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Walden University

College of Social and Behavioral Sciences

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Tania Y. Appling

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Walden University
2018

Abstract

Juvenile Correctional Officers' Experience Using De-escalation Strategies

by

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MED, State University of West Georgia 1999

MPA, State University of West Georgia, 1992

BA, West Georgia College, 1990

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

General Educational Psychology

Walden University

November 2018

Abstract

Juvenile direct-care officers working in juvenile correctional facilities historically responded to critical and potentially aggressive incidents using nontherapeutic strategies. The purpose of this study was to examine and to understand the lived experiences of direct-care officers' use of de-escalation skills for managing violent and disruptive behaviors in juvenile correctional facilities. The findings from this study may add to the existing literature by describing juvenile correctional officers' experiences as well as to better understand their perceptions and attitude using de-escalation strategies in correctional environments. The social learning and self-efficacy theories provided the conceptual framework to examine and understand their experiences. The phenomenological design was used to examine the lived experiences of 9 juvenile direct-care officers use of de-escalation strategies to respond to disruptive and aggressive incidents within the juvenile correctional facility. The 9 direct-care officers participated in audio-recorded interviews that were transcribed and analyzed using Moustakas's phenomenological steps that identified 3 themes using de-escalation strategies: to avoid use of force and reduce liability of injuries; to resolve conflicts using their words to de-escalate the youth or the situation; and to use according to their training, perceived level of confidence, and effectiveness of de-escalation strategies. Understanding direct-care officers' perceptions of use of de-escalation may result in positive social change for fostering caring and safe living correctional environments and strengthen current training curriculums for working with aggressive and disruptive behaviors.

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Dedication

This dissertation is dedicated to Grandmothers Daisy and Everies for believing I could achieve the impossible and to my Grandfathers Charlie and Charles Douglas for always reminding me that I could Be what I wanted if I worked hard enough and stayed true to myself.

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I am grateful and thankful to God for life and the ability to achieve the Possible.

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Chapter 1: Introduction to the Study

In 2014, approximately 1 million youth under the age of 18 were arrested by law enforcement agents in the United States (Office of Juvenile Justice and Delinquency Prevention OJJDP, 2015). Depending on the severity of the crime, the youth may be remanded to the detention center or placed on supervised probation within the county of their resident. Offenses such as rape, murder, or robbery often result in an adjudicatory order to serve 18 to 60 months in a youth development center (GA DJJ, 2014). Assaultive and disruptive behaviors of some youth in correctional environments may foster the creation and prevalence of the perception that cultures within correctional facilities are unsecured and unsafe (OJJDP, 2012). Intervention strategies such as the use of excessive physical restraints used to control youth during assaultive and disruptive situations have resulted in constitutional violations of rights of youth detained in correctional facilities (ODJJDP, 2012; Rosenbloom, 2010).

Several states were found to be in violation of the constitutional rights of youth housed in various correctional facilities (Rosenbloom, 2010). The violations under the Civil Rights of Institutionalized Persons Act of 1997 (CRIPA) for the Georgia's Department of Juvenile Justice (DJJ) agency included lack of education courses, mental health, and medical services; due process rights involving rule violations and disciplinary actions; and violation of protection from harm (Justice.gov, 2014). The protection from harm violations under the Fourteenth Amendment of United States Constitution asserts that youth have the right to live in "reasonably safe living conditions and be protected

from abuse” (Justice.gov, 2014, Section 2). Because of the violations, GA DJJ’s Executive Staff implemented therapeutic interventions strategies for line staff to maintain control and to prevent assaultive behaviors among incarcerated youth (Rosenbloom, 2010). With the implementation of new therapeutic strategies, juvenile correctional staff learned to use therapeutic strategies when intervening in assaultive and violent situations.

Rembert and Henderson (2014) discussed that correctional officers encounter aggressive and violent situations where they have seconds to make decisions on the method used for interventions. Juvenile Correctional Officers (JCO) used the least amount of force deemed necessary based on their perception of and their ability to regain control of the situation. Officers relied on a continuum of techniques to assist them with controlling situations (Payne, 2015; Rembert & Henderson, 2014). Within the continuum, officers learned to use de-escalation strategies as the least restrictive amount of force needed to maintain safe and nonviolent living environments.

