

**BEHAVIOUR MANAGEMENT CHALLENGES: THE  
RELATIONSHIP BETWEEN PREPAREDNESS AND  
PRACTICE EXPERIENCES OF CHILD AND YOUTH CARE  
WORKERS IN KWAZULU-NATAL**

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Technology

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## Declaration

This is to certify that the work is entirely my own and not of any other person, unless explicitly acknowledged (including citation of published and unpublished sources). The work has not previously been submitted in any form to the Durban University of Technology or to any other institution for assessment or for any other purpose.

18 March 2021

Signature of student

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# **Abstract**

## **Background**

The Child and Youth Care (CYC) profession entails caring for children and youth at risk. The provision of this care includes various challenges with behaviour management being one of the main challenges. Children at risk are known to experience challenges in managing their own behaviours, thus needing Child and Youth Care workers (CYCWs) to assist in this area. Various studies have proven that CYCWs struggle with behaviour management. This study therefore intended to explore whether CYCWs are adequately and effectively trained and prepared to successfully cope with behaviour management challenges. This study focused on CYCWs educational preparation to assist children in residential care centres with behaviour management challenges.

## **Aim of the study**

The aim of the study was to explore the relationship between preparedness and practice of CYC workers in relation to managing the behaviours of children at risk.

## **Methodology**

This study used a qualitative, exploratory, descriptive and contextual design. The population of this study was CYCWs in KwaZulu-Natal who are working in residential Child and Youth Care Centres (CYCCs). Two CYCCs were approached for data collection, with 11 participants from one CYCC and 10 from the other CYCC. Data was collected via individual interviews which were conducted telephonically due to the COVID 19 pandemic. The collected data was analysed by the researcher using Tesch's eight steps of analysis.

## **Findings**

The following four major themes emerged from the interviews: The most common challenging behaviours displayed by children in CYC residential centres;

integration of theory and practice; children's response to behaviour management and the use of alternatives in managing children's challenging behaviours.

### **Conclusion**

The growth of the CYC profession is dependent on the type of individuals professionalised for practice in the field. Hence, putting effort in developing the best type of training may contribute towards achieving the level of care and growth needed in children at risk.

**Key words:** Behaviour management, Child and youth care, integration of theory and practice, Child and Youth Care workers' preparedness.

## **Dedication**

This dissertation is dedicated to those who give their lives, time, and hearts to care for children and youth at risk, especially those in residential CYCCs. For your patience when things get tough, for your courage when everyone gives up and runs away from children, for your love, smiles and warm hearts. May this dissertation encourage you to continue providing care with the hope that soon your voices will be heard and your hard work bear fruits.

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## **Glossary of terms**

### **Child and Youth Care**

Professional Child and Youth Care (CYC) practice focuses on the infant, child, and adolescent, both normal and with special needs, within the context of the family, the community, and the life span. The developmental-ecological perspective emphasizes the interaction between persons and the physical and social environments, including culture and political settings (Stuart 2013: 5). This profession focuses on the developmental needs of children, youth and their families within the space and time of their environment and daily lives (Stuart 2009:16). Care is the core of the practice of this profession and caring means caring for the emotional needs, educational needs, health and nutritional needs or any other need of young people (Gharabaghi 2010: 135. CYC is broadly concerned with promoting and supporting the optimal development and well-being of young people through the use of approaches that focus on individuals and their social circumstances and environments (White 2007: 227).

### **Child and Youth Care Worker**

Child and Youth Care workers are front-line human service professionals who work in constant contact with children, youth and their families and are responsible for their daily living needs (Whelton and Barford 2010: 273). CYCWs work with children, youth and families with complex needs within a variety of settings such as group homes, residential centres, hospitals, community mental health clinics, community-based outreach and school-based programmes, parent education and family support programmes as well as in private practice and juvenile justice programmes, (Stuart 2013: 6). Stuart (2013:6) continues to explain that CYCWs specialize in the development and implementation of therapeutic programmes and planned environments utilising daily life events to facilitate change.

## **Residential Care Centres/ Child and Youth Care Centres**

These are commonly referred to as Child and Youth Care Centres or Therapeutic Residential Centres. These are centres involving the 'planful' use of a purposefully constructed, multi-dimensional living environment designed to enhance or provide treatment, education, socialization, support and protection to children and youth with identified mental health or behavioural needs. This is done in collaboration with families and community tapping into formal and informal resources (Whittaker *et al.* 2016: 89).

## Acronyms

<b>Acronym</b>	<b>Full word/sentence</b>
BQCC	Basic Qualification in Child Care
CYC	Child and Youth Care
CYCC	Child and Youth Care Centre
CYCW	Child and Youth Care Worker
IREC	Institutional Research Ethics Committee
KZN	KwaZulu-Natal
NACCW	National Association of Child Care Workers
NQF	National Qualification Framework
USA	United States of America



# CHAPTER 1: OVERVIEW OF THE STUDY

## 1.1 INTRODUCTION AND BACKGROUND TO THE STUDY

Child and Youth Care (CYC) work focuses on the developmental needs of young people and their families within the space and time of their daily lives (Stuart 2009: 16). CYC work focuses on observing daily interactions as well as paying attention to the response of young people and their families to any planned or unplanned interventions (Molepo and Delport 2014: 152). Like most social services, CYC work has its own challenges, which Child and Youth Care workers (CYCWs) must face daily, especially in residential facilities. One of the most prominent challenges faced by CYCWs in their work are dealing with young people's challenging behaviours (Molepo and Delport 2014: 152). Young people in residential facilities are removed from their families as most of them show a high degree of psychopathology and problem behaviours, much more than young people in other types of care (Harder and Knorth 2014: 217).

This, therefore, means that these young people need special care and assistance provided by professionals who are well-trained and who clearly understand what their work entails. For this reason, CYCWs require much more than simple training, they require a range of learning opportunities at a range of educational levels which will equip them to meet the developmental and therapeutic needs of young people at risk (Winfield 2013: 22). As first line disciplinarians, CYCWs express a great need for support when it comes to managing young people's behaviours (Thesen 2014: 116). Evidence proves that CYCWs struggle greatly with behaviour management as Valk *et al.* (2015: 14) reports that workers resort to punishment when dealing with challenging behaviours. This action proves that workers are struggling and are in need of assistance. Molepo and Delport (2014: 150) highlighted in their report that some CYCWs at practice level; "do little more than

attend to the crisis at hand”, possibly because of a lack of skills due to inadequate preparation or training.

Training is made available to CYCWs with the intention of assisting workers and mostly equipping them for the challenging work at hand and to ensure that the work is more manageable and competent. This then raises concerns and questions by the researcher as to why there seems to be so many challenges still present. To support this statement, Molepo and Delpont (2014: 142) explain that the National Association of Child Care Workers (NACCW) in South Africa has developed accredited CYC training up to level 4 of the National Qualification Framework (NQF) which is aimed at enhancing the knowledge level and skills of CYC workers. This NACCW is not the only organisation offering such training but has been selected for the interest of this study.

The aim of this study is to explore the relationship between preparedness and practice of CYCWs in relation to managing children’s behaviours. This study intends to determine the effectiveness of the strategies of behaviour management, which CYCWs acquire during training. This is inspired by gaps, which are visible in various studies explored above, and more to be explored further in this study.

## **1.2 PROBLEM STATEMENT**

The biggest challenge faced by CYCWs in their work is dealing with and managing challenging behaviours of young people in their care. Studies have presented evidence that workers are struggling to deal with challenging behaviours displayed by young people in their care (McLean 2015: 344; Valk *et al.* 2015; Molepo and Delpont 2014: 152). Grietens (2002) cited in Harder and Knorth (2014: 217) state that delinquent behaviour displayed by young people is more difficult to deal with compared to other problems.

A study conducted in a residential care centre in Israel revealed that deviant peer associations were found to contribute most to problem behaviour involvement (Melkman 2015: 117). Hence, in residential care centres, this association is heightened because of the large number of young people with problem behaviours, one can then only imagine the challenges faced by CYCWs responsible for dealing with these behaviours. In the United States of America (USA), James (2014: 52) reports numerous factors which include media reports, both current and past cases of abuse within residential settings, which may have included resorting to punishment. CYCWs are said to be well-trained for their practice, but to some extent it seems like for some workers, the opposite is true. There is therefore a great need for trainers to be made aware of the results of the theory provided CYCWs, whether it is practical or not so effective.

### **1.3 AIM OF THE STUDY**

The aim of the study was to explore the relationship between preparedness and practice of CYCWs in relation to managing behaviours of children at risk.

### **1.4 OBJECTIVES OF THE STUDY**

The objectives of the study were to:

- Explore the challenges experienced by CYCWs when correlating practice with the theory taught during training.
- Determine the effectiveness of strategies of behaviour management acquired during training.

### **1.5 RESEARCH QUESTIONS**

- What are the challenges experienced by CYCWs when correlating practice with the theory taught during training?
- How effective are the strategies of behaviour management acquired during training?

## **1.6 SIGNIFICANCE OF THE STUDY**

According to UNICEF (2017: 8), approximately 2.7 million children, in 140 countries worldwide live in residential care facilities. South Africa is known as having one of the most vulnerable youth populations in the world (Van Breda and Dickens 2016: 1-2). The Statistics South Africa (2010) reports that approximately 13 250 children were admitted in registered CYCCs and 5% of these children have been abandoned or neglected. These children and youth are therefore in great need of professional assistance, care and understanding if they are to have any chance in life. CYC work is focused on providing holistic care for children and/or youth in their life space. Part of this care is managing challenging behaviours of young people in care, which is seen as being the main problem for CYCWs. CYCCs are settings intended to provide holistic care, protection, nurturing and the diversion of negative behaviour, just to count a few. This is expected to be achievable since workers are well-trained for their practice (Jamieson 2013: 20). Thesen (2014: 66-70) also reported that CYCWs employed in residential CYCCs are often challenged by the behaviour of children in their care. They are uniquely prone to burnout because of the stressors they experience in their work (Seti 2008: 199).

According to Whittington and Burns (2010: 60), workers experience confusion regarding the manner of approaching challenging behaviours, whether to view it as an expression of needs or as problem behaviour. Additionally, workers experience challenges in responding appropriately and effectively to such behaviours and eventually experience episodes of fear and frustration. This consequently raises a question of whether the training provided to CYCWs is effective, practical and appropriate for their practice. Hence this study intended to explore the views of CYCWs regarding the gaps they perceive as being present in their training programme. This will in turn, inform training-providers of the need for any changes in terms of training.

## **1.7 STRUCTURE OF THE DISSERTATION**

**CHAPTER 1:** Overview of the study.

**CHAPTER 2:** Literature review.

**CHAPTER 3:** Theoretical framework.

**CHAPTER 4:** Research design and methodology.

**CHAPTER 5:** Presentation of findings.

**CHAPTER 6:** Discussion of findings.

**CHAPTER 7:** Summary, limitations, conclusion and recommendations.

## **1.8 SUMMARY OF THE CHAPTER**

In this chapter, the researcher briefly introduced the context of the study. This chapter also outlines the aim and objectives of the study. The next chapter will present and explore various studies and literature relevant to the study.

## **CHAPTER 2: LITERATURE REVIEW**

### **2.1 INTRODUCTION**

This chapter evaluates different sources which include academic and professional journal articles, books and web-based resources (Rowley and Slack 2004: 31). The researcher has formulated sub-headings in order to review available literature on the topic of this study.

### **2.2 CHILD AND YOUTH CARE WORK: SUMMARIZED**

In many countries around the globe, Residential CYC Work exists. This however is perceived as the 'last resort' solution which is avoided by all means possible (Knorth *et al.* 2008: 123). The CYCWs providing the care in these residential facilities are defined by Mattingly, Stuart and VanderVen (2010: 16), as individuals who promote optimal development of children, youth, and their families in a variety of settings. This work hence demands professionalism, which is focused on the improvement of quality. History reveals that CYCWs for a long time had no formal qualifications because these were not required; they were simply expected to look after children (Jamieson 2013: 85). The NACCW then developed the Basic Qualification in Child Care (BQCC), which became the first step towards the professionalization of the CYC profession.

Professionalization is connected to the improvement of the quality of service and is related to the quality of practice as well as a range of skills and knowledge, competency standards, ethical standards and other practice regulations (Commonwealth Secretariat 2017: 17). According to a technical brief published in 2013, (Jamieson 2013: 86) the CYC field has successfully achieved this. There are, however, numerous studies which pose questions to the practical

achievement of this professionalization at the grassroots level. This study focused on one of the challenges faced by CYCWs in their work with young people namely, behaviour management. CYCWs experience unique tensions when it comes to managing young people's behaviours in residential facilities. There is therefore a great need for improving staff training and to offer support to CYCWs in coping with this challenge (McLean 2015: 344-346). CYCWs revealed that one of their biggest challenges is dealing with young people's behaviours (Molepo and Delport 2014: 155). Barford and Whelton (2010: 271) took things further and explored the possible effects of daily challenges of CYCWs, stating that CYCWs are especially vulnerable to burnout as the characteristic challenges of working within the life-space of high-risk children and youth causes difficulties.

Additionally, Valk *et al.* (2015: 156) reported that CYCWs resort to punishment when dealing with challenging behaviours. Possibly, this is used as means of regaining control and is a result of professional helplessness in situations of escalating challenging behaviours. It has also been reported by Kuiper *et al.* (2016: 195) that workers exercise power over young people which may include force, punishment or the limiting of young people's autonomy. This is clear evidence of the high level of struggle on the side of CYCWs. Instead of effectively providing care, protection and behavioural support, workers seem to be causing more harm than good.

