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CHALLENGES EXPERIENCED BY CHILD AND YOUTH CARE WORKERS IN CHILD AND YOUTH CARE CENTRES WORKING WITH CHILDREN

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ABSTRACT

This article explores the challenges of child and youth care workers (CYCWs) working with children. Children and young people exhibiting attachment and behavioural difficulties present a significant challenge for parents, child and youth care workers, and society. This article reports on qualitative in-depth semi-structured interviews conducted with 16 CYCWs and the data were subjected to thematic analysis. The findings indicate that CYCWs involved in child welfare experience not only a lack of recognition but also conflict, overwork and other negative job characteristics that affect their caring responsibilities, given the complexity and demanding roles of working with children. The study addresses issues not discussed in the literature that affect CYCWs, including organisational and profession-related challenges. A lack of detailed information sharing with other human service professionals threatens the viability and sustainability of the professional care service and remains a challenge.

Keywords: child and youth care workers; child and youth care centres; children; South Africa

INTRODUCTION

Despite the huge importance of child and youth care workers (CYCWs) working with children with attachment difficulties, there is a limited number of empirical studies evaluating the work of CYCWs in South Africa. For this reason, challenges experienced by CYCWs in child and youth care centres (CYCCs) remain largely unknown in the human services profession. This qualitative study aims to explore the challenges experienced by CYCWs in working with children. A comprehensive background to the study is presented, followed by a description of the research methodology, an account of the results and a discussion of the findings. Recommendations for human services professional practice are made in order to conceptualise more precisely the challenges within the broader scope of child care in CYCC. The article concludes with a call to find solutions on the basis of the findings, which shed light on the

organisational challenges, including poor communication, unsupportive management, issues with shifts, tensions stemming from social workers' limited preparedness to deal with foster or reunification plans, and delayed management feedback.

BACKGROUND TO THE STUDY

Children and young people (C/YP) in child and youth care centres (CYCCs) represent one of the most vulnerable and disadvantaged groups in South Africa (Save the Children South Africa, 2020). There is increasing vulnerability among children in urban settings, as the South African population is 61% urban-based (Save the Children South Africa, 2020). Compounding this difficulty is the lack of attention to the importance of attachment for children (Thompson, Simpson & Berlin, 2022). This stems from the fact that the needs of children and youths are largely unmet in many countries, including South Africa (Nhedzi, Haffejee, O'Reilly & Vostanis, 2022). Significant empirical evidence indicates that C/YP in care centres are at increased risk of developmental and attachment difficulties across all facets of their lives (Thompson *et al.*, 2022). The term CYCWs refers to:

A registered social service practitioner who interacts with children and youth, providing holistic care, therapeutic, developmental, educational and recreational programmes that promote and enhance optimum development, including practitioners providing supervisory and management support services (RSA, 2020:7).

Child and youth care workers play vital roles that are underappreciated in care centres (Bertolino, 2014). It is the job of CYCWs to guide children and young people through their daily routines as well as to carry out their own day-to-day services. The role of CYCWs is not limited to residential care but depends on the programme or setting. CYCWs may also be described as house parents or managers, resident counsellors, psychiatric technicians (psych techs), youth counsellors, case managers and caseworkers (Agere, 2014; Zondeka, 2021). CYCWs can be found in administrative, operational, training and supervisory capacities, but their primary role is to provide direct services. Research suggests that the responsibilities of CYCWs do not end with what appears in their formal job descriptions (Bertolino, 2014). Bertolino (2014) states that CYCWs are in effect the “go-to” people ensuring the safety and wellbeing of children and youths, while juggling multiple on-shift tasks. On any given day, a CYCW in a residential setting could be supervising a group of children or young people, working to resolve a conflict between two residents, and answering phone calls simultaneously – all the while with paperwork awaiting them. Besides the numerous responsibilities of CYCWs, the work environment is fast-paced and requires conscientious on-the-spot decision-making (Bertolino, 2014). In this sense, the role of the CYCWs is uniquely multifaceted, with three dimensions of burnout anticipated by a combination of personality, social support and work environment (Sean & William, 2010). The role of CYCWs is diverse and complex, and they may experience burnout in emotional exhaustion, depersonalisation, and reduced personal accomplishment. The occurrence of burnout in these dimensions is likely influenced by a combination of their personality traits, the level of social support they receive, and the conditions of their work environment. Understanding these factors can help in developing strategies to support and protect the well-being of CYCWs. Despite these personal risks,

CYCWs are expected to create spaces that are in line with notions of safety, normality and therapeutic benefits (Digney & Smart, 2020).