Correctional officers used de-escalations strategies as means to redirect violent and disruptive behaviors within detention facilities. These strategies assisted officers when working with youth in crisis (Price & Baker, 2012; Rembert & Henderson, 2014). Even though officers use de-escalation strategies to work with individuals in crisis, Rembert and Henderson (2014) suggested correctional officers need to increase use de-escalation strategies to replace more aggressive forms of use of force techniques when handling aggressive and disruptive behaviors. Payne (2015) suggested that officers hesitate and often do not feel confident in their capabilities and confidence to use de-escalation strategies when responding to critical situations. This hesitation may have

occurred because officers do not understand and/or misread the youth's behavioral and emotional cues (Payne 2015).

Davidson (2016) determined correctional officers' use of de-escalation strategies occurs when they feel confident the strategies work in minimizing potentially aggressive situations. Davidson and Payne (2015) indicated that officers use de-escalation strategies to assist with managing crisis situations; yet, these results do not discuss how officers experienced using de-escalation strategies. Payne suggested more research is needed to examine officers' views towards the use of de-escalation strategies as means to reduce violent situations. Davidson also suggested when officers feel confident they use de-escalation strategies; yet, Davidson's findings do not speak to the officers' perceptions or experiences with using de-escalation strategies. Understanding and reading the emotional cues assisted law enforcement officers to make better-informed decisions regarding the use of crisis intervention skills when working with potentially violent and disruptive individuals (Tully & Smith 2015). Tully and Smith suggested correctly reading the emotional and behavioral cues of mental health youth and other individual's increases appropriate officer to client interactions as well as increases public safety. With these findings from Tully and Smith's research, the authors asserted research is needed to gain an understanding of officer's experiences when using crisis intervention strategies with youth with mental health illness. Understanding officers' experiences and perceptions may assist in determining when and why officers feel confident to use de-escalation strategies. Medical and mental health nurses used a variety of therapeutic strategies when working with their clients in residential settings. One set of strategies used is de-

escalation techniques when responding and providing care for clients. Knowles, Townsend, and Ander (2012) and Price and Baker (2012) examined the use of de-escalation strategies by nurses in the mental health settings. The findings from these interviews indicated how nurses experienced the use de-escalations strategies and how they viewed the use of de-escalation as an effective method for deterring and intervening in crisis situations with clients in mental health settings (Ferrell, Young, & Taxman, 2011; Price & Baker, 2012). In Price and Baker 's study, nurses experienced the uses of de-escalation strategies as helpful and useful when responding to assaultive patients. Knowles et al. also conducted a study with forensic nurses on the phenomenon of providing care using de-escalation strategies in correctional settings. The findings from this study included that nurses often use de-escalation strategies when providing care to their patients in residential settings; and that, nurses perceived using de-escalation strategies as a significant role in providing adequate care to their patients (Knowles et al., 2012).

Brubaker (2015) concluded from his study, nurses and security staff are better able to provide effective care when they feel confident in their capability to use verbal de-escalation strategies when used in combination with physical techniques. Based on these findings, I was motivated to understand the experiences of correctional officers' use de-escalation strategies in juvenile correctional facilities. I wanted to gain insight from the participants' interpretations about their perceptions and experiences of using de-escalation strategies. The focus of this study was to examine the experiences of officers

employing mandated de-escalation strategies in juvenile residential correctional facilities.

In Chapter 1, I introduced the study and examined Georgia's juvenile justice therapeutic strategies. Relevant sections outlined in this chapter included a brief review of the literature as background for the study, the problem statement, and purpose of the study. The research question, the theoretical framework, the nature of the study, assumptions, limitations, scope and delimitations are also presented in this chapter. The potential social changes from this study in juvenile justice agencies are to have a better understanding of how policies and training affect correctional facilities' cultures.