The concern therefore, which this study intends to explore further, is whether the theory provided during training is effective in practice. Most often, the focus of attention is on what training programmes should consist of and less on how education and training programmes might be imagined, constructed and implemented (Wojecki 2007: 125). This is a very thoughtful statement by Wojecki (2007) and provides guidance in exploring the connection between theory and practice in CYC training programmes. Behaviour management and support techniques are indicated clearly as being one of the modules offered during the

training of CYCWs (Jamieson 2013: 85). The visible challenges faced by workers impose negative results on the young people in their care; hence, defeating the purpose of residential care. Consequently, it is imperative to explore possible gaps that may exist.

## **2.3 BEHAVIOUR MANAGEMENT PREPAREDNESS AND PRACTICE: INTERNATIONAL VIEW**

### **2.3.1 Historical background of the Child and Youth Care field internationally**

The history of CYC work is quite difficult to locate, but literature refers to the first orphanages dating back to the 1700s in several communities across the continent being the beginning of this practice, and these being run by religious orders. By mid-1800s, they grew in size and began to hire lay staff that tended to work directly with children in the institutions. These children were admitted frequently in cases where parents were unable to provide for them adequately, due to poverty or illness (Charles and Garfat 2009: 17).

In North America, CYC has its roots in the recreational and 'fresh air' movements that occurred across the continent at the time of the big waves of immigration that occurred in the mid-1800s to early 1900s. This is the time where millions of people immigrated to North America primarily from European countries as well as other parts of the world. A number of organisations including Young Men's Christian Associations, the Young Women's Christian Association and the Boys' and Girls' Clubs were founded to provide services to young people who came from poverty-stricken backgrounds. It was within these orphanages, industrial and training schools, residential schools, as they were called at that time and community based recreational services that child and youth care was born in North America (Charles and Garfat 2009: 18).



A similar history is shared throughout the world as mentioned above (Charlse and Garfat 2009: 18). Over the years, CYC work became a profession and the responsibility of the country's governance to ensure that the practice is appropriate and not harmful to those in care. Del Valle and Bravo (2013: 251-257) report of an elaboration of Quality Standards of Residential Child Care which was ordered by the Ministry of Health, Social Services and Equity in order to improve the programmes particularly devoted to adolescents with severe behavioural and emotional disorders. This proves that the practice of CYC is taken seriously by the internal governance. The Spanish National Law of Child Protection was recently modified in 2015, where a large chapter regulating the use of special residential care was introduced. This indicates an understanding of residential care and ensuring the protection of children in care. The development in the field of CYC did not mean all is well and perfect and for that reason a need for such laws is necessary. The CYC field continues to grow even today. This growth includes a number of challenges still faced by the profession and professionals themselves with behaviour management being one of them.

### **2.3.2 Challenges and training**

History, as explored above, reveals cases of abuse within residential centres, which even in the present times still occur. In the USA, such cases are reported in a variety of ways including media reports (James 2014: 89). These cases raise questions of whether those responsible for the care and protection of children can do their job. In response, Whittaker *et al.* (2016: 89-106) highlight the complexity of the work done by CYCWs and emphasize the importance of adequate training. Whittaker *et al.* (2016: 89-106) caution that doing nothing about protocols for staff training and development as well as the integration of ongoing systematic evaluation, will continue to cause more problems than solutions within the field. Grietens (2002: 130) also highlighted the importance of providing training programmes in order to prepare CYCWs for working effectively in any situation.

Throughout the history of the CYC work, it has been clearly indicated by the first pioneers and scholars as having a distinction from a generalized view of childcare students and trainees as being solely in need of “useful” knowledge and skills. Insisting that rather than simply developing a “tool kit” of knowledge and skills, the student must also uncover limiting biases and assumptions. It is only in the learning mode of interaction that the student can manifest those internal blocks which reduce clinical and professional effectiveness. The general effectiveness of the educational programme, however, will be determined by the ability of the instructors to understand and facilitate the powerful learning mode of interaction (Demers 1987: 56). Hence, the educational programme must build on staff competencies, support the transfer of knowledge into practice, and measure how such trainings can affect the individual, the youth, and the organization (Hoffmann and James 2014: 43-48).

Furthermore stating that regardless of the level of training, the education of a career child and youth care professional must involve facilitation of critical self-awareness, enabling students to become aware of and overcome those attitudes preventing them from actively affecting personal, professional, and societal change through their work (Demers 1987: 57). The improvement in the education and training within the CYC field has been tremendous throughout history.

Moreover, Krueger (1983: 152-159) states that various stakeholders over the years have been involved in developing an innovative approach to training and staff development services for child/youth care workers. The programme combines community and university resources to provide several alternative forms of training and improved work-related incentives for programme participants. Already in 1993, there were studies exploring the idea of looking into connections between theory and practice in the field of CYC work which was based on an analysis of current training and education in the field and a multi-step concept of theory-to-practice and practice-to-theory (VanderVen 1993: 264).

While in CYC work, adequate personal qualifications may be important fundamentals, the actual doing and the practice of care is what counts the most. The care practice depends upon the details of care and contextual interactions, and therefore informing student, practitioner, supervisor, policy maker, and teacher about the actual substance of CYC practice is of high importance (Maier 1991: 393). If workers are to be enabled to work professionally and effectively it is imperative that key ingredients for their preparation are explored (Beker and Maier 2001: 377). Substantial accomplishments have occurred in North America pertaining to education, training, and professional certification, including the accreditation of CYC work and higher education programmes in Canada. Even with these accomplishments in education, training, and certification, significant developments must occur before it can be said that there is a proper and effective systematic approach to introducing CYCWs to the profession and providing ongoing professional development (Mattingly *et al.* 2010: 99). In other words, more work still needs to be done globally before the CYC field can be confident about the way training is prepared and provided and this includes conducting studies such as the current one.

The current efforts to professionalize the field include a strong education or training component. A question of whether education and training make a difference in the skills, knowledge or attitude of CYCWs still stands. The lack of research may result from the researchers' fundamental assumption that education is a requirement for professional practice. Research in the field of psychology has shown that 'locus of control' is a powerful determinant of individual behaviour, beliefs, and attitudes. A person who has an internal locus of control believes that he or she is in control of what happens to the individual, while a person with an external locus of control believes that other persons or factors out of the control of the individual determine what happens to the person. It is important therefore to be clear about what is essential and effective in CYC practice especially during training (Thomas 2003: 102).

An internal locus of control seems to be most encouraged. This is because CYCWs with an internal locus of control were reported to have lower chances of experiencing burn-out, specifically on the subscale for a sense of personal accomplishment. This result indicated that individuals with higher levels of stress and burn-out may feel helpless to change their situations (Thomas 2003: 103). In other words, CYCWs with an external locus of control may be at a higher risk of stress and burn-out which in turn may have negative effects on children and youth in care. Another question then might be how CYC students can be assisted in developing such an important element?

One can never run away from the fact that the quality of experiences in childcare has significant, lasting impact on children's development. With the growing number of young children attending CYCCs, it is essential to provide a safe environment which nurtures their development. In a study by Rusby (2002: 281), the caregivers/CYCWs reported that training in behaviour management has the highest priority. A need for low-cost trainings in the evening or on weekends were described in this report and this is possibly seen as an act that could assist CYCWs.

Challenges in residential care continue to increase and apparently the biggest problem is the changing nature of the behaviours of the young people. There has been an increase in the amount of violent behaviour exhibited by young people in recent years (Charles and Garfat 2009: 25). CYCWs' responses in some cases are very concerning and worrisome as they bring up the question of the effectiveness of their training. Supporting this statement, Charles and Garfat's (2009: 25) reports of cases where in recent years in Canada, children died in care during physical restraints, as staff had apparently not been properly trained in the appropriate use of such interventions. The consequent sub-heading looks into the topic of how CYC work is functioning or evolving today.

### **2.3.3 Child and Youth Care Work today**

With the changing world and time, young people admitted into care are now experiencing many more challenges than those in the past; hence the CYCWs caring for them find themselves even more challenged. The current population of young people admitted into residential treatment is characterized by chronic multiple problem behaviours which have not responded well to other treatment attempts or even parental discipline (Harder and Knorth 2014: 217). Therefore, CYCWs are expected to do for young people what their own families and communities have failed to achieve, giving rise to challenges from such realities.

When looking at CYC work today, it is imperative to explore the idea of professionalization within the field. Professionalization for CYC work called for a focus on several areas within the field which included the definition of the CYC field. The adoption and use of the same definition by educators and practitioners became the first step of this important process in the USA as well as Canada. Another very important area of focus was the educational programmes, the development of a standardized curriculum and the ability to share teaching resources within the field (Ferguson, Pence and Denholm 1993: 1).

Ferguson, Pence and Denholm (1993: 1) also state that during the process of professionalization, service programmes are also an important factor to explore. When it comes to the service rendered within the CYC field, it is essential to place emphasis on aspects of providing care across practice settings in order to ensure that a more universal voice is spoken. Education and service programmes have been stated as needing increasing attention. Professionalization is shaped by several factors such as a combination of political, economic, historic and social factors (Ferguson, Pence and Denholm 1993: 3). This proves therefore that the work done within the field worldwide is enormous and the process of professionalization continues even today, based on the current outcomes of reviews within the field.

Programmes within the residential care centre are aimed at reducing the serious behavioural and developmental problems and in this way improve the quality of life of these young people (Harder and Knorth 2014: 217). The need for support is therefore great to ensure success in this type of work and this support though should be more focused on the provision of trainings, coaching and supervision of CYCWs (Grietens 2002: 130). This also includes working with treatment protocols, which focuses on specific situations, especially with reference to a young person's 'difficult behaviour' that show oppositional behaviour and not reacting to attempts by CYCWs (Grietens 2002: 131). Dealing with challenging behaviours is one of the greatest challenges, which CYCWs must deal with in residential care centres worldwide. This challenge leads to negative responses on the side of CYCWs, especially when they lack appropriate skills and knowledge.

In Europe, Linton and Forster (2003: 1-10) highlighted the fact that the way CYCWs are treated is not the same worldwide, referring specifically to the training of workers. They state that in Europe, CYCWs are carefully selected and thoroughly trained, they receive stipends during training, their personal growth is a central focus and extensive individual and group supervision is provided once employed. In other words, their training is not simply focused on getting a certain average and the ability to answer certain questions, but mostly on personal growth and internalising of concepts taught.

The development of the CYC profession has also been highly focused on the professional ethics guiding the profession. Self-awareness has been one of the main factors included in the ethics since CYCWs use 'self' as a tool when working with young people. The role of moral reference points as well as principles in guiding ethical practice are important factors to consider when exploring professional ethics. In North America, there are two professional documents that articulate the professional vision for the profession, the first being the Ethics for Child and Youth Professionals, which provides an ethical framework to guide

thinking and practice to all CYC professionals. The second being the Competencies for Professional Child and Youth Work Practitioners, which articulate the expected competencies for professional youth work in North America (Contextualize 2011: 35-37). This clearly reveals that much effort has been put in place to ensure that the service provided for young people in care is of maximum competency.

It is important to clearly indicate some of the services offered by the CYC field as this will provide the ability to bring connections between practice and theory/training. The field of CYC offers adult mentor relationships to infants, children and youth that are focused on promoting positive development in settings such as community based child and youth programmes, family support, school-based programmes, mental health, child welfare, clinical settings and juvenile justice programmes (Edwards and Gaidhu 2018: 36-40).

The provision of these services is guided by passion and commitment to build positive caring relationships and meaningful engagements in the lives of children, youth and families. The concept of 'life-space' is considered the foundation within which interventions and practice approaches unfold in CYC work. It is within the 'life-space' where practitioners engage with children and youth in their daily lives within an ecological perspective , using core competencies such as relationship building, communication, activities of daily living, activity programming, group process, teamwork, utilization of community resources and family-centred practice approaches (Edwards and Gaidhu 2018: 36-40).

Throughout various institutions offering CYC training, praxis has been noted as an essential concept. This concept, also known as theory into practice, is based on the idea that one can 'practice what they preach' (Edwards and Gaidhu 2018: 36-40). This is a very important concept and needs much more attention especially in developing countries.

## **2.4 SOUTH AFRICAN CHILD AND YOUTH CARE WORKERS: PREPAREDNESS AND PRACTICE**

### **2.4.1 Historical background of Child and Youth Care Work in South Africa**

Social Welfare in South Africa began in 1657 with a distribution of a relief for poor farmers and with black people not taken into consideration, hence residential care was inaccessible to most children and young people in South Africa. This was enforced by the National Party Government, which introduced apartheid laws, therefore South African history is said to be difficult to access due to a lack of academic writings and official figures for the black population (Molepo and Delpont 2014: 101). It was the process of urbanisation and industrialisation that brought about the establishment of most children's homes as children became more vulnerable because of neglect, which led to various form of abuse (Malatji and Dube 2017: 109).

In 1994, the Government of Unity which was led by the African National Congress came into power and services such as CYC work were paid attention to and made accessible to all South Africans. The first action of this party was to draft legislations aimed at preventing inadequate provision of care and protection for all children. Various policies and legislations have been adopted and implemented over the past two decades. South Africa eventually became a signatory to several regional and international conventions for the protection and preservation of children. The Constitution of South Africa, Act No. 108 of 1996, the Children's Act No. 38 of 2005, and the Child Justice Act, No. 75 of 2008 are some of the legal instruments available in South Africa, which are applicable to CYC work (Molepo and Delpont 2014: 102). After the abolishing of the apartheid system and various changes were put in place, South African children still experience abuse, neglect and maltreatment mostly because parents need to constantly move around in search of jobs (Malatji and Dube 2017: 109-126).



In relation to CYC work and the safeguarding of children, their rights and welfare, South Africa has evolved, as the above legislations have been put in place to protect children against various forms of abuse and maltreatment. These legislations prescriptions on the way children should be treated in residential care facilities, which in the past had no structure. The Children's Act 38 of 2005 for instance states that CYCCs are responsible for offering a therapeutic programme that is designed for children outside the family environment, which will be focused on assisting children with behavioural, psychological and emotional difficulties (Molepo and Delport 2014: 104).