CYCWs experience work-related stress from various sources, including heavy caseloads, frequent exposure to negative and often traumatic situations, and safety threats (Malepo, 2020; Strand & Dore, 2009). In South Africa, CYCWs have historically been working primarily in residential care (in children's homes), now called child and youth care centres (CYCCs), where many are still employed (Department of Social Development [DSD], 2019). Zondeka (2021) argues that the struggle for the work of CYCWs to be acknowledged in society is still a major problem. A recent study highlighted that the progress of the social service professions within developmental social welfare in South Africa is questionable (Gray & Lombard, 2022). The study revealed that well-intentioned policies were confusing for the childcare and youth care work profession (Gray & Lombard, 2022). Despite being accredited, CYCWs are still performing groundwork that would help to free social workers to focus on statutory child protection matters (Gray & Lombard, 2022). There were concerns that CYCs were underrepresented in policymaking and decision-making. Generally, the Department of Social Development's management and lack of provision for CYC in DSD's national and provincial organisational structures (SACSSP, 2021) demonstrates the lack in progress towards recognition of the sector. The introduction of mandatory registration for child and youth care workers in 2014 did not lead to any positive changes in the conditions and opportunities within the sector. As a result, registered child and youth care workers have become disillusioned with the role of the Professional Board for Child and Youth Care Work and the South African Council for Social Service Professions (SACSSP). CYCWs are employed as 'care workers' or 'caregivers' nationwide, and a glass ceiling where CYCWs' upward mobility ends at national qualification framework level 6 was reported as challenging (DSD, 2019). Zondeka (2021) reported that in February 2020, 8 917 CYCWs, auxiliary CYCWs and student CYCWs were registered in South Africa according to regulation of Republic of South Africa, 1978, enacted in 2014 (SACSSP, 2020). The SACSSP (2022) reported that on 31 March 2022, there were 200 professional, 8 358 auxiliary, and 4 055 student CYC registrations. Among the challenges for CYCWs are accreditation, training and curriculum. CYCWs are negatively affected by the lack of standardisation of their curriculum and facilities that cannot produce the same standard of work for learners (Gray & Lombard, 2022). The absence of standardised curriculum and facilities negatively affects CYCWs as they face difficulties in providing consistent and high-quality education and care to the learners they serve. The lack of standardisation can lead to disparities in the learning experiences and outcomes for the children and youth under their care. The facilities where CYCWs work, such as schools, residential homes, or other care centers, face challenges in providing a consistent and standardised level of education and care to the learners under their supervision. The profession had no quality assurance visits because they were very cost intensive. The other challenge was access to training, as not all universities offer child and youth care work and development and not all offer online courses. They mostly rely on TVET colleges to train professionals (SACSSP, 2020). There is still a lack of research on the intimate experiences of CYCWs working with children with attachment difficulties. Less work has been conducted with child and youth care workers; we know little about the challenges experienced by CYCWs in working with children with attachment difficulties.

METHODOLOGY

A qualitative design was employed to build a rich, detailed and comprehensive description of the challenges experienced by CYCWs in working with children with attachment difficulties. This qualitative approach aided in understanding how participants make meaning of their experiences (Saunders, Thornhill & Lewis, 2019).

Researchers obtained ethical approval (26/10/175854895510) from the University of South Africa (UNISA) Higher Degree Research Committee and permission was granted by the Department of Social Development (DSD, 2019) to gain access to the CYCCs.

Purposive and snowball sampling methods were employed to select participants. The researchers were guided by their knowledge based on personal experiences with CYCW. The recruitment of participants was based on the following criteria:

- CYCWs who have been working with children with attachment difficulties at one of the CYCCs in the Ekurhuleni Metropolitan region for over a year;
- CYCWs who were working full-time at these centres;
- The CYCWs who were willing and able to participate;
- Either male or female CYCWs;
- CYCWs who were registered with the SACSSP; and
- CYCWs who would communicate in English.

Participants received an information sheet containing information about their rights, the roles of the interviewees, and the expected risks and benefits that might arise from participating in the study. Each participant also signed an informed consent form before the interview began. All the interviews were conducted in a safe place, taking into consideration the time of the interviews and the participants' preferences. The participants were free to withdraw from the study at any time and were informed that their accounts would remain confidential through the use of pseudonyms. We sought permission from participants to audio record the interviews. Responses were kept in a locked file on a private computer and were only shared with the authors of the research. Interviews were conducted individually and confidentially in a private space in participants' work settings. The aim was to encourage the participants to speak in their own words to obtain a first-person account (Saunders *et al.*, 2019).

The researchers continued recruiting participants until data saturation was reached. Data saturation is achieved when the contributions by the study participants no longer add new information (Saunders *et al.*, 2018). In this study, data saturation was reached after 16 interviews. The data were intended to provide rich and deep information rather than a broad survey of the phenomenon (Creswell, 2013; Levitt, Morrill, Collins & Rizo, 2021). Analysis typically involves comparison, coding and summarisation (Parker, 2018).

Trustworthiness of the study

The credibility of this study was established through many strategies, including the use of field notes containing the whole interview context and clarification of the data-collection process (Leavy, 2020). The researchers utilised tactics to help ensure honesty in informants when

contributing data. The researchers built trust and were unbiased in data collection. This was done by establishing a trusting and respectful relationship with the informants, so they feel more open and willing to share information truthfully; and ensuring that the data collection process is impartial and free from any form of bias, so informants feel they can provide honest responses without fear of judgment. In particular, each person approached was free to withdraw from the study at any moment. The data collection involved participants who were willing to participate in the interviews. A reflexive commentary was also used, reporting the researcher's assumptions, beliefs and biases that contributed to shaping the study's final results (Levitt *et al.*, 2021).

The researchers also adopted member checking as the informants were given an opportunity to go over what the researchers recorded about their accounts (Leavy, 2020). Multiple coding involves cross-checking the coding process and the data interpretation by a second independent researcher not only to enhance the study's internal validity (Lincoln & Guba, 1985), but also to ensure trustworthiness.

FINDINGS AND DISCUSSION

Demographic profile

Table 1: Demographic profile of participants

No.	Code	Gender	Age	Qualifications	Number of years of experience as CYCW	Number of years working as CYCW at current employer
1	A	Female	35	Basic Qualification in Child Care	10	9
2	B	Female	48	Basic Qualification in Child Care	20	3
3	C	Male	38	Basic Qualification in Child Care	10	10
4	D	Female	34	Basic Qualification in Child Care	12	1
5	E	Female	47	Basic Qualification in Child Care	20	15
6	F	Male	40	Basic Qualification in Child Care	20	18
7	G	Female	35	Basic Qualification in Child Care	10	10
8	H	Male	45	Basic Qualification in Child Care	18	15
9	I	Male	43	Basic Qualification in Child Care	16	11
10	J	Female	56	Basic Qualification in Child Care	28	11
11	K	Female	59	Basic Qualification in Child Care	16	11
12	L	Female	44	Basic Qualification in Child Care	4	2
13	M	Female	33	NQF level 4	12	7
14	N	Female	37	Child and Youth development Degree	10	10
15	O	Male	47	Social Work Degree	20	15
16	P	Male	39	NQF Level 4 in CYC	13	13

Participants were all African (black), meaning no other ethnic groups or races participated in this research. The ages of the 16 participants ranged from 33–59 years, with only two participants above 50 years of age. The participants were employed at two different CYCCs. Both institutions are government-owned. The sample was mainly female (9 of 16 participants). This distribution between females and males is consistent with previous studies on CYCWs in South Africa (Molepo & Delport, 2015). Most participants had certificates in CYC, with only two holding degree qualifications. It is worth noting that Lwina *et al.* (2018) suggest that a Master’s degree will adequately prepare a candidate for the child welfare workforce.