Background of the Study

The 2011 Uniform Crime Report (2013) indicated the national arrest rates for violent crimes increased by 73% for youth between the ages of 15-17 from 1980 to 1994. Juvenile arrest rates increased from 300,000 to approximately 600,000 arrests (a 50% increase) for violent crimes in the United States (OJJDP, 2013). In Georgia, from 1980-1994, about 173, 000 youth between the ages of 10-17 were arrested for a violent crime (OJJDP, 2013). The violent crimes represented in this report are murder, manslaughter without negligence forcible rape, robbery, and aggravated assault (OJJDP, 2013).

Rosenbloom (2010) suggested the spike in Georgia's juvenile crime rate in the mid-1990s is the result of the juvenile code rewrite to reflect stricter adjudicated sentences. The juvenile code rewrite in the 1990's for Georgia included charging youth 13 years and older who commit the violent crimes such as murder, forcible rape, manslaughter, child molestation, or aggregated child molestation as adults in Superior

Court (Hagues et al., 2009). The stricter juvenile codes eventually led to an increase in arrest and remanding of youth to correctional facilities to serve tougher sentences (Caeti et al. 2000; Hagues et al., 2009). Because of the increase of youth remanded to correctional facilities and the youth's aggressive and violent behaviors/incidents within facilities, agency leaders devised and implemented stricter disciplinary processes to combat the aggressive and violent behaviors (Rosenbloom, 2010). Before the 1990s code rewrite (Rosenbloom, 2010), the laws did not address how to handle violent crimes.

In 1906, the Georgia legislature created the children's court to protect and rehabilitate youth (Carl A. Vinson Institute, 2004). In 1911, Georgia established the first juvenile court and in 1972, passed the first juvenile codes (Carl A. Vinson Institute, 2004). The goal of the laws was to assist juvenile judges in determining what was in the best interest of the youth who committed crimes (Carl A. Vinson Institute, 2004). During mid-1990s, several Juvenile Justice Agencies, including Georgia, adopted the paramilitary adult correctional models of discipline to assist correctional line staff in holding youth accountable for their behaviors (Caeti et. al, 2000; Davidson-Arad, Benbenishty, & Golan, 2009; Hagues et al, 2009; Rosenbloom, 2010). The implementation of stricter laws and paramilitary models of discipline seemed necessary to prevent violent juvenile behaviors in the community and facilities. The aggressive and disruptive behavior amongst youth remanded to the facilities manifested in increased fights between youth, youth and staff, and increased major group disturbances (Davidson-Arad et.al, 2009). The aggressive and disruptive behaviors resulted in an increase of assaultive incidents in the facilities often creating an unsafe correctional

environment. The implementation of paramilitary style discipline and policy procedures restricted youths' movements, access to the facility educational and rehabilitative programs, and increased room confinement (Rosenbloom, 2010). However, these types of punitive measures were the leading factors behind the creation and promotion of an unsafe and no rehabilitative culture in correctional facilities (Caeti et al., 2003; Rosenbloom, 2010). Staff's enforcement of the paramilitary policy and procedures were thought to lead to youth acting-out behaviors (fights and major disturbances) which created the sense of an unsecured correctional environment (Caeti et al., 2003; Rosenbloom, 2010). Caeti et al. and Rosenbloom suggested the increase of youth acting-out behaviors led to strict and over-enforcement of policies. This strict enforcement of policies also led to staff violating youth's constitutional rights.

The United States Department of Justice (US DOJ) cited several state agencies, including Georgia, for Constitutional violations of core youth rights (Department of Justice, 1998). GA DJJ entered into a Memorandum of Agreement with the US Department of Justice to correct the constitutional violations. One agreement is the reduction in punitive measures and the implementation of therapeutic measures (Department of Justice, 1998). State agencies, such as GA DJJ, developed policies, procedures, and training plans to assist staff with creating therapeutic safe and secure facility cultures (Inderbitzin, 2007). However, changing and transforming punitive cultures to therapeutic required immense efforts by the correctional facility staff.