This work is done by CYCWs in residential centres who earnestly express the fact that they are faced with challenges, especially in relation to behaviour management, CYCWs complain that dealing with young people's behaviour is most challenging (Thesen 2014: 116). In response, Moscrip and Brown (2002: 120) state that it is necessary to assess the skills needed to function effectively as well as to identify where and how to obtain such skills as this is a key aspect to success in CYC work. The reality of CYC practice is that the discipline involves direct care practice with children (Smith 2009: 159) and being complex, unpredictable and value-laden (White 2007: 225). Hence, the struggle experienced by CYCWs is understandable although questionable at the same time. The challenges faced by CYCWs in their work with children as well as the training they go through in preparation will be explored next.

#### **2.4.2 Challenges and training in Child and Youth Care today**

Challenging behaviours which CYCWs might be faced with in their work with young people in residential settings refers to behaviour that interferes with an individual or carers daily life. This would include aggression, self-injury, property destruction, oppositional behaviour, stereotyped behaviour, withdrawn and inappropriate behaviour. In dealing with such behaviours, CYCWs are trained and encouraged to use discipline which involves modelling and teaching children and young people

appropriate behaviours (Thesen 2014: 40-42). It is important therefore for CYCWs to be able to distinguish between discipline and punishment as these are very close and easily confused. It is expected that training will bring about this clarity.

Punishment is prohibited in CYC work as it is believed that it creates suspicion, resentment and avoidance in young people although it has been disguised as consequences, but it seems to be more on relieving the worker's anxiety. Moreover, punishment impacts on the way children perceive themselves. Children who are constantly punished are more likely to believe that they are deserving of punishment, subsequently behaving in a manner that is deserving of punishment would not feel out of place. Punished children might develop more negative behaviours such as lying, sneaking, deceit, blaming others, learning to avoid getting caught out, see authority figures as adversaries, distrusting adults, lacking empathy, remorse or guilt, resentment or anger, retaliation and aggression, emotional problems, impulsive behaviour and poor self-image, just to count a few (Thesen 2014: 40-42).

Those preparing workers for such a challenging practices should recognize the need for conceptual frameworks that can adequately represent the complexities of everyday CYC practices (White 2007: 225), as failure to do this will mean failure to practice effectively. The intention of placing young people who are seen as being at risk in residential centres is to enhance their wellbeing so that they become better able to go back into their communities and contribute positively as well as function again (Malatji and Dube 2017: 110).

Thus any failure on the side of CYCWs to achieve this, especially failure to assist a young person change a negative behaviour, will mean defeating the purpose of the work as well as place the whole South African community at risk of dealing with young people who grow up to be criminals. Paying attention to the training and preparation of CYCWs is highly important because the way they are trained will

determine the manner in which they practice. CYCWs complain of a lack of policies and procedures for disciplinary issues within their workplace, they fear for their lives as youth behaviours threaten their lives, they request for assistance and supervision sessions, teamwork and communication amongst relevant stakeholders (Thesen 2014: 116-119).

The focus needs to be on the provision of a range of learning opportunities at a various educational levels which will not only serve the needs of aspirations of South African CYCWs, but that which will eventually equip those workers to meet the developmental and therapeutic needs of young people effectively (Winfield 2013: 22). In 2013, Winfield introduced the “matching principle” which can be identified as a possible remedy for situations where a division exists between theory and practice and where CYC students make inadequate use of knowledge (Winfield 2013: 22).

The idea of this principle is that students’ experiences in the learning environment reflect aspects of CYC practice. The educator uses a relational approach and makes therapeutic use of daily events, which are experienced by students. Winfield (2013: 22) argues that this will contribute to the healing and development of students as individuals. In other words, CYC students will first experience what they are meant to bring to young people in their future CYC practice. A study reported by Agere (2014: 125) found that CYCCs have an important role in society; which is to provide support and protection to children who have been found to be in need of care, according to the criteria given in the Children’s Act No. 38 of 2005 as amended. These centres though recognised as being an essential service to society still face challenges today and these affect the operations of the centre. They include issues pertaining to infrastructure and human resources. However, it was also acknowledged that, despite the challenges which affect their ability to provide their services to young people, the CYCCs have also made progressive steps to end the suppression of the fundamental rights of children.

The professionalization of the field also meant encouraging and emphasizing a relational CYC approach which provides a unifying philosophy that defines CYC work with young people and their families. This encourages building positive relationships with young people and families as this will contribute greatly to the healing and encourages development and growth in children and youth. The success in CYC work is dependent on cooperation and support (Garfat and Fulcher 2012: 24).

The advancement of the CYC field has been clear globally and locally. One finds expressions such as ‘the use of daily life events’ might be re phrased as ‘the entering into, and purposeful use of daily life events, as they are occurring, for the benefit of the child, youth or family’. Such practice then involves numerous skills, knowledge and abilities on the part of CYCWs. This involves an understanding of how to access and use knowledge, know about the process of change as well as possess an active self-awareness which allows the worker to distinguish self from other. The CYCWs should be able to enter into an intimate caring relationship that involves attachment with a child and understand and be able to live the characteristics of Relational Child and Youth Care Practice (Garfat, Fulcher and Digney 2013: 1-2). In other words, CYC work should be an everyday experience for the worker and the child, hence the worker needs to possess and experience what he/she intends to give the child.

## **2.5 SUMMARY OF THE CHAPTER**

In this chapter, the researcher discussed numerous studies conducted both globally and locally, which enabled the exploration of the relationship between practice and theory. This exploration has revealed that the challenge of behaviour management in residential CYCCs is alive and is an international challenge. The researcher also shared briefly on laws enforced in different countries for the assurance that the caring of children and youth is done adequately, and their rights upheld. Studies have also proven that the field of CYC needs more research

especially in relation to the training of CYCWs. It has been clear to the researcher that in African countries CYC literature is very limited. South Africa seems to be greatly shaped by studies and literature from other countries and hence it has been challenging to find local studies in this topic.

A lack of adequate training will lead to a failure in the provision of care for the children, youth and families in need. Conducting more research on this topic will encourage stakeholders to pay attention and make necessary changes where needed. Studies discussed by the researcher also revealed that separation of practice and training will lead to further challenges within the profession. CYCWs clearly need to be paid attention to and taken very seriously especially the expressions of struggle which they have raised over the years. In the succeeding chapter, the Theoretical Framework chosen for this study will be discussed and explored by the researcher.

## **CHAPTER 3: THEORETICAL FRAMEWORK**

### **3.1 INTRODUCTION**

A theory-driven research has advantages for the development and growth of the discipline of education. Theory is important as it can guide research, practice, curriculum development, evaluation, as well as help to develop effective instructional tactics and strategies (Abraham 2008: 1). Haugh (2012: 7-15) further indicates that theoretical embeddedness and social relevance are important for the legitimacy of social enterprise research. Therefore, the researcher ensured that this study is guided by an appropriate theoretical framework. This chapter will share the theoretical framework of this study.

### **3.2 THEORETICAL FRAMEWORK USED AS GUIDE**

This study was guided by the Diffusion of Innovation Theory. This theory was developed by E.M. Rogers in 1962 and is one of the oldest social science theories. In communication it is used to explain how over a specific time, an idea or product gains momentum and diffuses (or spreads) through a specific population or social system (LaMorte 2019: 2). According to this theory, people adopt a new idea, behaviour or product and they begin to do something different from what they did previously. The key to adoption is that people must recognise the idea, behaviour, or product as new or innovative.

The diffusion therefore should begin during the training of CYCWs where training should be experiential in such a manner that it encourages change within the trainee. In that way the change will be easily transferred to the young person being cared for. CYC training should focus on the experience of the student, the growth and development of the student rather than the intellectual capacity only. This theory is suitable to this study as the intention is to emphasize the need for careful exploration and evaluation of the training provided to CYCWs in comparison to the challenges experienced in practice.

According to LaMorte (2019: 5), there are five adopter categories and there are different strategies used to appeal to the different adopter categories (Figure 3.1).

### **3.2.1 Innovators**

These are people who want to be the first to try the innovation. During training, there are CYC trainees who show interest and great eagerness to learn and make a difference in their lives and in the lives of vulnerable young people. Chances of struggling in the future are less.

### **3.2.2 Early adopters**

These are people who represent opinion leaders. They enjoy leadership roles and embrace change opportunities. CYC trainees need role models from whom they can learn and adopt leadership qualities.

### **3.2.3 Early majority**

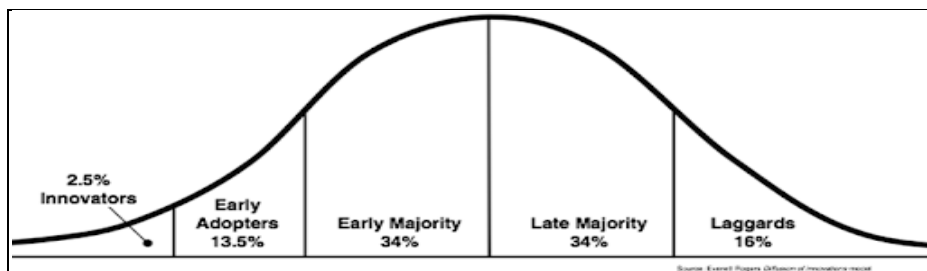
These people are rarely leaders, but they do adopt new ideas before the average person. Trainees in this level need reinforcement and evidence to see that the new idea introduced to them is effective and can work in the life space with vulnerable young people.

### **3.2.4 Late majority**

These people are sceptical of change and will only adopt an innovation after it has been tried by the majority. If the trainee does not receive the necessary assistance and attention to adopt the new information introduced during training, then the implementation of it may be unsuccessful.

### 3.2.5 Laggards

These people are bound by tradition and very conservative. The information or theory provided might be completely ineffective because of certain beliefs or prejudices. This group might find it challenging to adopt new information and actually practise in their own lives because of being bound by tradition, would possibly study for examinations and not for personal development.



**Figure 3.1: The Diffusion of Innovation Theory**

### 3.3 SUMMARY OF THE CHAPTER

The work done by CYC workers demand that the change of behaviour begins with them first and that the theory learnt during training makes sense to them and is effective and practical in their lives. The manner of training such a profession is extremely crucial as it will determine the success and failure in the practice. The next chapter presents the research methodology used in this study and an explanation of ethical considerations will also be shared.



## **CHAPTER 4: RESEARCH DESIGN AND METHODOLOGY**

### **4.1 INTRODUCTION**

Exploring the relations between the preparedness and practice of CYCWs to manage young people's challenging behaviours requires careful consideration of important factors as well as considering the views of those affected. It is important for the researcher to select an appropriate and effective methodology. This chapter will explore the method selected by the researcher as being appropriate for this study, the design, settings, sampling process, data collection and analysis will be amongst the discussions in this chapter.

### **4.2 RESEARCH DESIGN**

This study used a qualitative, exploratory, descriptive and contextual research design. This design is appropriate for this study as it seeks to empower individuals' stories, allowing them to tell their own stories with the goal of understanding how they make meaning within their social world (Hesse-Biber 2010: 455).

#### **4.2.1 Qualitative research**

According to Kumar (2014: 132-133), the focus in qualitative research is to understand, explain, explore, discover and clarify situations, feelings, perceptions, attitudes, values, beliefs and experiences of a group of people. Therefore, this was a fitting design for this study because the focus of the researcher was to explore, discover and clarify the situations which CYCWs have to deal with when managing young people's behaviours. Through the interviews conducted the researcher managed to tap into the feelings, values and beliefs of CYCWs in order to better understand their situation.

#### **4.2.2 Exploratory research**

The exploratory research is designed to bring light to how a phenomenon is established and is especially useful in uncovering the full nature of a little-understood phenomenon. It examines a phenomenon of interest, rather than simply observing and recording incidents of the phenomenon (Hunter, McCallum and Howes 2018:1). In this study, the researcher intended to uncover and bring to light the full nature of the relationship between the practice and training of CYCWs. The idea of dealing with challenging behaviours of young people in residential care centres have not been explored and uncovered enough; especially in relation to the manner in which workers are trained. An exploratory design using individual interviews was used in this study.

#### **4.2.3 Descriptive research**

Descriptive research provides a detailed account of the significance of a study and generates a picture of the world from the perspective of the participants. The purpose of a descriptive study is to document and describe the phenomena of interest (Hunter, McCallum and Howes 2018:1). This study focused on exploring and revealing the viewpoints of participants through collecting accurate data and reporting it accordingly. The researcher intended to describe the expressions and feelings of participants as shared during individual interviews.

#### **4.2.4 Contextual research**

The core of the contextual design philosophy is to “understand users in order to find out their fundamental intents, desires, and drivers, but these are invisible to the users; so the only way to glean them is to go out in the field and talk with people”, (Holtzblatt *et. al* 2011: 520). The researcher in this study also intended to go out to the participants and speak to them directly concerning the area of interest but due to the COVID19 this had to be altered into using telephone calls for interviews. The researcher was able to collect data and picture ideas of what participants were expressing in relation to the challenges they face in their environments. Arrangements were made with the senior CYCW to assist CYCWs to set aside time

for the interviews during working hours. Hence participants were interviewed at work.

### **4.3 RESEARCH SETTING**

The research setting is the physical, social and cultural site in which the researcher conducts the study. In qualitative research, the focus is mainly on meaning-making, and the researcher studies the participants in their natural setting (Given 2008a). This study was conducted via telephone calls with participants from two different Child and Youth Care Centres in KwaZulu-Natal (KZN). These are centres caring for young people at risk and young people who have been removed from their families due to various social ills. CYCWs working in this residential centre who were trained by the NACCW were selected and participated in these individual interviews.