Fifteen participants had 10 years or more experience in CYCW, and only one had less than five years of experience. The literature on welfare shows that training influences the attitude, values and confidence of CYCWs (Scourfiend *et al.*, 2012). The long work experience of the participants indicated that they could provide useful insights for this study. The findings support the work of scholars in welfare practice (Lwina *et al.* 2018:172) who argue that experienced child welfare workers can significantly “provide more effective services to children and their families than less experienced workers.”

Table 2 represents the five main themes and subthemes that emerged from the data analysis.

Table 2: Overview of identified themes and sub-themes

Main Theme	Sub-themes
1. Lack of collaborative work between social workers and CYCWs	1.1. Poor communication between social workers and CYCWs
	1.2. Confidentiality and sharing of children’s information
	1.3. Impact of not sharing information on CYCW’s work
	1.4. Social workers have limited contact with children
	1.5. Not preparing children for foster care or reunification
2. Lack of caring and support of CYCWs	
3. Challenges with shifts and personal problems	
4. Delayed feedback from management	
5. Lack of immediate tangible results	

The first sub-theme on the challenges experienced by CYCCs in working with children with attachment difficulties is a lack of collaborative work between social workers and CYCWs.

Theme 1: Lack of collaborative work between social workers and CYCWs

Participants are of the view that there should be more collaboration between social workers and CYCWs. These views are corroborated by Varaden (2016), who regards the lack of communication, transparency from management and supervisors, lack of support from management and absence of accountability between CYCWs and field social workers as some of the challenges resulting from lack of collaboration. The author highlighted further challenges, such as favouritism and conflict over staff selection, lack of involvement in decision-making, and lack of consultation and participation, as detrimental to rendering social services to CYCs (Varaden, 2016). Based on these assertions, if child care work is to realise its obligation to deal with attachment-challenged children and youths, CYCWs must find solutions that accommodate the professionals' responsibility to collaborate with other professionals.

Sub-theme 1.1: Poor communication between social workers and CYCWs

Participants spoke about social workers not sharing background information on children and interventions with them, yet they spent less time with the children than CYCWs. They felt that they were entitled to know children's background information:

The social workers do not even give us a little background about the child. Where are they coming from? Are they taking any medication? Unless the child is coming from the streets, then we understand they do not have a file because the police brought the child. (M)

They do not report back to us. This is affecting us a lot. At least they must come back and say, from what you have reported, this is what I did. (E)

The social workers only call you when there is a panel and want you to provide the child's progress. (J)

The above participants indicated poor working relationships and lack of accountability regarding information sharing with other professionals, which hindered the CYCWs' work. Given that Molepo (2020) acknowledges the conflicts between CYC work and social workers, these findings did not come as a surprise. CYCWs report wanting information to be shared between professionals on a need-to-know basis (Molepo, 2020). CYCWs find panel meetings alienating, intimidating and as inhibiting their participation in multidisciplinary discussions on children's progress. Research shows that residential work can be intense, and the environment is often crisis-driven, resulting in a breakdown of boundaries or blurred boundaries between working staff (Molepo, 2020). CYCWs must manage the activities of day-to-day life and this running of household affairs can lead to conflicts around gossip, lack of trust, cliques and difficult personal relationships (Molepo, 2020). It can result in negativity, discord and a lack of satisfaction (Varaden, 2016).

Unlike the study by Varaden (2016), Modlin (2018) discovered that co-workers would feel good if the teams were on the same page. CYCWs could attempt to remove themselves from distressing situations or rely on support from others as a coping mechanism (Modlin, 2018). Phillips and Walsh (2019) suggest that communication and information sharing in the child welfare system should occur regularly, as needed, and on time. The literature offers only slight

direction on how professionals in the child welfare system should cooperate (Dimba-Ndalen, Motloun & Kasiram, 2022; Modlin, 2018). Phillips and Walsh (2019) propose joint budgeting, cross-training, developing memoranda of understanding, protocols for information sharing, shared funding, and collocation of staff to enhance collaboration between various role players. Drawing from these findings, it is undeniable that the participants emphasise communication/information sharing ideas/perspectives, joint decision-making, remaining respectful and not making issues personal (Phillips & Walsh, 2019).