Correctional staff must be able to apply therapeutic strategies to intervene in disruptive and aggressive incidents. The consistent use of therapeutic strategies by staff

should assist in transforming the violent culture into a safer and secure culture. The use of therapeutic strategies will decrease violent situations and increase safety within the correctional facilities (Farrell, Young, & Taxman 2011; Inderbitzin, 2007). Law enforcement officers use the de-escalation strategies to intervene and redirect violent, aggressive behavior of inmates or mental health individuals (Brubaker, 2015; Davidson, 2014; & Oliva, Morgan, & Compton, 2010). Law enforcement basic training programs incorporate crisis de-escalation strategies as means to assist officers when responding to emergency situations involving individuals with mental health disorders (Douglas & Lurigio, 2015; Oliva et.al, 2010; Payne, 2015). These studies provided information pertaining to law enforcement and correctional officers' perceptions of the use of de-escalation; yet, the researchers did not examine the officers' lived experiences implementing de-escalation strategies. Weiskopf (2005) interviewed nurses regarding their experiences of caring for inmates within residential settings. Nurses discussed their experiences with using de-escalation strategies in providing care and responding to patients in residential settings (Knowles et al., 2012; Price & Baker, 2012). Even though these authors suggested additional studies with other professionals were needed to determine the actual effectiveness of de-escalation skills in such situations, limited studies exist where juvenile justice officers share their views and experiences of employing de-escalation strategies during altercations between juvenile residents.

The direct-care officers (also known as juvenile correctional officers) in juvenile correctional facilities are responsible for ensuring the youths' well-being by providing safe living environments. It is important to understand direct-care officers' experiences

using various means of discipline in the institutions. Understanding the views of officers will assist with determining how well de-escalation strategies work to create safer living environments. The views from direct-care staff will also help facility leadership with working through their team's concerns as well as allow the staff an avenue for expressing their ideas. The results of the study can provide juvenile justice executive leadership with the insight into staff's experiences of use of de-escalation strategies to redirect and possibly avert assaultive incidents. The insights gained from this study will provide agency leadership with opportunities to include staff's ideas in policy development. The findings from this study may provide agency executives with information to develop officer training programs as well as to devise support and mentoring systems for officers within the correctional community.

Problem Statement

As a result of the increase in the number of youth remanded to correctional facilities and the youth's aggressive and violent behaviors/incidents within facilities, agency leaders devised and implemented stricter disciplinary processes to combat the aggressive and violent behaviors (Rosenbloom, 2010). These processes included training juvenile corrections officers in de-escalation techniques but did not include examining the officers lived experiences of using these techniques. A gap in the literature existed as it relates to the lived experiences of the juvenile correctional officers using de-escalation strategies. Often, officers are the first to respond to youth on youth or youth on staff assaults using de-escalation strategies which are the first stage in the Use of Force

Continuum. Officers rely on the Use of Force Continuum to determine the level of force needed to ensure the safety of officers and youth in correctional settings.

The Use of Force continuum provides the level of control measures to use to control behaviors of individuals from the least restrictive alternative to deadly force (GA DJJ, 2015). The least restrictive measure of intervention is the use of staff presence and verbal communication (GA DJJ, 2015). The use of de-escalation strategies is a major component of the oral communication level and is the least restrictive measure staff can utilize to control a potentially violent and disruptive incident. Even though research findings indicated de-escalation strategies used by medical and mental health nurses assist with providing care and therapeutic interventions, current research studies do not examine how juvenile facility officers experience using de-escalation strategies (Davidson, 2014; Payne, 2015; Weiskopf, 2005).

Medical and mental health professionals use therapeutic interventions when working with clients. Current studies about the use of de-escalation strategies with disruptive individuals are found mainly in the medical and counseling fields (Gerrish & Lacy, 2006; Price & Baker, 2012; Robertson & Thurs, 2011). These studies provided insight from nurses, counselors, and mental health professionals regarding their perceptions of the use of de-escalation strategies with disruptive and violent individuals (Gerrish & Lacy, 2006; Price & Baker, 2012; Robertson & Thurs, 2011). Jolivette and Nelson (2010) suggested the use of therapeutic interventions possess the potential to trigger a decrease in deviant behaviors. De-escalation strategies may be one such strategy for creating therapeutic environments in juvenile correctional facilities.

