that contribute to or prevent

turnover in residential facilities. Further qualitative studies may provide information regarding different phenomena not included in this research, which may be related to turnover in residential facilities.

In terms of future research related to turnover in residential facilities for IDD individuals, I recommend including a larger sample of DSPs to better explore different areas that may contribute to turnover or help a DSP continue employment with the agency. Another recommendation for further research is for the researcher to have direct contact with staff members at residential facilities rather than having the human resources or other departments disseminate the surveys needed to collect data for the study. The data collection for this study relied on the human resources department for the agency. As a result, the participants may have been concerned that the department may have had access to their responses. The method used for in house recruitment used by the agency may have unintentionally created a bias in the DSPs' responses.

Implications

DSPs turnover in residential facilities has a negative impact on IDD individuals who rely on those professionals' assistance and support. Recognizing factors contributing to turnover will enhance the services offered to IDD individuals and can create a positive work environment for DSPs in human services agencies. Protected populations such as IDD individuals require solid and consistent support from DSPs in order to survive and thrive.

This research studied the relationship between stress, independence, work recognition, and turnover for DSPs working in residential facilities for IDD individuals.

The results did not establish the relationship between the predictor and criterion variables. However, in my opinion, those factors, among many others, play an essential role in turnover for those facilities. Implementing organizational programs that will include specialized training, incentive programs, an increase in the workforce, lowering working hours and caseloads could promote a better work environment for DSPs working with IDD individuals.

A stressful work environment or a sense of not being supported by the agency may create the conditions for mental, emotional, and physical exhaustion for a DSP. As a result, a DSP can disconnect from vital relationships in their life. This sense of disconnection may have a DSP withdraw from family and friends, causing indirect harm to the individuals they support. Another area of turnover in residential settings is the financial instability and increased vulnerability of DSPs and their families. Improving retention programs in residential settings could decrease turnover in those facilities, increase the quality of life for the individuals who depend on DSPs, and enhance social change by producing an overall sense of well-being among this social economic class of service providers.

Addressing organizational and personal factors that contribute to the turnover of DSPs working in residential settings is a responsibility not only for the training department but also for any other departments within the agency. It is also the responsibility of the many departments that make an agency function, such as the administration and human resources and the resources associated with financial, mental health, and medical services. These additional departments also must be engaged with

supporting the well-being of DSPs working in those settings in order to help decrease turnover.

The task of providing support to IDD individuals in residential settings is more profounds and significant than most people nay know or even consider. DSPs have a tremendous impact on the life of the individual they support and the individual's family inside the residential setting and beyond. Understanding the factors that contribute to turnover in residential settings will provide pertinent information for the training department, administration, human resources, financial, mental health, and medical services on how to increase the retention of DSPs and potentially improve the working environment for them in residential settings. Increasing the understanding of factors influencing turnover in residential settings as presented in this study offers the opportunity for human services agencies to develop a proactive approach to continue to promote social change throughout their services to IDD individuals.

Conclusion

This study aimed to establish the relationship between stress, independence, work recognition, and turnover for DSPs working in residential facilities for IDD individuals. The results from this study did not establish that those factors are significant for DSPs to leave their jobs. The findings in this study suggest that other departments within the agency can assist with programs for DSPs retention by addressing different issues that may play an essential role in DSPs' turnover in residential facilities. In addition, enhanced supervision and training support can address intrinsic perceptions of hostile work environments and decrease turnover. A reliable and capable workforce in a

residential setting is essential for providing adequate support to IDD individuals. Addressing additional factors for turnover not presented in this study can prevent the high cost of turnover in residential settings and increase the quality of services delivered to IDD individuals.

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Appendix A: Letter of Intention

Residential facilities for IDD individuals
Executive Director

Dear Executive Director,

I am in the Clinical Psychology Ph.D. program at Walden University. I am completing a research as part of the dissertation process. The topic of the dissertation is the relationship between work stress, work independence, and work recognition as predictors of turnover in direct support professionals working in residential facilities. In order to collect data for the study, a survey needs to be completed by direct support professionals no longer working for the agency. The goal is to analyze the data for a minimum of 89 participants to find the relationship between the predictor variables and criterion variable.
For such, I am requesting your support by allowing me to work with the human resources department to send an invitation to those support professionals no longer working for the agency. The invitation will contain an explanation for the study and a link for the survey. Once the participant accepts and opens the link for the survey, the survey will start with informed consent to participate in the study, a demographic survey, followed by the instruments used to measure stress, recognition, and independence at work.
In a previous meeting, I have delivered a copy of the prospectus for the study.
If you have any further questions, please do not hesitate to contact me.
Thank you for your time and consideration for my study.