Sub-theme 1.2: Confidentiality and sharing of children's information

Most comments reflected tensions and a lack of understanding or trust between CYCWs and social workers. There was a perception from CYCW staff that much more serious confidentiality issues dominated their work. Most of the participants related social workers' unwillingness to share information to the ethical obligation of confidentiality:

One more thing that makes our work difficult is the issue of confidentiality. I know it is part of social work ethics not to give out information to another person outside my profession because it is a breach of confidentiality. (F)

...so they do not go far because some things are only for them and the child. Usually, social workers do not tell us 100% of everything because they want to observe confidentiality. (J)

Another participant felt that there was a misconception and others explained how they get to know the background information of some children:

Our problem relates to a misconception about confidentiality when dealing with a social worker. There is a misconception regarding the meaning of confidentiality and being confidential to whom? (O)

They talk of confidentiality, which confuses me because I usually know more than what the social worker knows. I know the real story more than what they know. The children tell us [their real story]. We do not need to ask what happened because we are not allowed to ask them to tell us if they want to. (M)

CYCWs felt there were fundamental differences between social workers regarding their understanding and implementation of confidentiality procedures. There was a suggestion during interviews that CYCWs were more comfortable than social workers in accepting and sharing important information to enable sound decision-making. The interviewees considered these differences as potential barriers to shared responsibility and trust. These communication problems are also addressed by Durlak and DuPre (2008), who emphasise the negative implications of not adhering to specific practices and processes, including shared decision-making, coordination with other agencies, communication with inter- and intra-organisational networks, and formulation of tasks and procedures that clarify roles and responsibilities. The sentiments of participants on confidentiality differ between social workers and CYCWs. However, decisions about childcare are not always straightforward and could be the root cause of conflict between social workers and CYCWs. Decisions on confidentiality ought to be made

with the child's best interests in mind. However, what is meant by the best interests of the child is not always the same for different people and stakeholders (Mkhwanazi *et al.*, 2018).

Sub-theme 1.3: Impact of not sharing information on CYCWs' work

The findings on the lack of information on children's backgrounds and progress impacted on their work. There were many comments hurting children unintentionally, as follows:

I do not know that the child was sexually abused. I will say a word related to the child's case, not to hurt the child. Tomorrow you will be called by the social workers and your supervisor. They will say that a child complained because you talked to him or her in a manner that hurt the child. But at some point, you discover that you are only rectifying a problem, not knowing that you are provoking the child's feelings and past experiences. (G)

As the child and youth care workers, we have to guess; we end up saying she is rude. When we say that, she will become more frustrated, thinking that we are saying she is rude, but she feels 'I [was] raped.' We are just responding to her behaviour; the child expects us to say it's not your fault for what you went through. The child will be more confused because we are sending a conflicting message. (F)

There was an awareness of the complexities created by this lack of information. This was particularly apparent when discussing child welfare in panel meetings. CYCWs had concerns that working closely together where there was no parity of responsibility, for example, could lead to animosity between professionals. Without information, participants mentioned experiencing difficulties in observing children to acquire the necessary information and to develop relevant intervention plans, as is evident from the following comments:

Regarding panel meetings, they will say one child and youth care worker must come for a panel discussion. They will ask questions, what did you observe from the child? Firstly, I did not know the background, so I did not know what to observe. I may say that the child was jumping, not knowing that it was supposed to happen because we do not know the background of the children. (D)

Even if I want to do programmes with them, what programmes suit them because I know they have different problems? I will devise a programme if [I] know these children are having challenges. (D)

Other participants mentioned the challenges when attending to children's medical needs:

You take the child to the clinic; they will ask about the history of the child and you don't know about the history of the child. (B)

It's risky for us, especially if the child has a medical condition. You won't know if the child is sick and the social workers are the ones who know, and they do not tell you. (J)

Participants highlighted that children missed immunisation because CYCWs were not informed.

When I went to the clinic, the nurse asked for a yellow card and they saw that the child missed three immunisations. Those things do not sit well with us child and youth care workers. (B)

Another participant mentioned the difficulties of preparing children for court:

Sometimes when the child [is] supposed to go to court, as the child care worker, I must know that I prepared the child, but I am never informed on time. Maybe I had put the child on the programme, then I was told the child must go to court. They must communicate that on this day the child is going to court, and we prepare the child on time. (L)

Based on the findings, data sharing could improve the effective allocation of childcare programmes for children. They could make appropriate assessments when conducting programmes and carrying out home visits. Sharing complete data about children could also reduce unnecessary referrals to other services. Participants expressed feelings of being demotivated, undervalued, and disempowered because of a lack of information:

It makes us feel disempowered, like people who know nothing. That is how they treat us, that you do not know anything, and you just have to look after children. That is why sometimes we do not want to do programmes because you are treated like that. We just come in, sit, bath the children and put them there. We feel that no one cares for us. (B)

I am working night and day and I am the one who is supposed to answer questions that I do not know, which makes me feel like I do not know my job. (J)

Inadequate information was raised as problematic by every interviewee, specifically because they are required to answer questions while they are not kept informed. CYCWs were restricted in what they knew about children's data, which is considered a barrier to streamlining working practices. At an individual level, there seemed to be widespread concerns about what information could be shared and with whom it could be shared. This concern around confidentiality and data protection is related to a perceived lack of trust between CYCWS and social workers. The lack of coherence about who could access what information was understood to be a potential risk to individuals and could affect caring issues. The fact that CYCWs are carers employed at the CYCC for the day-to-day care of children (Mkhize, Sibiya & Hlengwa, 2022) influences elements of the child protection system. The multiple professional roles to be played within the system include matters of social, health, education and child development. As indicated in previous studies, there is a tension between people-processing (i.e., not to change the behaviour of people directly but to process them and confer a public status on them) and people-changing (refers to the humanistic connotations of enhancing wellbeing), which are part of child welfare systems. The work is monitored and assessed by bureaucratic systems for work completion (Mkhize *et al.*, 2022). Tensions and conflict between these two institutional aims – people-processing and people-changing – have been noted and studied by scholars of bureaucracy, social work and child welfare casework practice (Gibson, Samuels & Pryce, 2018). Although CYCWs complain about a lack of communication with social workers on matters affecting the child, the bottom line could be

that social workers are overwhelmed with paperwork. Gibson *et al.* (2018) warn that too much paperwork can impede caseworkers from developing relationships with youths and their families that are essential to promoting wellbeing. However, paperwork can also be a tool for advocacy, empowerment and relationship-building. Therefore, a balance needs to be found between people-processing and people-changing.