Rosenbloom (2010) indicated the importance of ensuring that correctional line staff can implement policies and procedures in a therapeutic manner instead punitive way. The results from this study helped to fill the gap in the literature as it relates to how direct-care staff experience the use of de-escalation strategies to reduce aggressive and disruptive incidents. Participant responses from the study may also assist in creating effective training programs and services for new and seasoned correctional staff. Juvenile justice agents may use the results from this study to reinforce the importance of using therapeutic measures in the day-to-day operations of correctional living facilities. The findings from this study supports the GADJJ mission for protecting the citizens and rehabilitating juveniles within the appropriate settings to become law-abiding and productive citizens (GA DJJ Mission statement, 2015).

Purpose of the Study

I examined the lived experiences of direct-care officers' use of de-escalation strategies for managing violent and disruptive behaviors in juvenile correctional facilities. A phenomenological study explores the meaning of an experience for the persons who encountered the experience (Moustakas, 1994). I primarily explored the lived experiences of officer's use of de-escalation strategies with young offenders to assist in creating safe and secure therapeutic living environments. Creating the therapeutic culture at juvenile facilities may be of pivotal importance for the reduction in aggressive and violent incidents that occur within facilities. An important factor was to understand whether officers perceived the use of de-escalation strategies as a therapeutic method to develop safer cultures within juvenile correctional facilities. To receive a deeper understanding of

the heart of the phenomenon, I examined the lived experiences of juvenile correctional officers' use de-escalation strategies when dealing with disruptive juveniles in a correctional facility in Georgia.

Research Question

How do juvenile correctional officers perceive and describe their experience using de-escalation strategies in resolving critical incidents among juveniles remanded to correctional facilities?

Conceptual Foundation

The social learning theory (SLT) principles of Bandura are the theoretical basis for this study. Alpay (2003) Boyce, (2011), Deeming and Johnson, (2009) indicated people learn new information by assimilating experiences and through rigorous observation of the people in their environment. The learned experiences and accurate observations coupled with personal attitudes and self-esteem determine how people interact socially with others in their environment (Farrell et.al, 2011). During basic and annual training, officers learned de-escalation strategies to use when encountering violent and aggressive behaviors in a critical situation in correctional settings.

Officers are expected to use these strategies as the least restrictive measure to ensure the safety of youth and staff. The more officers rely on these strategies to interact with youth to redirect and de-escalation situation, the more likely they will use these strategies in all situations. For example, if a staff member consistently observes other staff members successfully using de-escalation strategies to reduce or redirect potentially violent situations, then they may be likely to assimilate the behavior/skill and to use the

same behavior/skill-set in similar circumstances. The SLT precepts suggest that as officers assimilate the strategies into their skill-set as well as observe others use the strategies, then officers will form their ideas and attitudes toward the use of de-escalation strategies when responding to critical situations. The assimilation and application of therapeutic behavior into the staff's skill set was not only relevant to the study but was also the basis for the understanding how staff perceived the strategy as a method for creating safer environments.

The conceptual framework of self-efficacy was beneficial to determine if the officers believed the use of therapeutic interventions increased their ability to create less punitive and increase safer correctional living environments (Davidson-Arad et. al., 2009; Margolis & McCabe, 2006; McGarvey, 2005). Officers' self-efficacy in using the skill-set to prevent and deter delinquent behavior was essential to building strong relationships with youth (Marsh et al., 2010). Self-efficacy in the utilization of the strategies may increase when correctional staff intervenes appropriately and accurately to juvenile offenders openly displaying disruptive behavior and aggression. The more staff use these strategies, the more competent and better able they are to handle critical situations. The focus of this study was to understand staff's experiences of using de-escalation and the self-efficacy theory was one foundation for understanding this concept.