Sincerely,
Doctoral Student, Walden University

Appendix B: Participation Invitation Letter

Dear Invitee,

I am a doctoral student at Walden University's Clinical Psychology Program. I am kindly requesting your participation in a doctoral research study that I am conducting titled: the relationship of work stress, work recognition, and work independence as predictors of turnover in direct support professionals working in a residential facility. The intention is to assess how stress, recognition, and independence at work influence turnover in direct support professionals.

The study involves completing basic demographic information and two surveys: the ProQOL5 (Stamm, 2005) and the Work Values Inventory (Super, 1968).

Participation is completely voluntary, and you may withdraw from the study at any time. The study is completely anonymous; therefore, it does not require you to provide your name or any other identifying information. If you would like to participate in the study, please read the Informed Consent letter below. To begin the study, click the survey link at the end.

Your participation in the research will be of great importance to assist in social change by providing information on how direct support professionals perceive the environment where they work and how factors such as stress, recognition, and independence at work influence turnover.

Thank you for your time and participation.

Sincerely,

Doctoral Student, Walden University

Appendix C: Letter of Consent

You are invited to take part in a research study about how stress, recognition, and independence at work influenced turnover in direct support professionals that worked in a residential setting. You may have gained access to this study through your organization that agreed to participate in assisting recruiting potential participants. This form is part of a process called "informed consent" to allow you to understand this study before deciding whether to take part.

This study is being conducted by a doctoral student at Walden University.

Background Information:

The purpose of this study is to assess how personal perceptions such as stress, recognition, and independence at work influence a direct support professional in deciding to quit their job for the agency.

Procedures:

If you agree to be in this study, you will be asked to:

- You will be asked to complete a brief demographic questionnaire that includes seven questions that will take approximately one minute to complete.
- You will be asked to complete a survey (Professional Quality of Life Scale) that includes 30 questions and will take approximately 15 minutes to complete.
- You will be asked to complete a survey (Work Values Inventory) that includes 45 questions and will take approximately 30 minutes to complete.

Here are some sample questions:

1. I am preoccupied with more than one person I assist.
2. I get satisfaction from being able to assist people.
3. I feel depressed because of the traumatic experiences of the people I assist.
4. I have a boss who gives you a fair deal.
5. I like the setting in which your work is done.

Voluntary Nature of the Study:

This study is completely voluntary. Everyone will respect your decision on whether or not you choose to be in the study. No-one associated with this survey will treat you differently if you decide not to be in the study. Additionally, this study is completely anonymous, and no one will know if you did nor did not participate. If you decide to join the study now, you can still change your mind later. You may stop at any time.

Risks and Benefits of Being in the Study:

Being in this type of study involves some risk of minor discomforts that can be encountered. Discomforts such as stress and concerns regarding the relationships with the agency you worked for. Being in this study would not pose a risk to your safety or wellbeing.

The benefits of the study include voicing your thoughts and concerns regarding personal perceptions that can arise in a work environment, especially in a residential setting.

Payment:

This study is completely voluntary; there will be no reimbursement or payment for time.

Privacy:

Any information you provide will be kept anonymous. The researcher will not use your personal information for any purposes outside of this research project. Also, the researcher will not include your name or anything else that could identify you in the study reports. Data will be kept secure by password protection and data encryption. Data will be kept for at least five years, as required by the university.

Contacts and Questions:

If you have questions now or at a later time, you may contact the researcher, or ask any questions you have before you begin the survey. If you want to talk privately about your rights as a participant, you can call Walden University at 855-372-8527.

Please print or save this consent form for your records.

Statement of Consent

I have read the above information. I feel I understand the study well enough to make a decision

about my involvement. By clicking the link below, I understand and agree to the terms described above. Please indicate your consent by clicking the link below.

Link to Survey:

https://www.surveymonkey.com

Appendix D: Survey

Demographic Survey Questions

1. What is your age group?
   [ ] 21-30 [ ] 31-40 [ ] 41-50 [ ] 51+

2. What is your ethnicity:
   [ ] African-American [ ] With [ ] Hispanic [ ] Other _____

3. Are you
   [ ] Male [ ] Female

4. What is your marital status?
   [ ] Married [ ] Not married

5. What is the highest level of education you have completed?
   [ ] High School [ ] Bachelor's Degree [ ] Under-Graduate Degree

6. For how many agencies serving intellectual-developmental disabled people have you worked?
   [ ] 1 [ ] 2 – 3 [ ] 4 - 5 [ ] 6+

7. For have long did you work for the last agency?
   [ ] Less than 6 months [ ] 6 months to 1 year [ ] 1 year to 3 years [ ] 3 years +

PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)
COMPASSION SATISFACTION AND COMPASSION FATIGUE (PROQOL) VERSION 5 (2009)

When you assisted people you have direct contact with their lives. As you may have found, your compassion for those you assisted can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a direct support professional. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how you felt working with those individuals.