Sub-theme 1.4: Social workers having limited contact with children

The guide for CYCWs indicates that in CYCCs, the social worker is responsible for conducting a comprehensive assessment of the child's placement in the facility (SACSSP, 2020). As a result, CYCWs play a supportive role in the assessment as part of the multidisciplinary team, including nurses, therapists, police, etc. (NDSO, 2012). CYCWs' logging records are a key source of information contributing to this assessment (SACSSP, 2020). Participants experienced social workers' contact with children to be inadequate:

Social workers only see the children once in a while and it is not in alignment with what we ascribed to them according to our assessment. (P)

Social workers only come to see the children if they want to do something with them. I think that is not right. (D)

Social workers only spend a little time with children after school for only 10 minutes. (G)

Participants report that social workers tended to be peripheral in the children's lives. These sentiments are consistent with the view that in many practice settings CYCWs often complain about not being given a voice (Molepo, 2020). Dimba-Ndalen *et al.* (2022) and Mapurazi (2016) identify factors that promote or impede collaboration between social workers and CYCWs. The factors that could facilitate collaboration include understanding other professionals' roles and responsibilities, mutual trust and respect, and viewing collaboration as beneficial to themselves and their clients (Phillips & Walsh, 2019). Similarly, Morrison (2016) postulates that children appreciate it if social workers display consistency, reliability and honesty during communication. Communication skills are fundamental for social work practice (Forrester *et al.*, 2019).

Sub-theme 1.5: Not preparing children for foster care or reunification

Participants felt that children were not adequately prepared for foster care or reunification as all the household chores were done for them:

At times, children are being failed at the institution. They are not prepared that this is a temporary safety and that they will return home one day. (D)

For example, we had a child who had been here since he was a toddler and was reunified last year, and he was over 20 years old because social workers had an excuse that they could not find anyone suitable to look after him. He was placed [with] different foster parents, but he was returned. (B)

The above statements capture the concept of CYCWs as generalists and specialists (Molepo, 2020). Without being able to come up with initiatives of their own, CYCWs can feel demoralised and unproductive. This feeling may result from a top-down approach utilised by management (Agere, 2014).

A key factor is the extent to which CYCWs and social workers prepare children for leaving CYCCs and support them in transitioning to independence or new care centres. Improved child care support might mean putting more time into preparing children for exiting the care and supporting them through the process. One participant noted that foster parents returned a child for failure to do house chores as the child was unprepared.

I remember the other foster parents who were very interested in him, [but then] returned him. The foster parent complained about his attitude and that he was lazy. Because we do everything for them here, the child was surprised when he knew he had to wash and cook for himself. The child was returned three times by different foster parents complaining about one thing that he did not want to do anything and that he had a bad attitude. (B)

Research revealed that children leaving care continued to be less involved in training, education or employment, and were more vulnerable to poor life chances and social exclusion in later life (Allen, 2003). A survey found that over a third of those who left care were not in training, education and employment (OFSTED, 2009). Studies highlighted that human service professional services, including social work for care leavers, were highly variable, with some local authorities providing integrated services across a range of agencies and others offering little in the way of support (Chase, Warwick, Knight & Aggleton, 2008).

Another participant experienced the disengagement between children and staff to be abrupt, as is evident from the following excerpt:

The only problem we encounter is that sometimes we feel so attached to the child and he or she feels attached to us. When it is time for them to go, it becomes so difficult. You feel that the child is going, and they also feel the same, especially if they go to other children's homes. It is better if they go back home. It is bad sometimes because you do not have time to say goodbye to the child you have stayed with for some time. (B)

These concerns are consistent with the literature stressing the importance of reunification programmes for children to prepare them for a new life after a CYCC (Smith & Lidström, 2020). As Balsells *et al.*, (2014) state, the reunification process must be encouraged as recommended by the Child Welfare Information Gateway training programmes designed to empower families. Balsells *et al.* (2014) support reunification programmes, including socio-educational programmes for teaching parenting skills. Moreover, researchers also recommend training that addresses the specific needs relevant to each stage of the reunification process (Balsells *et al.*, 2014). Besides prospective parents receiving training, the children should be active agents in reunification and decision-making (Inchaurrondo, Fuentes-Peláez, Vicente & Bolós, 2018).

Theme 2: Lack of caring and support of CYCWs

These results demonstrated that the CYCWs might lack the psychological, physical and socially supportive work environment to care for the children and youth in CYCCs. Several participants felt that the support they received from their managers was not sufficient as they had to work with the understanding that an integrated approach to service delivery is necessary to meet the prevention, early intervention, and pre-statutory and statutory needs of children and youth. Participants expressed a lack of care and emotional support for CYCWs. They mentioned not being understood when they raise issues affecting their work:

We have been crying about the issue of confidentiality. Sometimes we feel like we are not being heard when we talk. We have been crying and no one is listening to us. (L)

You know we do not get emotional support and I have never received any psychological support from anyone so much that I do not need it now. Even if I have a problem, I do not tell anyone because I feel no one care. Even our seniors [managers] do not care. I had a problem last year; I even told my supervisor. I requested a transfer to Walter Sisulu because it is far from Soweto to this place. People here do not care. I cannot wait to leave this place since I am not coping. (B)

The above statements from participants demonstrate that insufficient attention is devoted to the views and feelings of CYCWs in work settings. For some participants, the loss of emotional support from their work professionals was a source of sadness and anxiety, and it also created difficulties for them in dealing with children with attachment difficulties.