### **4.4 POPULATION**

A research population is generally a large collection of individuals or objects that is the focus of a scientific query (Kumar 2014: 73). A research population is also known as a well-defined collection of individuals or objects known to have similar characteristics (Kumar 2014: 73). It is for the benefit of the population that research is done. However, due to the large sizes of populations, researchers often cannot test every individual in the population as it is too expensive and time-consuming.

It is difficult to access the exact figures of CYCWs in KwaZulu-Natal but the population of this study was about 2000 CYCWs (Jamieson 2013: 12) who were employed at selected CYCCs in the province of KZN and who were trained by the NACCW. The researcher has chosen to focus on CYCWs trained by the NACCW because it is one of the main training organisations for CYCWs and most residential CYCWs have been trained by it.

#### **4.5 SAMPLE AND SAMPLING STRATEGY**

Sampling is defined as the process of selecting a few from a bigger group, as the basis for estimating or predicting the prevalence of an unknown piece of information, situation or outcome regarding the bigger group (Kumar 2014: 229-230). The sample size then refers to the number of units that are chosen from which data were gathered (Lavrakas 2008: 781-783). For this study, a purposive sampling strategy was used to select participants. According to Kumar (2014: 244), purposive sampling is when a researcher uses own judgement as to who can provide the best information to achieve the objectives of the study. Therefore, the CYCCs that were approached had CYCWs who were most capable of providing the required information and who were willing to participate.

#### **4.6 RECRUITMENT OF PARTICIPANTS**

The researcher began by seeking ethics clearance from the Institutional Research Ethics Committee (IREC) (Appendix 1). Thereafter, permission was sought and granted by Directors of the two Child and Youth Care Centres (Appendices 2a, 2b, 2c, 2d, 2e and 2f). A letter of information (Appendix 3) which explained the details of the study was given to participants. The final sample size for the study was 21 participants.

##### **4.6.1 Inclusion criteria**

- CYCWs that studied or were trained by the NACCW.
- CYCWs that had at least two years' experience in a residential centre.

##### **4.6.2 Exclusion criteria**

- CYCWs that were not trained by NACCW.
- CYCWs who had less than 2 years' experience in a residential CYC Centre.

#### **4.7 DATA COLLECTION TOOL**

Demographics in research refer to characteristics of a population; which include age, race, gender, ethnicity, religion, income, education, home ownership, sexual

orientation, marital status, family size, health and disability status and psychiatric diagnosis (Salkind 2010:1 ). It is necessary for the determination of whether the individuals in a particular study are a representative sample of the target population for generalization purposes. For this study, a demographic guide was used to determine the details of the selected participants (Appendix 5a).

A semi-structured interview guide is defined as a data collection strategy in which the researcher asks informants a series of predetermined but open-ended questions (Given 2008b: 1). This tool was used to conduct in-depth, one-to-one interviews. An in-depth interview is a one-to-one method of data collection that involves an interviewer and an interviewee discussing specific topics in depth. In-depth interviews are used when seeking information on individual, personal experiences from people about a specific issue (Hennink, Hutter and Bailey 2011: 10-17). It is centred on the evidence to be generated for achieving the research objectives of describing, predicting or explaining the phenomenon. Interview may also serve as a rich source for exploring people's feelings and attitudes (Cohen, Manion and Morrison 2013: 411). Therefore, using interviews enabled the researcher to gain enormous information.

#### **4.8 DATA COLLECTION PROCESS**

Since the country has been affected by the COVID19 pandemic, the researcher conducted telephonic interviews and covered the costs for the calls. This was to ensure that the study continues even during the lockdown especially as the researcher understood the importance of keeping up with the lockdown regulations. The researcher spent about 15-20 minutes on the telephone with individual participants. The participants were made aware that the calls were being recorded as this had been explained well to the participants beforehand.

#### **4.9 DATA ANALYSIS**

After the data was collected the researcher analysed it. The collected data was analysed by using Tesch's eight steps of analysis (Creswell 2014: 198). These steps involved:

- Reading through all transcripts to get a general impression of the data that was collected.
- Writing down in the margin any thoughts that emerged from the data.
- Making a list of topics. Same topics were clustered together. Preliminary topics organisation of the topics as major topics, unique topics and leftover topics.
- Abbreviating the topics as codes was written next to the corresponding segments in the data. Any other topics or codes that emerged were written next to the appropriate segment of the text.
- The most descriptive wording for the topics was used and was turned into sub-categories.
- Grouping together of the related and emerging list of categories.
- Preliminary analysis of data by assembling data that belong to each category from any themes that emerged.
- Existing data has been re-coded.

#### **4.10 TRUSTWORTHINESS**

Trustworthiness is important in qualitative study as it refers to the degree of confidence in data, interpretation and methods used to ensure the quality of the study (Polit and Beck 2012: 145-160). As qualitative research has an element of subjectivity, and is open to criticism, it is important that the study and the findings provide evidence of validity and reliability (Polit and Beck 2012: 145-160). Therefore, for each study, researchers should establish the protocols and procedures necessary for a study to be considered worthy of consideration by readers (Connelly 2016: 435). Trustworthiness in qualitative inquiry includes four criteria namely; credibility, dependability, confirmability and transferability (Lincoln and Guba 1985 cited in Polit and Beck 2012: 163-194). They further added authenticity as the fifth criterion for ensuring trustworthiness (Guba and Lincoln 1994: 168). These five criteria were used to ensure the trustworthiness of data in this research study.

#### **4.10.1 Credibility**

Credibility involves establishing that the results of qualitative research are credible or believable from the perspective of the participant in the research (Trochim and Donnelly 2007 cited in Kumar 2014: 286). Credibility was ensured in this study by member checking. Transcripts were sent back to the participants to confirm that what is transcribed reflects what they said during the interviews.

#### **4.10.2 Dependability**

Dependability is like the concept of reliability in quantitative research as it is concerned with whether we would obtain the same results if we observe the same thing twice (Trochim and Donnelly 2007 cited in Kumar 2014). This may not be easy to achieve as qualitative studies advocate for flexibility and freedom. The researcher in this study kept an extensive and detailed record of the process for others to replicate and ascertain the level of dependability.

#### **4.10.3 Confirmability**

Confirmability refers to the degree to which the results could be confirmed or corroborated by others (Trochim and Donnelly 2007, cited in Kumar 2014: 219). Confirmability was ensured by creating an audit trail to determine whether the conclusions, interpretations and recommendations could be traced to the source.

#### **4.10.4 Transferability**

Transferability refers to the degree to which the results can be generalised or transferred to other contexts or settings (Trochim and Donnelly 2007 cited in Kumar 2014: 219). The researcher extensively and thoroughly described the process adopted to guide the study for others to follow and replicate the study.

### **4.11 ETHICAL CONSIDERATIONS**

To ensure that the rights of participants are upheld, the researcher kept the following principles of research ethics as discussed below.

#### **4.11.1 Permission to conduct the study**

Ethics clearance from IREC was obtained before conducting this study (IREC Number 062/20) (Appendix 1). The researcher sought and acquired permission to conduct this study from two CYCCs (Appendices 2a and 2b).

#### **4.11.2 Informed consent**

Kumar (2014: 284-285) emphasizes the importance of obtaining the participant's informed consent, which the researcher in this study has achieved successfully. This author further explains that an informed consent implies that subjects are made adequately aware of the information required from them as well as how they are expected to participate and the effects of participating in the study. Hence the researcher has ensured that a clear and informative Letter of Information (Appendix 3) was provided to each participant. It was also the primary concern of the researcher to uphold and maintain confidentiality as sharing information about participants with others outside the purposes of the study is unethical (Kumar 2014: 286).

#### **4.11.3 Respect for persons: Autonomy**

This principle addresses the concept of independence. The essence of autonomy is allowing an individual the freedom of choice and action. The researcher encouraged participants to make their own decisions and to act on their own values (Forester-Miller and Davis 1995: 119). The researcher also respected the free power of choice of participants and respected participants as 'persons' (Behrens 2017: 131). In this study, the researcher began by providing participants with complete information about the study, emphasizing the freedom to express themselves as desired and to understand that they can choose to participate or not. Participants' decisions were respected and times for interviews negotiated accordingly.



#### **4.11.4 Beneficence**

Beneficence refers to the researcher's responsibility to contribute to the welfare of the participants, to act for the benefit of participants (Forester-Miller and Davis 1995: 119). This study encouraged participants to express themselves freely while reflecting on what is going well in their practice as well as what needs further attention, hence maximizing growth. There were no intentions to harm participants either physically or emotionally. The researcher constantly checked with participants during interviews whether any question was uncomfortable in any way.

#### **4.11.5 Justice**

This principle is used to that part of ethics that concerns rights or obligations (or is enforceable), focusing on concerns about researchers unfairly taking advantage of research subjects and imposing unfair burdens on them for the sake of benefits to themselves or others. It also refers to concerns about unfair exclusion of groups from participation in research and the benefits that may attach to research participation (Ethik *et al.* 2010:119). Participants of this study were not selected out of vulnerability or easy access but were selected because they were seen as the best sample with the ability to represent the whole population. There was fairness in the recruitment process and justice was upheld.

#### **4.11.6 Respect for privacy**

Privacy is the freedom an individual has to determine the time, extent, and general circumstances under which private information may be shared with or withheld from others (Fouka and Mantzourou 2011). This principle was upheld and encouraged in this study as the researcher assured participants that private information such as opinions and recordings would never be shared with others, without their knowledge or consent.

#### **4.11.7 Confidentiality**

Confidentiality means that individuals are free to give and withhold as much information as they wish to the person they choose (Fouka and Mantzourou 2020). Participants were informed of their freedom to participate and share their story with

the researcher, any information that they felt uncomfortable to share was not forced out but that was respected by the researcher.

#### **4.12 SUMMARY OF THE CHAPTER**

This chapter explained the manner in which this study was conducted as well as the ethical considerations upheld in this study. The preceding chapter will present the findings of the study.

## **CHAPTER 5: PRESENTATION OF FINDINGS**

### **5.1 INTRODUCTION**

According to Basit (2003:143-144), qualitative data analysis is found to be very difficult as it is not a mechanical or technical exercise but rather the researcher's attempt to gain a deeper understanding of what they have studied and to continually refine their findings. The objective of analysing qualitative data is to determine the categories, relationships and assumptions that enlighten the views of participants in general as well as in relation to a topic. In this chapter, the researcher will present findings based on the collected data. The researcher attempted to gain a deeper understanding towards the effectiveness of the training provided for CYCWs focusing mainly on behaviour management and the individual interviews have enabled this attempt. The collected data was analysed by using Tesch's eight steps of analysis (Creswell 2014: 198). The findings will be presented by means of themes which the researcher formulated based on the collected data.

The researcher collected data from two different CYCCs where individual CYCWs were interviewed telephonically. The researcher started analysing the data after the telephonic interviews were completed. Codes were formulated for each participant, for example, code: P1 (A), this code representing Participant 1 from CYCC A.

### **5.2 THE DEMOGRAPHIC INFORMATION**

Participants from two (2) CYCCs were recruited and telephonically interviewed individually. The first group consisted of ten (10) participants and the second group had eleven (11), in total twenty-one (21) participants were interviewed. The following tables presents the graphical data of the participants, they depict the gender, age, qualification, and number of years working in the field of CYC.

A brief discussion and analysis with regards to the demographics of participants in the research follows:

### **5.2.1 Gender**

Five (5) participants were males and sixteen (16) were females. The great difference in gender visible in this study is due to the fact that the CYC field is still dominated by females. This is also supported by the NACCW's training data base which presents a similar trend, with the majority being females (Jamieson 2013).

### **5.2.2 Age of participants**

The majority of participants were above 30 years of age (Tables 5.1a and 5.1b).

### **5.2.3 Qualifications of participants**

Thirteen (13) participants had completed the NQF (National Qualifications Framework) level 4 in CYC, five (5) participants had completed the Further Education and Training programme (FET) in CYC and one (1) was still in the process of completing the FET programme. Two (2) participants had different qualifications, one (1) being Youth Development and the other had Auxiliary CYC (Tables 5.1a and 5.1b).

### **5.2.4 Duration of working as a CYCW**

The findings of the study revealed that 11 participants had working experience of 10 years and more. Ten participants had less than 10 years of working experience (Tables 5.1a and 5.1b).

**Table 5.1(a): Demographic details of the participants**

<b>PARTICIPANTS FROM CYCC A</b>				
<b>Participant</b>	<b>Gender</b>	<b>Age</b>	<b>Qualification</b>	<b>Number of years working as a CYCW</b>
1	Female	42	NQF Level 4	16
2	Female	38	NQF Level 4	12
3	Female	49	NQF Level 4	8
4	Male	32	NQF Level 4	12
5	Female	51	NQF Level 4	15
6	Female	42	NQF Level 4	15
7	Female	50	Youth Development	15
8	Male	33	NQF Level 4	4
9	Female	49	NQF Level 4	12
10	Female	40	NQF Level 4	10

**Table 5.1(b): Demographic details of the participants**

<b>PARTICIPANTS FROM CYCC B</b>				
<b>Participant</b>	<b>Gender</b>	<b>Age</b>	<b>Qualification</b>	<b>Number of years working as a CYCW</b>
1	Female	35	NQF Level 4	2
2	Female	33	CYC FET Certificate	6
3	Male	40	FET	13
4	Female	55	NQF Level 4	4
5	Female	42	NQF Level 4	7
6	Male	29	Auxiliary CYC	2
7	Female	36	FET	14
8	Female	30	FET	6
9	Female	33	NQF Level 4	3
10	Female	39	Completing FET training	3
11	Male	43	FET	10

### **5.3 AN OVERVIEW OF THEMES AND SUB-THEMES**

The following Table 5. 2 constructs the major themes and sub-themes that emerged during data analysis.