The de-escalation model of intervention assisted to frame the study by providing the necessary skills and by describing the strategies used by officers to help with minimizing and redirecting potentially violent and aggressive behaviors from persons they encounter during their day-to-day activities. The model is a series of lessons taught

to law enforcement officers to increase their knowledge on mental health disorders, identify triggers and symptoms of mental illness as well as to provide a guideline for effectively communicating with individuals who may be in crisis (National Institute of Corrections, NIC, 2010). Law enforcement agencies implemented de-escalation models and interventions as a response to the increase in mental health crisis situations (Davidson, 2016).

In Memphis, TN, in 1988, after a police officer shooting by an individual with mental health illness, the police department implemented the de-escalation crisis training module (Davidson, 2016; Douglas & Lurigio, 2015). The two-pronged model focused on 40-hour specialized training curriculum, and criminal justice and mental health system partnership to assist law enforcement officials in responding to mental health crisis (Davidson, 2016; Oliva et.al, 2010). De-escalation strategies focused on resolving aggressive or violent conflicts in non-violent ways using effective communication, attending and empathic skills (Boyd, 2008; Davidson, 2016; JKM, 2010). The premise for using nonviolent strategies in these type situations is to avoid escalating the violent behaviors (Boyd, 2008; Olivia et.al, 2010; Tully & Smith, 2015) and to hopefully use the least restrictive method of controlling the situation (JKM, 2010).

De-Escalation Strategies to Resolve Conflicts

The famous crisis intervention team model developed in 1988 is used in many law enforcement agencies provide officers with conflict resolution strategies. The crisis intervention team model includes topics of mental health illness, substance abuse disorders, psychiatric treatment, patient rights, and laws (Davidson, 2016; NIC, 2010;

Olivia et.al, 2015; Tully & Smith 2015). The officers learn the principles of de-escalation which are assessing the situation, calming the individual, determining the individual's needs and resources as well as facilitating a positive outcome (NIC, 2010). Information gleaned from the principles of de-escalation helps the officers to determine when to use de-escalation as well as what types of words calm the individual (NIC, 2010). Davidson (2016) and Tully and Smith (2015) suggested that a significant component of applying the de-escalation strategies is to use the strategies to redirect disruptive and agitated offender's behaviors. Officer's correct assessment of the situation and use of the appropriate strategies assist with keeping officers and others safe.

De-Escalation Strategies of Effective Communication

Effective communication is one component of de-escalation strategies. Active listening, nonverbal, and verbal techniques are three skill taught to officers to assist with calming individuals (NIC, 2010). Actively listening to the individual, increasing space for the individuals, and offering the individual time to think about their choices to make sound decisions are techniques used by correctional staff to improve safety within residential environments (Boyd, 2008; JKM, 2010; Price & Baker 2012). When officers use nonverbal techniques of maintaining eye contact, utilizing head nods and use of nonthreatening posture, they are creating a calming and nonthreatening atmosphere in hopes the offender will feel safe, regain and/or maintain sense of calmness (JKM, 2010; NIC,2010; Payne, 2015; Price & Baker, 2012). In addition to use of nonverbal techniques, officers who communicate in a clear, concise, and directive tone provide and assist with maintaining a calm environment as well as increases the opportunity to gather

as much information from the offender to effectively problem solve (NIC, 2010; Olivia et.al, 2015). These strategies are key factors when implementing de-escalation strategies.

Staff use de-escalation strategies to resolve conflicts and reduce aggressive situations. Historically, de-escalation strategies are used in crisis situations as an intervention technique in forensic and medical environments (Boyd 2008). The focus of this study was to explore the experiences of juvenile corrections direct-care staff that use various non-violent strategies to assist youth with redirecting potentially violent and aggressive behavior. The SLT, self-efficacy theory and the de-escalation intervention strategies were explored in this study. These concepts assisted in understanding the officers' use and perceptions of de-escalation strategies to reduce violent and disruptive incidents and create safer living environments.

Nature of the Study

A phenomenological design was used to examine the correctional line officers' experiences using de-escalation strategies in juvenile correctional facilities. The phenomenological model focused on the perceptions and attitudes of an individual about his or her experience of a phenomenon (Gee & Loewenthal 2013; Moustakas, 1994; Plunkett, Leipert, & Ray., 2012). This approach provided the insight from direct-care officers' experiences pertaining to the use of de-escalation strategies to decrease disruptive behaviors and increase safe correctional environments. Through the interview process, I gained an understanding of what officer's experience when using de-escalation strategies in juvenile correctional facilities.