When serious behavioural problems arose, participants complained about being criticised and blamed instead of being given emotional support through debriefing. The following comments illustrate this:

You may find yourself in a situation whereby children get involved in a serious fight and stab each other. You get called for a multidisciplinary meeting. They keep on bombarding you with questions: Where were you? What programmes have you rendered to the child? So, you feel that they want to kill you now for other people's behaviours. It's sad. (F)

We are being criticised here, especially if a negative incident happens to a child. The only question they normally ask is "Where was the child care worker? They do not care about your feelings; emotional support is not happening here. If you do not debrief yourself or go for counselling or find your activities, you are in trouble because no one will help you. (P)

Participants indicated that they were not getting supportive debriefing but rather blamed for issues regarding children.

There are no debriefing sessions. We are just thrown into a corner and asked to deal with issues ourselves. Child care workers are easily blamed when anything goes wrong in the institution. They always asked: Where was the child care worker? Sometimes you have to manage 50 children. How could you supervise 50 children

with two staff members and expect to know where the children are simultaneously?

(O)

Although the working conditions of staff and the child: staff ratio were not raised in the interview schedule, this could be why supervisors criticise the CYCWs. Molepo and Delpont (2015:157) noted that “*job pressure could potentially be reduced by increasing the number of staff to obtain a balanced staff: children ratio is of vital significance and should receive adequate attention.*” The negative feeling of lack of co-worker support is not consistent with Modlin’s (2018) findings that participants cited support from their co-workers as pivotal to their ability to do the job. Participants alluded to not coping with work. This is supported by the literature indicating that the work of a CYCW is physically demanding (Steckley, 2020), including purchasing and preparing food, cleaning and home maintenance, assisting with transport, medical appointments, liaising with government staff and others, assisting children with social interactions as well as school homework, personal tasks such as lifting, carrying, washing, going to the toilet, and feeding (Mkhwanazi *et al.*, 2018). From the storylines, it was clear that the work is also emotionally demanding and CYCWs sometimes struggles with personal problems.

Theme 3: Challenges with shifts and personal problems

A handover is a communicative event of great significance in the duration of care of children and youth work shifts. A serious point was a lack of sufficient attention to the handover process, which created a knowledge deficit. A critical issue identified was the inadequate focus on the handover process, leading to a knowledge gap. This pertained to the CYCWs' handover process of care, revealing a dearth of information regarding the history, conditions, and other essential factors concerning children and youth throughout their shifts. Participants reported that conflicts arose concerning shifts, and some individuals brought their personal problems into the workplace:

The children will notice and know this shift is not agreeing with this shift, then they get in between and manipulate the staff. (M)

People are bringing their personal problems to work. Because you do not like me, you will listen to all the information and that causes a fight. (H)

Participants also reported disagreements about shifts have an impact on their behaviour and emotional wellbeing in CYCCs. Participants mentioned that their colleagues show signs of strain. This corresponds with Modlin’s (2018) observation that the biggest challenge faced by CYCWs is the personal toll on the practitioners. This corroborates sentiments by Varaden (2016), who posits that CYCWs pass through stages of growth, both personally and professionally. Personal problems will likely impact on the work because this profession is driven by the interactional relationships between the CYCW and the child. Successful interventions rarely occur without the input of the dynamics of the CYCW’s unique problem-solving culture. Previous studies have indicated that personal problems could be managed with a health strategy. For instance, Winter *et al.* (2017) reported that social workers gave each other informal support in the form of food sharing, discussion of cases, their relationships with other professionals and their private lives. Every child, youth and family has unique concerns

requiring individual interventions, regardless of the environment as their source of support. Pickrem (2015) explains that individual CYCWs exposed to vivid and traumatic information about clients can develop detrimental changes regarding their professional views of themselves and others, for example, a reduced sense of accomplishment with increased exhaustion and a depersonalising of clients.

Theme 4: Delayed feedback from management

Not only did CYCWs feel undervalued by the lack of feedback from management, they felt neglected. Participants complained that when they make a request or raise a query with their seniors, they do not get feedback in time.

It takes forever to get the things and items you requested. For example, I requested crayons, books and pens for my programme but did not get them. In NGOs, we request something; it's approved then and there. I miss NGOs. (B)

People need to listen to us when we raise our queries, starting from our HOD [head of department], managers and supervisor. Sometimes you feel like giving up because people do not respect your opinions. (L)

Gibson *et al.* (2018:43) echo this experience of participants that children in residential care who have “multiple and complex difficulties [are] laced together in an environment that is ill-equipped to meet their complex developmental needs.” For example, past studies have reported that CYCWs experienced symptoms of compassion fatigue, such as depersonalisation, diminished personal accomplishment and increased emotional exhaustion (Johnco, Salloum, Olson & Edwards, 2014). Management issues mentioned are similar to those reflected in the findings of Johnco *et al.* (2014), who discovered that workers indicated their need to be listened to by management. Workers participating in this study found it satisfying when their work was supported by management. The study by Modlin (2018) found that most participants were satisfied with the acknowledgement they received from management. Therefore, if management acknowledged CYCWs, this would make them feel respected to work with children with attachment difficulties.

Theme 5: Lack of tangible, immediate results

According to participants, children take time to change their behaviour and there are no immediate results:

At times we experience challenges, and other children take time to change and end up being moved from this place. (A)

It is difficult to work with those children because it takes much energy to understand their situation. (B)

The analysis of the findings above has shown that CYCWs experience multiple problems arising from ‘troubled’ children and youths. A lack of tangible results might stem from inconsistent caregiving leading to multiple placement moves, which are likely to harm the quality of children’s attachment (Pasalich *et al.*, 2016). The appropriate knowledge to understand children’s wellbeing and adaptation to care seems to be lacking, but studies of foster

care stability are difficult to compare with residential care and suffer from several methodological problems. However, these prior placement experiences of children may impact negatively on their development. Still, the appropriate types of intervention services may minimise the risk of poor outcomes (Pasalich *et al.*, 2016). The lack of tangible, immediate results may result from children living in a situation referred to as an artificial workspace that robs them of a sense of reality (Chinyenze, 2017). Highly adverse conditions faced by CYCWs may introduce threats to their wellbeing and their environment for caregiving to children with attachment difficulties. Proper child care is important for the development of children and youths. However, in most cases, CYCWs carry a disproportionately high burden of care responsibility. The adverse ratio between CYCWs and children and youth care leads to a weakening of the quality of care in residential settings. Child care remains one of the most difficult and emotionally exhausting careers in the human service professions, because CYCWs are affected by the cultural, social and political context of their employment environment and this has creates numerous professional dilemmas in the field.