1=Never	2=Rarely	3=Sometimes	4=Often	5=Very Often

_____ 1. I am happy.
_____ 2. I am preoccupied with more than one person I assist.
_____ 3. I get satisfaction from being able to assist people.
_____ 4. I feel connected to others.
_____ 5. I jump or am startled by unexpected sounds.
_____ 6. I feel invigorated after working with those I assist.
_____ 7. I find it difficult to separate my personal life from my life as a direct support professional.
_____ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I assist.
_____ 9. I think that I might have been affected by the traumatic stress of those I assist.
_____ 10. I feel trapped by my job as a direct support professional.
_____ 11. Because of my assisting, I have felt "on edge" about various things.
_____ 12. I like my work as a direct support professional.
_____ 13. I feel depressed because of the traumatic experiences of the people I assist.
_____ 14. I feel as though I am experiencing the trauma of someone I have assisted.
_____ 15. I have beliefs that sustain me.
_____ 16. I am pleased with how I am able to keep up with assisting techniques and protocols.
_____ 17. I am the person I always wanted to be.
_____ 18. My work makes me feel satisfied.
_____ 19. I feel worn out because of my work as a direct support professional.
_____ 20. I have happy thoughts and feelings about those I assist and how I could help them.
_____ 21. I feel overwhelmed because my case load seems endless.
_____ 22. I believe I can make a difference through my work.
_____ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I assist.
_____ 24. I am proud of what I can do to assist.
_____ 25. As a result of my assisting, I have intrusive, frightening thoughts.
_____ 26. I feel "bogged down" by the system.
_____ 27. I have thoughts that I am a "success" as a direct support professional.
_____ 28. I can't recall important parts of my work with trauma victims.
_____ 29. I am a very caring person.
_____ 30. I am happy that I chose to do this work.

WORK VALUES INVENTORY

Donald Super

The statements below represent values which people consider important in their work. These are satisfactions which people often seek in their jobs or as a result of their jobs. They are not all considered equally important; some are very important to some people but of little importance to others. Read each statement carefully and indicate how important it is to you.

5 means "Very Important"
4 means "Important"
3 means "Moderately Important"
2 means "Of Little Importance"
1 means "Unimportant"

WORK IN WHICH YOU: SELECT ONE

1. have to keep solving problems	5	4	3	2	1
2. help others	5	4	3	2	1
3. can get a raise	5	4	3	2	1
4. look forward to changes in your job	5	4	3	2	1
5. have freedom in your area	5	4	3	2	1
6. gain prestige in your field	5	4	3	2	1
7. need to have artistic ability	5	4	3	2	1
8. are one of the gang	5	4	3	2	1
9. know your job will last	5	4	3	2	1
10. can be the kind of person you would like to be	5	4	3	2	1
11. have a boss who gives you a fair deal	5	4	3	2	1
12. like the setting in which your work is done	5	4	3	2	1
13. get the feeling of having done a good day's work	5	4	3	2	1
14. have the authority over others	5	4	3	2	1
15. try out new ideas and suggestions	5	4	3	2	1
16. create something new	5	4	3	2	1
17. know by the results when you've done a good job	5	4	3	2	1
18. have a boss who is reasonable	5	4	3	2	1
19. are sure of always having a job	5	4	3	2	1
20. add beauty to the world	5	4	3	2	1
21. make your own decisions	5	4	3	2	1
22. have pay increases that keep up with the cost of living	5	4	3	2	1

23. are mentally challenged	5	4	3	2	1
24. use leadership abilities	5	4	3	2	1
25. have adequate lounge, toilet and other facilities	5	4	3	2	1
26. have a way of life, while not on the job, that you like	5	4	3	2	1
27. form friendships with your fellow employees	5	4	3	2	1
28. know that others consider your work important	5	4	3	2	1
29. do not do the same thing all the time	5	4	3	2	1
30. feel you have helped another person	5	4	3	2	1
31. add to the well-being of other people	5	4	3	2	1
32. do many different things	5	4	3	2	1
33. are looked up to by others	5	4	3	2	1
34. have good connections with fellow workers	5	4	3	2	1
35. lead the kind of life you most enjoy	5	4	3	2	1
36. have a good place in which to work (quiet, calm, etc.)	5	4	3	2	1
37. plan and organize the work of others	5	4	3	2	1
38. need to be mentally alert	5	4	3	2	1
39. are paid enough to live very well	5	4	3	2	1
40. are your own boss	5	4	3	2	1
41. make attractive products	5	4	3	2	1
42. are sure of another job in the company if your present job ends	5	4	3	2	1
43. have a supervisor who is considerate	5	4	3	2	1
44. see the result of your efforts	5	4	3	2	1
45. contribute new ideas	5	4	3	2	1