**Table 5.2: Themes and sub-themes**

<b>THEMES</b>	<b>SUB-THEMES</b>
1. The most common challenging behaviours displayed by children in CYC residential centres.	1.1 Challenging behaviours towards other children. 1.2 Challenging behaviours towards CYCWs.
2. Integration of theory and practice.	2.1 Equipping CYCWs with knowledge and skills for managing children’s challenging behaviours in residential CYCCs. 2.2 Gaps in CYC training. 2.3 Behaviour management strategies.
3. Children’s response to behaviour management.	3.1 Negative responses from children. 3.2 Effects of children’s responses on CYCWs. 3.3 CYCWs’ safety when managing children’s challenging behaviours.
4. The use of alternatives in managing children’s challenging behaviours.	4.1 Support structures in CYCCs. 4.2 CYCWs’ perspectives of existing support structures in CYCCs. 4.3 Types of alternatives existing in CYCCs.

The next section introduces the themes and sub-themes formulated from the data analysis process. Themes and sub-themes are presented including quotes from the transcripts which are used to confirm or support the theme. Codes were used to indicate participants.

**5.3.1 Major Theme 1: The most common challenging behaviours displayed by children in CYC residential centres**

Challenging behaviours displayed by young people was identified as the most difficult challenge to deal with compared to other issues in childcare. The following sub-themes emerged from this major theme: challenging behaviours towards other children and challenging behaviours towards CYCWs.

#### 5.3.1.1 Sub-theme 1.1: Challenging behaviours towards other children

Most challenging behaviours expressed by children are towards other children and this is common in CYCCs. These have been expressed by participants as outlined in the excerpts below:

*“First of all, my sister, they don’t listen...they bully each other...they think that being here means demanding rights and forgetting responsibilities...they can throw a plate full of food on the floor...”* (P#5, CYCC A).

*“...fighting and can cause conflict because they form groups because of conflicts, it is a challenging because if you follow up you will find that there is nothing there just that there is just something minor maybe someone does not like the other therefore influence others ...”* (P#4, CYCC A).

*“...Ok you see bullying if someone teases you with your background...saying ay you eat medication, really troubles me...”* (P#9, CYCC A).

*“...I will start with bullying...”* (P#1, CYCC B).

#### 5.3.1.2 Sub-theme 1.2: Challenging behaviours towards CYCWs

The majority of the participants also reported that challenging behaviours displayed by children were at times directed towards them. The following excerpts indicate this:

*“...mmmh they swear, fighting, threatening even the child care worker...”* (P#9, CYCC B).

*“Ey teens are a problem, comparing themselves with CYCW and comparing us to each other...”* (P#8, CYCC A).

*“...ok what’s the biggest is how they behave, being rude...”* (P#7, CYCC B).

Some participants expressed great distress and fear; they voiced feelings of disrespect, as outlined in the excerpts below:

*“mmm you see the first one is anger, yah its anger and you find it hard to deal with, it’s scary...”* (P#8, CYCC B).

*“...what I also notice is losing respect of children...”* (P#1, CYCC B).

*“...so they become very angry swearing, it hurts me.”* (P#4 CYCC B).

### **5.3.2 Major Theme 2: Integration of theory and practice**

The findings indicated a need for theory integration in the practice of CYC work, however the challenge expressed was the limitation in the ability to bring theory into practice. Some participants also indicated that there are differences between training and practice. Three sub-themes that emerged were: equipping CYCWs with knowledge and skills for managing children's challenging behaviours in residential CYCCs, gaps in CYC training and behaviour management strategies.

#### **5.3.2.1 Sub-theme 2.1: Equipping CYCWs with knowledge and skills for managing children's challenging behaviours in residential CYCCs**

Data revealed that behaviour management training is not as effective as expected to be. The following excerpts were shared by participants:

*“I will say yes and no because when it comes to behaviour management a child can wake up with a behaviour you have never experienced before and at that time you have to think what to do now.”* (P#5, CYCC A).

*“I will say we don't have enough information about behaviour because you find that you have suggestions of what can be done but you are ignored...”* (P#6, CYCC A).

*“For me I can say as much as we get tools but it's not enough because groups are not the same and the child comes with different behaviours...”* (P#7, CYCC A).



Participants also indicated that there seems to be a difference between theory and practice, as stated in the following excerpt:

*“...training and the practical is not the same, I can study but when I face challenges or when I implement my work it is not the same.”* (P#1, CYCC A).

*“Well, child care workers are trained but theory and practice are not correlated...”* (P#9, CYCC A).

There also seems to be a feeling of uncertainty when it comes to managing children’s challenging behaviours, including inappropriate sexual behaviours amongst children in care as well as substance abuse. This is indicated in the following excerpts:

*“...you find that the child is sexually active and is teaching other children... in my view we are not trained cause sometimes especially for older children we are told not to bring our culture into it...”* (P#6, CYCC A).

*“No, I don’t think when it comes to substance abuse, we are trained...it’s not easy to stop this...they are killing themselves, there’s nothing you can do.”* (P#10 CYCC B).

#### 5.3.2.2 Sub-theme 2.2: Gaps in CYC training

CYC training programmes have improved significantly in South Africa and continue to improve but participants have indicated that there are still existing gaps which require attention. In other situations, CYCWs find themselves having to practice other professions which they have not been trained or prepared for. The following are the excerpts expressed by participants:

*“...yes, there are gaps because as CYCW everything inside is on you. For instance, working in a home, there are children taking medication and there’s a dosage, homework is your responsibility...so you kinda have to make sure you do everything.”* (P#1, CYCC A).

*“Ay, I can say there are (gaps) because sometimes as a child care worker you are a teacher, nurse, psychology and psychiatrist, you see so many things...” (P#9, CYCC A).*

*“The gap what we were not taught is how to read a child and actually tell what exactly they need at that time it’s a problem to give the wrong thing.” (P#5, CYCC A).*

*“Ey (giggling) there are gaps in the training we do and it is also a behaviour that might be new, I think we should be trained also on how to deal with surprising new behaviours like being told that these are common behaviours and deal with it in such a way.” (P#6, CYCC A)*

The request for the provision of clearer and more practical guidelines for appropriately managing behaviour came across during interviews as indicated in the following excerpt:

*“Myself I say in behaviour management for those planning child care if they can be specific in saying if this and this happen do like this although we will have to see for ourselves...to give us a clue...” (P#8, CYCC B).*

Cultural differences also came up as one of the gaps missing in training as some participants expressed concerns of a lack of understanding different cultural behaviours. The following excerpt state this:

*“For me (nje); it is this thing of culture, cultures are not the same...the cultural differences are a problem like if a child faces down then the adult starts saying they are hiding something...” (P#6, CYCC B).*

### 5.3.2.3 Sub-theme 2.3: Behaviour management strategies

Participants have expressed a sense of uncertainty in the use of behaviour management strategies taught during training, as outlined by the following excerpt:

*“Ey, others work others don’t work, others you see you have to think on your own what to do next and to forget about what was taught...” (P#4, CYCC A).*

Other participants indicated that the difference in the type of working environment presents challenges in using the experience and strategies already learnt. The following excerpt indicate this:

*“For me my training was combining practice and theory but the practice there was with families which became a challenge because here in residential it’s not the same cause there are behaviours totally different, so I had to find new ways.” (P#5, CYCC A).*

Training seems to be more focused on theory than practice as indicated by some participants. The succeeding excerpts states this:

*“They (strategies) are more in theory, like sometimes you don’t know which consequence to give to children for some behaviours because it is said that the consequence should match behaviour so sometimes you don’t know what to do...” (P#6, CYCC A).*

*“No (mamah); most of the time theory and practice don’t connect but sometimes it depends on the child’s background, but it doesn’t go together theory and practice...” (P#7, CYCC A).*

When CYCWs are not provided with some background information of the child in care, they find themselves struggling to come up with ways/strategies to assist the child in terms of behaviour management. The excerpt below indicates this:

*“Not knowing the background, I end up not knowing what the child will need.” (P#4, CYCC B).*

The effectiveness of a behaviour management strategy as indicated by participants is also dependent on the child being disciplined, as indicated in the excerpts below:

*“It depends on the child’s personality others can be rude being triggered, another responds others don’t maybe because of their problems might be beyond.” (P#6, CYCC B).*

*“...it depends on the type of child and situation...” (P#8, CYCC B).*

The lack in the availability and sharing of various behaviour management strategies lead to children knowing exactly how a CYCW will respond, what strategy will be used and take advantage of that leading to ineffective management of behaviour. The following excerpt support this:

*“...the child might get used to how a strategy is used then the child will know exactly what will happen and won’t care anymore, will then challenge you or even tell others that this is what you will do.” (P#1, CYCC A).*

### **5.3.3 Major Theme 3: Children’s response to behaviour management.**

The purpose of behaviour management is to bring about a positive change in the challenging behaviour of a young person. This however has shown to be exceedingly difficult requiring training, skills, and experience. Participants mentioned some of the responses of children in the process of behaviour management. The difference in age groups and maturity of children was also reported to be influential in the visibility of change in behaviour. The sub-themes that emerged from this major theme includes negative responses from children, effects of children’s responses on CYCWs and CYCWs’ safety when managing children’s challenging behaviours.

#### **5.3.3.1 Sub-theme 3.1: Negative responses from children**

Participants shared some challenging situations experienced when managing challenging behaviours, as indicated in the excerpts below:

*“...like a behaviour where you find the child is fighting you and rude and very aggressive...have to separate and go talk to him...” (P#7, CYCC B).*

*“...not listening...”* (P#3, CYCC B).

*“And also, with rules, they know them, but they break them...fighting physically...”*  
(P#9, CYCC A).

*“With teens they are a challenge, getting into that stage...not listening...mischievous...not listening...”* (P#1, CYCC A).

#### 5.3.3.2 Sub-theme 3.2: Effects of children’s responses on CYCWs

The response of children to behaviour management have been expressed as having negative effects on CYCWs. This is indicated in the following excerpts:

*“...anger...it is scary...even for us who are trained; it is difficult to deal with.”* (P#8, CYCC B).

*“...the child is coming from home doesn’t know this nice way of talking not beating, speaking nicely...the child sees you as someone who is joking that you are a fool...”*  
(P#1, CYCC A).

#### 5.3.3.3 Sub-theme 3.3: CYCWs’ safety when managing children’s challenging behaviours

Some participants shared a sense of fear in relation to children’s responses when managing their challenging behaviours. As outlined in the excerpts below:

*“...saying they will catch you...”* (P#9, CYCC A).

*“...not listening...fighting you back...”* (P#3, CYCC B).

### **5.3.4 Major Theme 4: The use of alternatives in managing children's challenging behaviours**

The use of alternatives came across as another important skill from participants, stating that having alternatives contributes to the success of their work. The following sub-themes have been formulated from collected data: support structures in CYCCs, CYCWs' perspectives of existing support structures in CYCCs and types of alternatives existing in CYCCs.

#### **5.3.4.1 Sub-theme 4.1: Support structures in CYCCs**

Gathering and sharing their challenges was expressed as consistence and supporting events, as outlined in the excerpts below:

*“ Sisi we do talk neh, eh you see we have meetings every Wednesday and Friday and there we get to talk to each other and listen what others do and yah like that...”* (P#6, CYCC A).

*“...we seek support from our management as well...”* (P#8, CYCC B).

#### **5.3.4.2 Sub-theme 4.2: CYCWs' perspectives of existing support structures in CYCCs**

It came up in the interviews that some participants are faced with the challenge of feeling inferior when it comes to how management responds to reports of child misbehaviour. As the following excerpts outlines:

*“...it is not good for them (management) to favour the child more not teaching or giving consequences.”* (P4#, CYCC B).

*“...so sometimes you don't know what to do and what not because you do and told you were not supposed to in that way so I end up saying I will wait for supervisor or social work to tell me what to do...you report to the social worker and the child come she just comforts the child then you become the bad person which is wrong...the child wont respect you...”* (P#6 CYCC A).

#### 5.3.4.3 Sub-theme 4.3: Types of alternatives existing in CYCCs

Participants shared the existence of various alternatives, as indicated in the excerpts below:

*“...we have online supervisor and report that I have tried this and that and if unsuccessful we go to the social worker to intervene.”* (P#10, CYCC B).

*“...if it doesn't help then you go to the MDT...”* (P#9, CYCC A).

*“Yah, I go to the supervisor that I tried this and that and failed then they intervene.”* (P#9, CYCC B).

*“Yes, we have this thing called teamwork my partner and I could advice each other on what to do...”* (P#1, CYCC B).

*“...I do ask my partner to help me...”* (P#8, CYCC A).

## **5.4 SUMMARY OF THE CHAPTER**

This chapter presented analysed data from individual interviews conducted telephonically with participants. From the collected data it has become evident that CYCWs are faced with a challenge of daily managing children's behaviours. If children's lives, growth, and development are seen as essential then this should be a priority. The next chapter will include further discussion on the findings followed by the conclusion and recommendations.

## **CHAPTER 6: DISCUSSION OF FINDINGS**

### **6.1 INTRODUCTION**

The purpose of this chapter is to discuss the findings of this study. The findings will be presented in a form of themes and sub-themes as done in the previous chapter. Literature, which is applicable to the findings will be provided. The theoretical framework that was used to guide this study will also be integrated in the discussion of findings.

### **6.2 DISCUSSION OF KEY FINDINGS**

Each theme and sub-theme will be discussed individually to ensure clarity.

#### **6.2.1 The most common challenging behaviours displayed by children in CYC residential centres**

The finding of this study revealed that CYCWs face a challenge of having to work with difficult, deprived, and troubled children. Gannon (2003: 10) states that these children often bring to the group already in care the disadvantages of their past lives, distorted attitudes and experiences and much behaviour that must be toned and even unlearned. Souverein *et al.* (2013: 1941-1945) emphasize this statement by highlighting that the idea that 'nothing works' is residential youth care, indicating that the effectiveness of residential care is being debated. The discussion of challenging behaviours is quite common in the childcare profession; hence it is not surprising that CYCWs in residential centres struggle with the same issue. The concern however, which this study intends to respond to, is the level or degree of preparation rendered to CYCWs.