DISCUSSION

The current study sought to explore the challenges experienced by child and youth care workers who are working with children with attachment difficulties. This is unique in the rare research in the African and South African context that explores the challenges experienced by child and youth care workers in working with children with attachment difficulties. The qualitative design was used as it helps to highlight the unique features of the South African context and provides rich and in-depth information about the subject of interest.

The findings of this study indicated that most child and youth care workers could not collaborate effectively with social workers. This resulted from poor communication, and a lack of clarity on confidentiality and sharing of children's information. The consequences are that these problems affect child and youth care workers, who lacked information about children, while social workers have only limited contact with children and the consequence is insufficient preparation of children for foster care or reunification. The findings further suggest a subconscious bias of professionals involved in child care, which can trigger behaviours that hinder collaboration and have a destabilising effect (DSD, 2019). Some of the most troubled children and youths resided at the CYCCs. Meanwhile, CYCWs were still fighting to become recognized as an important community workforce (DSD, 2019). Investment in shared learning and training initiatives across all professional fields could improve working relations as people develop a richer understanding of each other's responsibilities and governance ideals and difficulties (Phillips & Walsh, 2019).

The participants indicated that many child and youth care workers do not have a caring and supportive environment. In this environment, child and youth care workers perform their duties in a multidisciplinary team with a lack of significant support.

Past studies have indicated that child care workers had a wide array of health concerns amid the physical and mental demands of their job (Linnan *et al.*, 2020). Child care and youth care workers in South Africa work in demanding and challenging environments that can take a toll on their physical and mental well-being. Similarly, a report by Vaughn *et al.* (2020) suggests

the physical health concerns such as physical exhaustion. The nature of their job, which involves lifting and carrying children, keeping up with active youngsters, and managing the physical needs of the children, can lead to physical exhaustion and fatigue. Second, work-related injuries for instance, handling children with behavioural issues or medical conditions may put the workers at risk of injuries, such as muscle strains, sprains, or bruises. Third, exposure to illnesses working closely with children and youths may expose the workers to various illnesses and infections, especially if the facilities lack proper hygiene measures. Emotional stress in dealing with children and youths who have experienced trauma or have challenging behavioural issues can lead to emotional stress and burnout (Ling, 2018; Otten *et al.*, 2019; Whitaker, Becker, Herman & Gooze, 2013). Compassion fatigue in the sense that constantly being exposed to the emotional needs of the children and youth can lead to compassion fatigue, affecting the workers' ability to provide empathetic care. Vicarious trauma in listening to traumatic stories or witnessing distressing events in the lives of the children can result in vicarious trauma for the workers. High workload such as the demanding nature of the job, coupled with high caseloads and limited resources, can lead to increased stress and anxiety (Maleopo, 2020). Lastly, the occupational health concerns such as irregular work hours -shift work and irregular hours can disrupt the workers' sleep patterns and contribute to sleep-related health issues. Lack of support as some CYCWs may feel unsupported in their roles, leading to feelings of isolation and job dissatisfaction. Professional recognition for instance, the lack of recognition and appreciation for their contributions as essential community workers can affect their morale and motivation.

Another important issue raised by most of the participants in this study was the fighting that occurred relating to shifts and personal problems. This could be because of the inability of some child and youth care workers to separate their personal lives from their professional tasks. This could result in them taking their work problems home, which may influence their family relationships negatively. This issue has also been raised in studies on nurses (Al Zoubi, Saifan, Alrimawi & Aljabery, 2020).

In this study, most participants pointed out that delayed feedback from management was a serious issue. They explained that when they make a request to, or raise a query with, their seniors, they do not get feedback in time. This is concerning, as previous studies indicated that CYCWs had to deal with low pay and demanding working conditions (Krueger, 2007; Linnan *et al.*, 2020).

The lack of tangible and immediate results was a concern among the study participants, especially with regard to children who do change slowly over time. They felt that if they could be given time and use their energy more effectively, they could provide better care than they currently can. These results confirm findings in the study by Linnan *et al.* (2020), which shows the need for motivation among CYCWs as important when dealing with children with attachment difficulties. Nevertheless, this factor was rarely discussed in the literature on the social service sector.

The current study revealed that most of the interviewed child and youth care workers faced challenges in team participation and gaining buy-in. These aspects were considered crucial in caring for children with attachment difficulties, including managing issues like delayed

feedback from management. In other words, the workers found it difficult to effectively collaborate as a team and get the necessary support, which hindered their ability to provide optimal care for children with attachment challenges. These findings were unsurprising, as several studies reported similar results (Abdullaha, Cudjoeb & Manfula, 2018). Several studies (Johnco *et al.*, 2014; Linnan *et al.*, 2020) showed the importance of being heard by management. These authors recommended special support programmes to support child and youth care workers socially and psychologically. The absence of supportive staff and programmes raises the important question of what kind of support is available to child and youth care workers in South Africa when they are facing critical and bad experiences. This view is consistent with the suggestion that the complex, demanding working conditions and the larger social context in which the CYCWs operate (Linnan *et al.*, 2020) are a particularly demanding aspect of residential child care for children and young people (Steckley, 2020) that may influence their wellbeing.