For this study, a nonrandom sampling purposive method was used to recruit participants. Purposive sampling strategy is the intentional recruiting of participants who meet the specific criteria, provides in-depth information and insight about the phenomenon (Emmel, 2013; Merriam, 2009; Morse, 2004). In this study, I recruited 20 protentional participants and nine correctional officers from a juvenile correctional facility within the state of Georgia participated in the study. Using individual interviews, the participants had an opportunity to share their experiences using de-escalation strategies. Moustakas (1994) proposed a four-step method for data analyzation: horizontalizing, meaning list development, common clusters of information, and description of text. The first step is to transcribe the information and begin by giving each statement equal value (Moustakas, 1994). The second and third steps are to review the statements, assign meanings to the statements and place in categories according to themes (Moustakas, 1994). The last step is to create the narrative of and to describe the statements regarding the phenomenon. The four-step process, as described by Moustakas, is the basis of phenomenological analysis.

Definitions

Behavior of Concerns: Behavior of Concern is the identified disruptive, violent and/or aggressive acts that violate facility rules and procedures (JKM, 2010).

Civil Rights of Institutionalized Persons Act (CRIPA): This act allows the Department of Justice to file law suits against State and Local governments for violating the rights of individuals remanded to the publically operated correctional facilities (Department of Justice, 2015)

De-escalation skills: A de-escalation skill is the process of calming and reducing agitation and anxiety (JKM, 2010; Price & Baker 2012).

Goals orientation: This is the time spent achieving the desired task (Martin, 2004).

Least restrictive alternative: The intervention continuum moving from least restriction to more/most restriction. The least restrictive alternative includes non-physical interventions (JKM, 2010).

Physical intervention techniques: An application of physical force by one or more individuals that reduce or restricts the ability to move his or her arms, legs, or head freely (JKM, 2010).

Protection from harm: Refers to how DJJ will house the youth in reasonably safe living conditions and protect the youth from abuse (Department of Justice, 2014a).

Safe crisis management (SCM): A set of strategies comprising de-escalations skills and systems that focus on predominantly three areas: they are programs, relationship building and physical intervention skills, in order to create therapeutic culture (JKM, 2010).

Self-efficacy: Self-efficacy is the ability to believe a person can succeed (Martin 2004, Price & Baker, 2012).

Staff competency: The staff recognizes each juveniles' behavior of concerns and demonstrates the ability to build positive rapport with juveniles and convicts, ability to understand how mental health and medical concerns impact behaviors of concern posed by detained juveniles, and use of appropriate de-escalation skills for the positive

treatment of juveniles detained at the juvenile correctional facilities (Dempsey, 2007; McGarvey, 2005; Minor, et. al, 2011).

Social learning theory: The ability to assimilate different experiences and adopt or modify behavior through learning from ones' environment; hence it is also called as learned behavior (Alpay, 2003; Marsh et al. 2010). The SLT emphasizes that the behavioral change occurs because of rewards and costs that are primarily induced through the surroundings an individual is exposed to (Delfabbro, Howells, & Watt, 2004).

Use of force: Physical force used to compel an individual to take action against his/her will or to prevent a subject from taking action that would be damaging to him/her, other persons, or property directed toward another. This may involve the direct laying on of hands or putting of an object into motion that touches the individual; therefore, oleoresin capsicum (OC Spray) Pepperball system, ASP Baton, and the use of firearms (DJJ Policy 8.30 Use of Force, 2015).

Use of force continuum: A graduated system of control measures to be employed by staff as a guide for maintaining positive control of an individual enforcing lawful directives and protecting self or others from injury. The continuum defines the levels of resistance and the levels of controls that are available to control behaviors of individuals (DJJ Policy, 8.30 Use of Force, 2015).