The researcher began by briefly looking into the challenging behaviours encountered by CYCWs in their work. This enabled the participants to get in touch with the challenges and so manage to respond to the main questions attentively. Participants showed great understanding of their role of encouraging children to



develop new age-appropriate attitudes and behaviours, as well as providing comments and correction when their behaviour is unacceptable or maladaptive (Gannon 2003: 12). Therefore, the need to feel competent and confident in this area came across as indescribable.

Various challenging behaviours were shared by participants in this study. The existence and following of rules are part of everyday life in residential settings and are expected to be followed by all children. This study has discovered that CYCWs are challenged by children who do not want to follow rules. Children who show behaviours of aggression and antisocial end up forming groups where they provide each other with verbal support for rule-breaking behaviour (Hoff, DuPaul and Handwerk 2003: 213). In other words, such behaviours are encouraged by peer support and encouragement. The behaviour of breaking of rules hence defeats the purpose of residential care and may lead to the development of law-breaking citizens. The formation of groups amongst children in residential CYCCs is quite common and is the encouragement of most challenging behaviours (Hoff, DuPaul and Handwerk 2003: 213).

Children with mental health problems are said to display the most challenging behaviours which CYCWs are not trained to deal with, which came across in the findings as being a serious challenge. Some of these young people have conditions so extreme that they are severely compromised in their ability to relate successfully to others. It is the responsibility of caregivers to assist them to change (Quigley *et al.* 2013: 456). This challenge is not only negatively affecting the CYCW but also the child in question as well as other children sharing the same space. Hence, it is important to ensure that CYCWs working with mentally challenged children are well-trained for it. The needs of children with mental health concerns are often not addressed in alternative child care facilities due to several factors. These include the need for children to be cared for in CYCCs in which sometimes insufficient knowledge and skills of child care workers, social workers, and other staff is visible and possibly limiting success (Heyns and Roestenburg 2017: 30).

#### 6.2.1.1 Challenging behaviours towards other children

According to the findings of this study, challenging behaviours presented by children can either be towards other children and even towards the CYCWs. One of the most concerning challenging behaviour presented by participants which children displayed towards other children is bullying. Bullying is defined “intentional, repetitive aggressive behaviours including some sort of power imbalance between those involved (Hellstrom *et. al.* 2015: 2). Bullying has been found to be associated with psychiatric disorders and school well-being, as well as showing associations between being a victim and having a mood disorder (Hansen *et al.* 2014: 355). In other words, bullying behaviour also affects normal psychological growth of children as well as their cognitive development. This gives even more reason to pay attention to the issues of bullying amongst children in residential centres and to ensure that those responding to them know exactly what to do and are confident in their interventions.

The practice of bullying in residential CYCCs was reported by participants as being a great concern as it included other children being bullied based on their health status. The health impact of bullying on children is complex, it can cause depression and anxiety as well as contribute to feelings of suicidal behaviour (McNamee 2016: 40). This defeats the purpose of providing children with care, protection, and holistic growth.

#### 6.2.1.2 Challenging behaviours towards Child and Youth Care Workers

Challenging behaviours displayed by children are not only towards other children but also towards CYCWs. This study has found that CYCWs are experiencing violence or threats from the children they care for. CYCWs working in residential CYCCs face the challenge of dealing with a crisis daily. Crisis is defined as a loss, threat, or challenge or as a traumatic and unsettling event (Isaacson 2002: 3). These events have been indicated in the findings of this study, as forms of physical and emotional hazards which cannot be handled or responded to in usual ways. The crisis faced by CYCWs from children should be considered as a concept of opportunity for growth and teaching new ways of learning (Isaacson 2002: 3). The

challenging behaviours experienced by CYCWs are real and difficult as presented in this study, but they are part of the work of caring for troubled children, hence cannot disappear. The existence of a challenge in this area however may be decreased by focusing on ensuring that CYC students are taught to adopt new ideas and behaviours. This tactic begins to transform their own lives by doing somethings different from what they did previously. This is according to the theoretical framework guiding this study. The researcher is convinced that encouraging adoption of new concepts during training may lead students into recognising the idea and behaviour taught as an innovation to adopt and not merely a theory to learn for examination purposes. In other words, the way CYCWs respond to challenging behaviours displayed by children towards them is dependent on the level of training and extent of adoption of new ideas during training, specifically in relation to children's challenging behaviours.

### **6.2.2 Integration of theory and practice**

The aim of training in any profession is to be competent and effective in that area, bringing theory into practice is essential and seem to be quite challenging for CYCWs. In 1993, VanderVen (1993: 263) began presenting a comprehensive model for enabling connections to be made between theory and practice in the CYC field, proving the undeniable need for integrating theory and practice. Several participants explicitly shared that the theory they have been taught has not equipped them for the level of challenges they are to deal with daily in residential centres. Majority of the participants expressed a sense of being against the assumption that practice is somehow less effective and less responsive to the realities of the diverse children. In other words, participants believe that practising has taught them more than training.

Participants state that practice and theory are different though these are meant to be interlinked for the benefit of the children in care. The current body of CYC literature has influenced our understanding of praxis (theory to practice) in multiple ways, yet many still question the authenticity of people contributing to the discourse with limited practical experience in the field (Edwards and Gaidhu 2018:36-38).

Hence there seems to be conflict in integrating theory into practice, specifically from CYCWs in practice. The dangers of depending more on experience than on training is that one may lack the comparison body of what they do daily, whereas training will provide other skills and knowledge which should challenge and equip the worker to grow and become more competent and confident (Edwards and Gaidhu 2018: 36-38).

The researcher used the five adopter categories presented by Rogers in the Diffusion of Innovation theory (LaMorte 2019: 5) to guide this study. This theory presents the idea that people adopt a new idea, behaviour, or product and so begin to do somethings different from how they did them previously. The researcher of this study has developed an impression that the way theory is presented to CYC students will greatly influence the way it is adopted and integrated into practice. The Diffusion of Innovation Theory by Rogers challenges the trainers to ensure that training is experiential and not simply theoretical. This is presented in these five adopter categories:

- Innovators

The growth of the CYC profession is dependent on the type of graduates it produces. The ability and enthusiasm to be the first to try innovation will encourage the development of new concepts, theories and practice principles fitting to the profession. This is what the innovators adopter category represents. Innovators are eager to learn, representing most students who join training classes in CYC. Hence it is essential for trainers to be aware of such people and to ensure that they are provided with as many opportunities as possible to grow.

- Early adopters

This adopter category is similar to the innovator but focuses more on leadership. Early adopters are people who represent opinion leaders and they embrace change opportunities. The findings of this study revealed that these are the type of people the CYC profession still need greatly. Some participants

indicated that it is easier to focus on what is known than to adopt new concepts into practice. Hence the idea of embracing change opportunities for growth is still lacking. Therefore, early adopters need to be encouraged during trainings to claim their position of leadership in the CYC field (LaMorte 2019: 5).

- Early majority

This study found that some CYCWs needed alternative support more than others. They needed more reinforcement from their leaders and possibly any evidence proving that what they have learnt is effective and can work. People in this category are rarely leaders but do adopt new ideas. They build confidence through assurances from their leaders. It is essential therefore to pay attention to such people, especially during training because it might be easier for them to focus mainly on practice and ignore theory (LaMorte 2019: 5).

- Late majority

The attitude presented by participants in this study gives the impression that several workers could be what Rogers referred to as 'late majority'. This stage of Diffusion of Innovation Theory refers to people/students who are sceptical of change and will only adopt what has been tried by the majority. During training it is possible that the CYC trainee is taught a new concept but does not adopt it unless a consistent necessary assistance and attention is provided. In other words, teaching CYC students should encourage a change within the student first before expecting the student to be a CYCW who will encourage change within children (LaMorte 2019: 5).

- Laggards

The findings of this study also brought the idea that there seem to be other CYCWs who are stuck in the 'laggard adopter' stage as called by Rogers. This is so because some outlined challenges of integrating theory and practice, expressing a sense of ease when sticking to 'tradition'. Gannon (2003: 13) confirms by stating that it is not always easy to connect what we learn in our studies with the young people in our care, further indicating that it is easy for

students to forget that the theories learnt are not taught for examinations purposes only but for practice. This highlights the importance of diffusion during training.

#### 6.2.2.1 Equipping Child and Youth Care Workers with skills and knowledge for managing children's challenging behaviours in residential Child and Youth Care Centres

When asked whether the training they had completed equipped them for the work they are practising, participants expressed a definite no in some cases. The behaviour management concept is much more challenging and seem to need more attention than already given (Molepo and Delpont 2014: 297). Participants indicated various challenging behaviours which are quite serious and dangerous for children as they may affect them negatively in the future. Behaviours such as inappropriate sexual behaviours (including teaching each other) amongst smaller children as well as substance abuse, cursing and threatening CYCWs need to be taken seriously. CYCWs need proper preparation for such cases as well as tools to use in dealing with such cases. The feeling of defeat and helplessness in the workplace leads to burnout which will then mean incompetence in performance. Molepo and Delpont (2014: 280) echo this by confirming that CYCWs undergo personal trauma and emotional distress which originate from their personal lives as well as from the work environment. Furthermore, dealing with young people's behaviours is one of the greatest challenges, which also involves personal risk in the workplace. This, therefore, raises a question of whether CYCWs are trained effectively for their work, leading back to the idea introduced early of adopting the Diffusion Theory in training programmes.

#### 6.2.2.2 Gaps in Child and Youth Care training

The researcher found that including this question into interviews was extremely helpful and empowering to participants because knowing that there can be solutions gave them hope. It should be noted that the training already offered to CYCWs is well-formulated and has contributed immensely to the field of CYC. What this study intends to do is reveal the existence of gaps in trainings for the growth

and professional development of the CYC field while ensuring that frontline workers are listened to and heard. Some of the gaps visible in the findings of this study included that of institutions offering different course packages for CYC work training. This was then indicated as bringing inequality and challenges when individuals are employed and must work together.

The one issue that came up quite frequently was that of having to practice areas from other professions (teacher, nurse and psychologist). This does not seem to be a surprise because those in residential centres understand the requirements and needs of the children in their care. The concern and plea, however, is that CYCWs are prepared and trained for such roles, not to simply be told about them but provided with basics as much as possible. Participants reported that behaviour management as a module is taught during training, but it is not presented as simple, informative and as practical as it will be needed in practice. "Behaviour management problems are usually the first to be raised by parents in classes and parenting support groups. Direct care providers search for "a bag of tricks" to use in managing the behaviour of children in their charge" (Fox 2005: 10). This is because of the great distress and challenge it brings up. Behaviour management seem to be taken lightly whereas it is the most essential tool in residential care work. Participants have made it clear that they need more assistance in terms of the provision of more in-service training, more practice during training, as well as more practical training.

### 6.2.2.3 Behaviour management strategies

When referring to behaviour management one cannot leave out the strategies used when managing behaviour because those are keys to revealing the ability and effectiveness to manage behaviour. Behaviour management should be focused on teaching and supporting children to regulate their behaviours and consequences (Heathcote 2015: 70). Responses from participants in this study reveal that the "need to include reactive behavioural training as part of an overall intervention package for carers of children with challenging behaviour" appears to be essential (Adams and Allen 2001: 335). Participants also supported this idea by indicating

that most of the strategies taught during training are more theoretical than practical, which makes it difficult for them to put them into practice. The impression of the researcher is that the issue could be in the manner of presentation during training and not so much on the theoretical concepts. A plea for simpler, more practical strategies was raised quite often.

Most of the participants showed understanding of the fact that the behaviour of the children in their care was a result, of background influences as well as personality differences. “The role of past experiences, present environment and difficulty associated with their emotional functioning during adolescence are important factors in the exhibiting of challenging behaviour” (Glover 2018: 109). This knowledge however does not write off the fact that appropriate and effective behaviour management strategies are a need in residential care. The findings of this study indicated that some trainings are formulated specifically for the area of practice. This becomes a challenge when the CYCW changes areas, for instance moving from community work to residential settings and the main challenge being behaviour management. Since each child placed in a residential home experiences some form of loss which has a pattern of mourning or grief, including anger, depression, or denial (Isaacson 2002: 2). It is essential therefore to effectively train CYCWs in accordance with their area of practice, including providing behaviour management strategies which are specific to that CYC setting.

### **6.2.3 Children’s response to behaviour management**

The responses of children when managing behaviour are important as they provide guidance to CYCWs as to what change or improvement is needed. This study found that the visibility of change in behaviour has been said to be more in older children than younger children. This possibly could be a result of a lack of knowledge and skills to manage younger children’s behaviours in a manner that will encourage change. In contrast to this, Vanderwoerd (2006: 33) state that judging one’s competence as a worker by the behaviour of the children is ludicrous. This is due to the idea that children in care are not just any children but are children whose emotional disturbances and history of neglect and abuse makes them even more



difficult to manage. Behaviour management should focus on therapeutic change rather than mere control.

#### 6.2.3.1 Negative responses from children

The findings of this study revealed that CYCWs not only have to deal with children's challenging behaviours but also with challenging responses or reactions when attempting to manage challenging behaviours. Davidson *et al.* (2005: 290) confirm by stating that residential childcare is intensive and at times exceedingly difficult work. Staff in residential childcare need training, advice, supervision, and support in undertaking this demanding work since they are doing the toughest of social care jobs.