With more support from managers and stakeholders, child and youth care workers may be more ready to carry out their duties. The information in this article should sensitise CYCs managers, supervisors and other human service professionals to some of the issues around CYCWs' welfare. CYCC managers should show greater attunement, open-mindedness and empathy that will set the stage for CYCWs to feel supported and respected enough to render services more effectively to children in pain and dealing with issues of neglect or abuse from their past. Effective managers of CYCCs make no assumptions about their colleagues (i.e., CYCWs) with whom they work with daily. Instead, they initiate open-minded dialogue to understand the practitioners' work concerns when dealing with children. They should make room for stories they do not expect to hear by remaining flexible.

The findings of this study can be fundamental in improving state-owned child care services in CYCCs and in providing CYCWs with resources, as well as to help professionals understand problems with current services. The management provided by centre directors will also affect the quality of practices through the support given to CYCWs to engage in ongoing discussions and reflection on their work with children showing attachment difficulties in everyday life of the CYCCs.

CYCWs need to be recognised as an important component of the care professions by ensuring equal recognition within the social services professions, such as the South African Council for Service Professions (SACSSP) and the National Association of Child Care Workers (Zondeka, 2021). The findings indicate that CYCWs' qualifications may have to be considered as equivalent to those of their counterparts (e.g. social workers). The provision of compatible qualification levels will contribute to the recognition of CYC as a profession. Education, training and development need to be encouraged by providing attractive incentives so that the CYCWs may aim for higher levels of qualifications by the government or DSD. The findings reaffirm the need to improve the training and supervision of CYCWs and highlight the importance of encouraging and facilitating work experience with other human services professionals. Previous studies suggested that child care workers lack a clear identity and recognition (DSD, 2019; Krueger, 2007). Many CYCWs accept or are placed in child care positions for which they may not have been adequately prepared during their early education

or professional training (Hilton, Fawson, Sullivan & Dejong, 2020). Moreover, the increasing casualisation of the child care workforce has severe implications for service delivery, stability of contact with children and delivery of programmes (Molepo & Delpont, 2015).

The process of matching a child's holistic needs with CYCWs could undergo a shift in how it is currently approached. This shift would involve changes in three main stages: recruitment, selection, and additional training of CYCWs. (Swanzen & Jadrijevic, 2014). The way in which CYCWs are identified and assigned to work with specific children may be reevaluated and modified. This could include refining the criteria used during recruitment and selection to ensure that the CYCWs' skills, expertise, and characteristics aligned more effectively with the specific needs of the children they will be caring for. Additionally, the training provided to CYCWs might be adjusted or expanded to equip them better in addressing the holistic needs of the children they serve. The goal of this potential shift is to enhance the matching process, resulting in more effective care for children by ensuring that CYCWs are better suited to meet their diverse needs and provide more tailored support and assistance. Molepo (2020) lamented the challenge in the practical professionalisation of the field as it had not reached acceptable levels. The researcher expressed deep regret or disappointment regarding the difficulty in achieving practical professionalization in a CYCW field. Maleopo (2020) believes that the efforts to professionalize the field had not yet achieved the desired or acceptable levels. In other words, despite the attempts made to improve the field's professionalism, it still falls short of the expected standards or the level of professionalism that is considered satisfactory or sufficient. Furthermore, Lodge (2019) raised the proposition that the CYC profession must still get recognition as a full profession by employers.

RECOMMENDATIONS

Supervisors and managers of CYCWs should challenge the deep-seated assumptions that undermine CYCWs. The results suggest that the professional preferences, affinities and abilities of CYCWs should be recognised and valued to create an attachment-responsive context for children in CYCCs. Social workers should open conversation space with their counterparts through improved communication, regular meetings and case discussions. It will be helpful to train all social workers on the role and skills of CYCWs to understand the unique contribution of CYCWs. CYCWs should identify themselves correctly.

We recommend greater dialogue between management and social workers to advance shared learning, particularly across the human service professions that deal with children with attachment difficulties. There should be a clear role differentiation between CYCWs and social workers. CYCWs' and social workers' professional roles should be revisited and the DSD and National Association of Child Care Workers (NACCW) should set clear guidelines for collaboration.

Although this study is believed to provide meaningful theoretical and practical contributions, there is much space for future investigations. First, this study focused on the overall perceptions of CYCWs without considering the experience and qualifications of informants. A fruitful avenue of research would be to seek the points of view of children and senior CYCWs, not only about challenges when handling attachment difficulties, but how they think these

challenges could be solved. Future research may explore this topic from a different perspective by focusing on children or other professionals, such as social workers, through focus group responses to specific attachment difficulties with the help of experimental studies. This line of research may take different approaches and different informants into consideration. Other attachment difficulty types could be specified and the way they are dealt with in CYCCs could be explored.

CONCLUSION

This study examined the challenges experienced by CYCWs in working with children with attachment difficulties. By adopting a qualitative method, 16 semi-structured interviews were conducted with CYCWs working in CYCCs. The findings shed light on the organisational challenges, including poor communication, unsupportive management, issues with shifts, tensions with social workers' limited preparedness for foster or reunification plans, and delayed management feedback. Child and youth care workers are responsible for engaging a multidisciplinary team responsible for day-to-day direct care and support of individual children in the CYCCs. They also have a core logging responsibility, that is, making a note of an event, a contact, or an incident involving any key person involved in their work (child, colleagues, parent, another professional). It implies that the role of CYCWs in CYCCs goes beyond standard care and supervision and may include various specialized tasks to address the unique challenges and requirements of the children and youth under their care. These specialised responsibilities might involve addressing emotional and behavioural needs, facilitating educational support, providing counselling, and promoting the overall well-being and development of the children and youth in the CYCCs.

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