#### 6.2.3.2 The effects of children's responses on Child and Youth Care Workers

Childcare is usually discussed with a focus on the welfare of children, while the problems confronting CYCWs and their consequences have been ignored (Whitehead 1984: 5-8). Seti (2008: 197-229), echoes this statement by revealing that residential CYCWs are uniquely prone to burnout. Indicating that the challenges faced by CYCWs are real and more than they can handle. The occupational stress experienced by CYCWs in the workplace not only affect them but the children in care. Hence, it is important to attend to the issues raised by CYCWs and assist them appropriately. Participants of this study expressed a sense of being affected negatively by children's responses when managing their behaviours. The anger which is sometimes expressed by children has been expressed as being scary, especially those working with older children. According Steckley (2010: 20), working with children who sometimes need to test CYCWs, who can be full of fury and who are experts at poking the CYCWs' vulnerability triggers, is challenging and needs the practice of containment. Practising containment may enable the CYCWs to handle challenging situations and could remain calm in such situations.

### 6.2.3.3 Child and Youth Care Workers' safety when managing children's challenging behaviours

Managing children's challenging behaviours have been found to possibly lead to a loss of a sense of safety and security in residential CYCCs. Molepo and Delpont (2014: 230) echo this by stating that even where strict security mechanisms are put in place to ensure that children and youth do not bring dangerous weapons into the CYCC, the environment is always unpredictable. This means that the development of a sense of safety and security is constantly shaken. Participants explicitly stated that children fight the back and even threaten them. McDougall (2004: 58) confirms that child protection specialists are facing verbal threats, assaults, and malicious complaints on daily basis in their work with children and for the protection of children. Therefore, it is visible that CYCWs experience a sense of unsafety and possibly fear in their work, the need therefore is to assist CYCWs in finding ways that will empower them and to continue providing environmental safety measures.

### **6.2.4. The use of alternatives in managing children's challenging behaviours**

CYC work is fundamentally about teamwork, closely analysing the primary tasks highlights the need for sensitive recruitment, supervision, and management of care work teams (Fulcher 2009: 30). Participants expressed positive feedback in using existing alternatives, these have been said to include online supervision, teamwork, the multi-disciplinary team and some included the management. Some participants expressed a great lack of confidence in their own interventions and shared that they wait for the management to instruct them on the next move. It is positive to have some form of support available but what CYCWs need also is empowerment, this empowerment may be encouraged by proper and consistent training and supervision.

#### 6.2.4.1 Support structures in Child and Youth Care Centres

The existence of regular meetings and management support have been found to be one of the most effective support structures in CYC work. These structures enable CYCWs to express themselves and share challenges they face in their work.

Residential care work should be a collaborative practice within a wider social work setting where inter-professional relationships between field workers, parents, teachers and children (Milligan and Stevens 2006: 52).

#### 6.2.4.2 Child and Youth Care Workers' perspectives of existing support structures in Child and Youth Care Centres

There may be events in residential CYCCs which create conflict and disequilibrium which tend to be dealt with by denial and retreat to the agency ideology (Mattingly 2011: 152). These may include events which involve CYCWs and the agency/management and failure to settle such conflicts may result in imbalance. Any form of imbalance within the team has a great influence on delivering service to children in care. Participants in this study revealed that support structures exist in residential CYCCs, but a sense of inferiority is also experienced by CYCWs because the management in some cases fail to offer them support. Participants shared that they end up waiting for instructions from the management in terms of behaviour management as to how to respond to children. This is a result of bias on the side of management.

#### 6.2.4.3 Types of alternatives existing in Child and Youth Care Centres

CYCWs are expected to work with professionals from other disciplines (Demers and Gudgeon 2004: 13). These professionals may include social workers, teachers, the child's family, and psychologists. The availability of such elements is intense because CYCWs need as much support as possible. Various alternatives were shared by participants in this study and these include the use of supervision, teamwork and management support. Alternatives have been perceived in this study as being quite useful for CYCWs and all participants had something or some place to go to when things became tough for them.

### **6.3 SUMMARY OF THE CHAPTER**

This chapter has presented a discussion of the findings of this study which included literature support and the theoretical framework guiding the study. The researcher has attempted to explore the idea of whether CYCWs have been trained well for their work with challenging behaviours. The discussions in this chapter has indicated that more work still needs to be done in relation to preparing CYCWs for behaviour management. The following chapter provides the recommendations by the researcher, the summary and the limitations of the study as well as the conclusion.

## **CHAPTER 7: SUMMARY, LIMITATIONS AND RECOMMENDATIONS AND CONCLUSION**

### **7.1 INTRODUCTION**

This chapter includes the summary of the study, the limitations and recommendations of this study.

### **7.2 SUMMARY OF THE STUDY**

The management of children and youth's challenging behaviours in residential centres has been once again revealed as being quite challenging. CYCWs are faced with numerous challenging behaviours daily in the workplace which leads to frustrations, burnouts and even quitting their jobs. Any form of competence in the workplace is encouraged and enabled by the type of training or preparation the worker has been provided with before and during the work. This has been made possible for CYCWs by training providers and is improving but this study has proven that there are existing gaps in the training provided, most especially in behaviour management. Participants from two CYCCs openly shared their challenges in dealing with the behaviours of children in their care. This was achieved through participants active engagement in individual interviews conducted telephonically. The focus of this study though, was not only to explore challenging behaviours faced by CYCWs, rather it was to explore the effectiveness of training provided. The findings of this study indicate that while improvement in terms of training is visible in the field of CYC, the focus on behaviour management is still lacking greatly. The CYCWs in residential centres plead for assistance in this area.

### **7.3 LIMITATIONS OF THIS STUDY**

The limitations of a study design are defined as the systematic biases that the researcher did not or could not control and which could inappropriately affect the results of a study (Price and Murnan 2004: 66). According to De Vos *et al.* (2011:

288), limitations of the study are to be explicit so that precautionary measures may be applied to reduce any possible negative impact that the study could have.

Conducting this study has been a challenge for the researcher because of the global COVID 19 pandemic which resulted in national lockdown. Interviews had to be conducted telephonically to ensure the alignment with government regulations. Hence, the researcher could not enjoy the pleasure of face-to-face communication and observe verbal cues from participants. Conducting telephonic interviews proved to be expensive therefore could not allow enough room for probing for more clarity and honest communication from participants. The other challenge was setting time with participants and sticking to it, ensuring that participants were available and could give enough attention to the interviews. The majority of the participants were interviewed during working hours and as such were panicking about leaving their workstations and thus could not fully concentrate on the discussion during the interviews which could have led to some of the information being withheld.

## **7.4 RECOMMENDATIONS**

### **7.4.1 Conducting workshops**

Participants expressed that after their training programme, they do not receive any further support. Seeing that behaviour management is one of the most important and challenging area in residential care, it is a recommendation that CYCWs are provided with frequent workshops which are focused mostly on behaviour management. This will allow them to constantly sharpen their skills and will encourage professional development which will lead to competence.

### **7.4.2 Developing and providing various strategies for behaviour management**

From the findings of this study, CYCWs lack strategies for managing children's challenging behaviours. It is a recommendation that those providing training develop/prepare strategies which are simple to understand and practical.

### **7.4.3 Experienced Child and Youth Care Workers**

CYCWs who are experienced in the field of CYC, specifically in residential centres are to be provided with platforms where they can be more involved in further developments of CYC training. The study found that training seem to focus more on theory than practice and this leads to uncertainties when a newly employed worker arrives in the life space of children. Finding ways of involving more experienced worker will bring a variety of thoughts, experiences, suggestions, and positive influences in the training provided.

### **7.4.4 Common curriculum**

The growing number of institutions offering CYC courses is both positive and negative. This study has found that different institutions seem to be offering different curriculums which might have some similarities but are not the same. This brings about challenges for CYCWs who must work together, yet have studied in different institutions as there seems to be conflicting ideas about how things are to be done. The recommendation therefore is that a common curriculum is provided by CYC training institutions.

## **7.5 FURTHER RESEARCH**

It is recommended that further research focus on institutions offering courses in CYC work. This may allow for training providers to respond to the challenges expressed by participants in this study as well as encourage the creation of connections between CYCWs in the workplace with providers of training. More studies must be conducted on exploration of gaps and limitations in connecting theory and practice within the CYC field thus appropriately aligning training to the behaviour management training needs.

## **7.6 CONCLUSION**

The need for communication between CYCWs, practising CYC work and those preparing CYC students for the workplace has been proven to be essential. The existence of this communion will bring about deep connections and closing of

unnecessary gaps in the training provided. Communication will allow those in practice to share what they see as missing in the training provided and in that way maintain constant improvement within the CYC field. Behaviour management has been proven by numerous studies, including this, to be the most challenging area in residential care. This study has successfully proven the existence of gaps in training for behaviour management and consequently made recommendations based on the findings. Closing the gap between training and practice will mean developing competent and confident CYCWs who will be better able to deal with challenging behaviours and encourage positive behaviours in children. Success and improvement in CYC training will mean growth in CYCWs leading to healing, development and growth in the children in care.



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# APPENDICES

## Appendix 1: University ethics clearance certificate



Institutional Research Ethics Committee  
Research and Postgraduate Support Directorate  
2nd Floor, Barrow Court  
Gate 1, Steve Biko Campus  
Durban University of Technology  
P.O. Box 1334, Durban, South Africa, 4001  
Tel: 031 373 2375  
Email: [levishad@dut.ac.za](mailto:levishad@dut.ac.za)  
[http://www.dut.ac.za/research/institutional\\_research\\_ethics](http://www.dut.ac.za/research/institutional_research_ethics)  
[www.dut.ac.za](http://www.dut.ac.za)

23 September 2020

Ms L V Mkhize  
Thistle Road  
Waterloo  
P O Box 33369  
Verulam

Dear Ms Mkhize

**Behaviour management challenges: The relationship between preparedness and practice experiences of Child and Youth Care Workers in KwaZulu-Natal**  
**Ethical Clearance number IREC 062/20**

The Institutional Research Ethics Committee acknowledges receipt of your gatekeeper permission letters.

Please note that FULL APPROVAL is granted to your research proposal. You may proceed with data collection.

Any adverse events [serious or minor] which occur in connection with this study and/or which may alter its ethical consideration must be reported to the IREC according to the IREC Standard Operating Procedures (SOP's).

Please note that any deviations from the approved proposal require the approval of the IREC as outlined in the IREC SOP's.

Yours Sincerely

\_\_\_\_\_  
Prof J K Adam  
Chairperson: IREC

**Appendix 2a: Letter of permission of request for gatekeeper permission from the Director of the Durban Child and Youth Care Centre**

Thistle Road Waterloo  
P.O Box 33369  
Verulam  
[Date]

The Director  
P.O. Box 52556  
Moore Rd  
Glenwood  
4083

**Request for Permission to Conduct Research**

Dear Madam/Sir

My name is Lindelwa Mkhize, a Masters of Health Sciences student at the Durban University of Technology. The title of the research study I wish to conduct is: Behaviour management challenges: The relationship between preparedness and practice experiences of Child and Youth Care workers in KwaZulu-Natal.

I am hereby seeking your consent to conduct individual interviews in your institution with Child and Youth Care workers. These interviews will be conducted via telephone calls due to the COVID-19 pandemic affecting the country. I have provided you with a copy of my proposal which includes copies of the data collection tools and consent forms to be used in the research process, as well as a copy of the approval letter which I received from the Institutional Research Ethics Committee (IREC). Due to the challenges with the COVID-19 pandemic, documents for this study will be provided to participants via the email. Consent forms will be emailed back to me once signed.

If you require any further information, please do not hesitate to contact my supervisor on 031-373 2284 or you can email her at [nokuthulas@dut.ac.za](mailto:nokuthulas@dut.ac.za)

Thank you for your time and consideration in this matter.

Yours sincerely,  
Lindelwa Mkhize  
Durban University of Technology  
078 925 7184  
[lvmkhize1@gmail.com](mailto:lvmkhize1@gmail.com)

## Appendix 2b: Approval letter from the Director of the Durban Child and Youth Care Centre



15<sup>th</sup> September 2020

Lindelwa Mkhize  
Thistle Road Waterloo  
PO BOX 33369  
Verulam  
[lvmkhize1@gmail.com](mailto:lvmkhize1@gmail.com)

Dear Lindelwa,

**Request to conduct research at the Durban Child and Youth Care Centre.**

Gate Keeper Letter: Structured, telephonic interviews.

Having considered your request as set out in your letter dated 18<sup>th</sup> August 2020, I am pleased to confirm that the Durban Child and Youth Care Centre is willing to support your study on, **Behaviour management challenges: The relationship between preparedness and practice experiences of Child and Youth Care Workers in Kwa-Zulu Natal.**

In confirming this organisation's willingness to support your study, I hereby consent to you interviewing Child and Youth Care Workers in the employ of the organisation at the time of the study for the purpose of structured telephonic interviews related to your research topic.

Yours faithfully,

Mrs. A Goble  
Director

**DURBAN CHILD AND YOUTH CARE CENTRE – NPO 002 363**

222 Lena Ahrens Road, Glenwood, 4001 / P.O. Box 52556 Moore Road, Glenwood, 4083

Tel: 0312011301 Fax: 0312021330 Email: [info@dch.org.za](mailto:info@dch.org.za) Web: [www.dch.org.za](http://www.dch.org.za)



## Appendix 2c: Approval letter from the Director of the St. Theresa Child and Youth Care Centre



**ST. THERESA'S**

Tel: 031 209 2166/7 79  
Fax: 031 209 2160  
002 - 240 NPO  
P.B.O.930003915

22 September 2020

Dear Madam/ Sir

I would like to place on record Ms Lindelwa Vernon Mkhize has received permission to conduct her research.

She would undertake individual interviews with Child and Youth Care workers at St Theresa's CYCC.

Kind Regards

Sandv Madurav

Child and Youth Care Manager

## Appendix 2d: Approval letter from the Director of the Durban Child and Youth Care Centre



15<sup>th</sup> September 2020

Lindelwa Mkhize  
Thistle Road Waterloo  
PO BOX 33369  
Verulam  
[lvmkhize1@gmail.com](mailto:lvmkhize1@gmail.com)

Dear Lindelwa,

**Request to conduct research at the Durban Child and Youth Care Centre.**

Gate Keeper Letter: Structured, telephonic interviews.

Having considered your request as set out in your letter dated 18<sup>th</sup> August 2020, I am pleased to confirm that the Durban Child and Youth Care Centre is willing to support your study on, **Behaviour management challenges: The relationship between preparedness and practice experiences of Child and Youth Care Workers in Kwa-Zulu Natal.**

In confirming this organisation's willingness to support your study, I hereby consent to you interviewing Child and Youth Care Workers in the employ of the organisation at the time of the study for the purpose of structured telephonic interviews related to your research topic.

Yours faithfully

Mrs. A Gofie  
Director

**DURBAN CHILD AND YOUTH CARE CENTRE – NPO 002 363**

222 Lena Ahrens Road, Glenwood, 4001 / P.O. Box 52556 Moore Road, Glenwood, 4083

Tel: 0312011301 Fax: 0312021330 Email: [info@dch.org.za](mailto:info@dch.org.za) Web: [www.dch.org.za](http://www.dch.org.za)

## Appendix 2e: Approval letter from the Director of the St. Theresa Child and Youth Care Centre



**ST. THERESA'S**

Tel: 031 209 2166/7 7 9  
Fax: 031 209 2160  
002 - 240 NPO  
P.B.O.930003915

22 September 2020

Dear Madam/ Sir

I would like to place on record Ms Lindelwa Vernon Mkhize has received permission to conduct her research.

She would undertake individual interviews with Child and Youth Care workers at St Theresa's CYCC.

Kind Regards

Sandy Maduray

Child and Youth Care Manager

## Appendix 2f: Approval letter from the Director of Durban Child and Youth Care Centre



15<sup>th</sup> September 2020

Lindelwa Mkhize  
Thistle Road Waterloo  
PO BOX 33369  
Verulam  
[lvmkhize1@gmail.com](mailto:lvmkhize1@gmail.com)

Dear Lindelwa,

**Request to conduct research at the Durban Child and Youth Care Centre.**

Gate Keeper Letter: Structured, telephonic interviews.

Having considered your request as set out in your letter dated 18<sup>th</sup> August 2020, I am pleased to confirm that the Durban Child and Youth Care Centre is willing to support your study on, **Behaviour management challenges: The relationship between preparedness and practice experiences of Child and Youth Care Workers in Kwa-Zulu Natal.**

In confirming this organisation's willingness to support your study, I hereby consent to you interviewing Child and Youth Care Workers in the employ of the organisation at the time of the study for the purpose of structured telephonic interviews related to your research topic.

Yours faithfully

Mrs. A Goffe  
Director

**DURBAN CHILD AND YOUTH CARE CENTRE – NPO 002 363**

222 Lena Ahrens Road, Glenwood, 4001 / P.O. Box 52556 Moore Road, Glenwood, 4083  
Tel: 0312011301 Fax: 0312021330 Email: [info@dch.org.za](mailto:info@dch.org.za) Web: [www.dch.org.za](http://www.dch.org.za)

### Appendix 3: Letter of information for interview participants



Dear Participant

Thank you for your willingness to participate in this study.

**Title of the Research Study:** Behaviour management challenges: The relationship between preparedness and practice experiences of Child and Youth Care Workers in KwaZulu-Natal.

**Principal Investigator/s/researcher:** Ms. L. Mkhize, Master of Health Sciences Candidate.

**Co-Investigator/s/supervisor/s:** Prof. M.N. Sibiyi, D. Tech Nursing (Supervisor); Ms. R.T. Hlengwa, M Ed: Higher Education (Co-supervisor).

**Brief Introduction and Purpose of the Study:** Dealing with young people's behaviours is reported as being one of the greatest challenges faced by Child and Youth Care (CYC) practitioners. This challenge has led some practitioners into suffering from burnout. Some resort to punishment when dealing with children's challenging behaviours, proving their struggle in terms of behaviour management. It is visible therefore that there is a problem of behaviour management in residential facilities. The purpose of this study is to explore the relationship between preparedness and practice of CYC workers in relation to managing children's behaviours.

**Outline of the Procedures:** You are requested to participate in a telephonic interview session that will be facilitated by me. The interview will take place at your workplace during your lunch break to minimize disruption. Permission is requested to voice record the interview which will take 30-40 minutes.

**Risks or Discomforts to the Participant:** There are no expected risks or discomfort which you might experience.

**Benefits:** You will have a chance to express and share challenges you are faced with in your work with young people, especially dealing with challenging behaviours. You will be provided with a platform to also review any gaps you feel exist in the theory provided during trainings and freely make suggestions. A report will be published and made available to CYC practitioners and trainers in the field of CYC for the review and updates where necessary.

**Reason/s why the Participant May Be Withdrawn from the Study:** You are free to withdraw from the study; there will be no adverse consequences for you should you decide to withdraw.

**Remuneration:** You will not receive any remuneration from participating in this study.

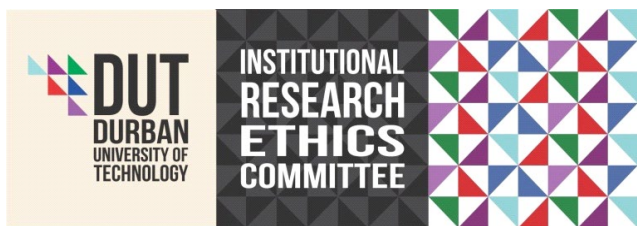
**Costs of the Study:** You will not be expected to cover any costs towards this study.

**Confidentiality:** Any information you share will not be shared with anyone outside the interview except information agreed upon. Your name and institution will not be shared during the report of this study. Data collected during the study will be kept in a safe locked cupboard and after five years will be discarded.

**Research-related Injury:** There are no foreseen injuries which may occur during your participation in this study.

**Persons to Contact in the Event of Any Problems or Queries:** Please contact the researcher, Lindelwa Mkhize on 078 925 7184 (Tel. no.), my supervisor, Prof. M.N. Sibiyi, telephone number: 031-373 2284 or the Institutional Research Ethics Administrator on 031-373 2375. Complaints can be reported to the DVC: Research, Innovation and Engagement Prof S Moyo on 031-373 2577 or moyos@dut.ac.za

## Appendix 4: Consent



### Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher, Ms Lindelwa Mkhize about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: \_\_\_\_\_,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

\_\_\_\_\_

Full Name of Participant	Date	Time	Signature / Right Thumbprint
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I, Lindelwa Mkhize, herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

\_\_\_\_\_

Full Name of Researcher	Date	Signature
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\_\_\_\_\_

Full Name of Witness (If applicable)	Date	Signature
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\_\_\_\_\_

Full Name of Legal Guardian (If applicable)	Date	Signature
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**Appendix 5a: Demographic data**

**SECTION A: DEMOGRAPHIC DATA**

Participant code:

Date of interview: .....

Please answer the following questions in the spaces provided by placing X in the most appropriate option or providing an appropriate answer.

1. Age: .....

2. Gender: .....

3. Child and Youth Care (CYC) highest qualification:  
.....

4. Institution where qualification was obtained:  
.....

5. Number of years employed as a CYC worker in a residential setting:  
.....



## **Appendix 5b: Interview guide**

### **SECTION B: INTERVIEW QUESTIONS**

1. Which behaviours displayed by young people would you say you find challenging?
2. Do you feel like the training you did has equipped you enough to deal with such behaviours? How?
3. What do you see as gaps in the training you completed?
4. Do you find the strategies you learnt on behaviour management effective and practical? How?
5. What challenges do you experience when using these strategies?
6. Based on the behaviour management strategies you have used, what changes have you observed in children?
7. What alternative strategies do you employ if the behaviour management strategies you have previously used did not work?

Probing questions will be asked based on participants' responses.

## **Appendix 6: Sample of a transcript**

### **Participant number 9: CYCC A (P#9, CYCCA)**

**Researcher:** Thank you for setting time aside for this interview. I understand it's not easy to be interviewed via call but please bear with me. Ok, ummh! I hope your supervisor did brief you about me and my research.

**P#9, CYCC A:** Yah, she did. Weh I don't even know where I put the forms you gave us. I left it at work.

**Researcher:** Ay! Don't worry, don't worry, I have the questions here, I will ask you, we'll just have a discussion *nje*. So, I am doing a study on behaviour management, which looks at whether CYCWs are trained enough to deal with behaviours of children. I will ask you few questions, the same as the ones I sent you neh, everything we discuss will be recorded as it is written in the letter I sent you also. It's not too much though...

**P#9, CYCC A:** Oh! yah

**Researcher:** ok so my first question is which behaviours can you say you find challenging more from the children you work with.

**P#9, CYCC A:** Oh challenging...

**Researcher:** Yes, the ones you feel are really challenging for you.

**P#9, CYCC A:** Ok, you see bullying, if someone teases you with your background although not to say that this is your background but the things they say are related to the background of another child, what the other is saying *nje* the other child cannot change. Let me make an example: say ay you eat medication *yabo*, they say things that will really hurt the other in the spirit, the cannot change that they are taking medication so that really troubles, it's like that *nje* yah. And also, that another knows rules in the house but breaks them, using substances sometimes not stealing it but *nje* openly, not to care. And fighting physically *ke*.

**Researcher:** *Ok manje* (now) do you think CYCWs are trained enough for dealing with these behaviours?

**P#9, CYCC A:** *Ay phela* CYCWs are trained but theory is not the same when you are in practice like when you are facing the behaviour, you have to discipline the child with something they will learn from, you find that there are other behaviours which you also don't know how you will discipline the child if you think of a consequence you don't know which one will fit the behaviour so the child learn *yabo* so, you end up just doing one-on-one talk *nje* and he end up not getting the consequence which is somethings that backfires because next time when you give another child a consequence they say *ay* you didn't give the other *yabo* so, they don't understand sometimes that other behaviours need consequences others don't yah.

**Researcher:** mmh yah. I hear you very well but tell me, what do you mean that the theory and practice are not the same?

**P#9, CYCC A:** Like what you study is not the same as when you do it *yabo* most of the time it's different.

**Researcher:** So, can you say there are gaps, which ok you are trained but maybe here and there it is still missing. Are there such gaps?

**P#9, CYCC A:** *Ay* (breathing heavily), I can say there are gaps because sometimes *angithi* you are a CYCWs but as a CYCWs you are a teacher, a nurse, a psychology a psychiatrics, *yabo* these are too many things, although you have the CYC qualification but you also need to know how you will deal with these different things because even with behaviours children will respond harsh yah such things.

**Researcher:** Yah I understand. So, the strategies you are taught *ke*, do you feel like they are practical in practice or more of theory? Especially with the things you are counting now.

**P#9, CYCC A:** (laughing) They do work *ngane yami* (my child) as I explained that sometimes they do work sometimes they don't work because sometimes it

is easy to move away from them although I won't do something that violate the rights of children but *yabo* but it wouldn't be what I was taught maybe, it's a problem when you are not sure how to respond or what to do, it's too much sometimes *nje*.

**Researcher:** Ok I understand so with the strategies you use, do you see any changes in children?

**P#9, CYCC A:** *Angithi*, there is that thing that if you apply somethings it doesn't help then you go to the MDT, go to the social worker. So, it goes with the child also some might not need so much other do.

**Researcher:** Ok thank you for answering my questions so well. Is there anything else you wish to add?

**P#9, CYCC A:** No! ay, I am fine.

**Researcher:** Thank you for your time. Bye.

**P#9, CYCC A:** Bye.

## Appendix 7: Certificate from the professional editor

**DR NELLIE NARANJEE: LECTURER**

Doctorate Nursing, MBA, MCur (Health Sciences)  
Freelance academic editor: Blackford Institute, UK

28 Protea Road  
Kloof  
3610

Contact details

Office : 031 3732036

After hours : 031 7643815

Mobile : 0825776126

Email [naranjeen@gmail.com](mailto:naranjeen@gmail.com)

NellieN1@dut.ac.za

---

## EDITING / PROOFREADING CERTIFICATE

Re: **Student Lindelwa Vernon Mkhize (20903178)**

Masters/Doctoral thesis: **Behaviour Management Challenges: The Relationship between Preparedness and Practice Experiences of Child and Youth Care Workers in Kwazulu-Natal**

I confirm that I have edited this thesis for writing style, clarity, language, sentence structure and layout. The document is formatted according to the prescribed guidelines. I returned the document to the author with track changes. The author remains responsible for the correct application of the changes in the text and references.

I am a freelance editor specialising in proofreading and editing of academic documents. I have a Doctorate Degree in Nursing from Durban University of Technology. I have a Master's Degree in Business Administration (Public Health) and a Master's Degree in Health Sciences. I have a Diploma in Proofreading and Copy Editing with Distinction from the Blackford Institute, UK. I have supervised numerous Master's degree dissertations.

I wish the student all the best.

---

**DR NELLIE NARANJEE**

14 December 2020

**DATE**

## Appendix 8: Turnitin report

Feedback Studio - Google Chrome  
ev.turnitin.com/app/carta/en\_us/?s=1&BDS=1&lang=en\_us&o=1478404277&u=16632674

feedback studio | Lindelwa\_Vernon\_Mkhize.docx | Rectangular Snip | /100

**Match Overview**

**4%**

Match Number	Source	Similarity Percentage
1	manualzz.com Internet Source	2%
2	ir.dut.ac.za Internet Source	2%

**BEHAVIOUR MANAGEMENT CHALLENGES: THE  
RELATIONSHIP BETWEEN PREPAREDNESS AND  
PRACTICE EXPERIENCES OF CHILD AND YOUTH CARE  
WORKERS IN KWAZULU-NATAL**

Lindelwa Vernon Mkhize (20903178)

Page: 1 of 110 | Word Count: 23597 | Text-only Report | High Resolution On