Assumptions

The basic assumption in qualitative studies was the belief that participant's viewpoints are accurate and value to the exploration of the phenomenon of interest (Denzin & Lincoln, 2005). In this study, the basic assumptions were the participants were

willingly provided information as well as the participants would provide meaningful and accurate accounts of their experiences. I remained aware of her role while engaging with participants. The study has three assumptions in mind. The first assumption was that direct-care officers' staff are the best source of information regarding the use of de-escalation strategies in reducing violent and aggressive behavior among incarcerated youth. The second assumption was those de-escalation strategies are used mostly by correctional direct-care officers to deter violent and aggressive situations. The third assumption was that correctional direct-care officers will clearly and accurately describe experiences using de-escalation strategies to reduce the violent and aggressive behavior.

Scope and Delimitations

I explored the experiences of correctional officers using de-escalation strategies as a method to create safe living environments in correctional facilities. The focus was to gain an understanding of the lived experiences of correctional officers. I recruited nine direct-care officers to participate in the study. The participants were correctional direct-care officers who work in a Georgia correctional facility. The correctional officers' position was chosen as the participants because these individuals are often the first responders to critical incidents and are the primary care supervisors for the remanded youth. The participants completed basic juvenile correctional officer training, worked for at least a year in correctional facility, and used the de-escalation strategies in critical incidents in a juvenile correctional facility. Correctional officers who have not completed basic training and/or worked for less than a year would not have received the proper training or may not have been involved in incidents to use de-escalation strategies. These

officers did not meet the criteria to participate in the study. In keeping with exploring the lived experiences of juvenile direct-care officers using therapeutic measures to create safer environments, I chose not to review concepts related to seclusion and room confinement of youth or use of force to resolve conflicts with youth. These concepts historically are punitive in nature (Nelson et. al., 2010; Price & Baker, 2012). Even though these concepts provided historical foundation for resolving conflicts used by correctional officers, medical and mental health staff in adult corrections and residential settings, little is known about the lived experiences of direct-care officers' using de-escalation strategies to resolve similar conflicts in juvenile facilities. My interest was with juvenile correctional direct-care staff's experiences with using the strategies.

This study's purpose was to examine and to understand the lived experiences of direct-care officers' use of de-escalation strategies for managing violent and disruptive behaviors in juvenile correctional facilities. The concepts of assimilation of skills and self-efficacy were the basis for this study. These concepts provided a framework for how officers learn, assimilate, and build confidence when using de-escalation strategies. This study focused on the rich descriptions of the officers lived experiences. I chose a qualitative design to explore correctional officers' experience the phenomenon of use of de-escalation strategies. The phenomenological design was chosen to explore the experiences of correctional officers using de-escalation strategies as an effective method when responding to aggressive and disruptive behaviors or incidents in juvenile correctional facilities.

As indicated in the background information, juvenile justice agencies were cited for extensive use of punitive measures to address aggressive youth behaviors. Therefore, juvenile justice agencies, like Georgia DJJ, implemented the least restrictive and therapeutic measures to resolve conflicts. Correctional officers often use de-escalation strategies to redirect and defuse violent situations just as medical and mental health nurses use de-escalation strategies to provide care and respond to their patients.

Each state legislature devises codes and regulations for the governance of juvenile delinquents and operations of juvenile facilities within their jurisdiction. These state's different laws and regulations create the operating protocols, standards of ethics, and the types of programs for correctional facilities. The correctional staff in Georgia work with a set of de-escalation strategies for the juvenile correctional facility. The type of verbal de-escalation, physical intervention, and communication training correctional staff receive during and beyond the Basic Juvenile Correctional Officer training may be different in other juvenile justice systems. This training may decrease the possibility for the research findings to be replicated in other states or private facilities. The analysis of the correctional direct-care officers' experiences of de-escalation strategies in Georgia may be different than those of other facility staff within the same state, other federal, state or private facilities. These differences may impede a researcher's ability to replicate the study findings.

Limitations

The current trend in juvenile justice correctional facilities is the use of de-escalation strategies to handle the crisis or violent situations. A review of the literature suggested that juveniles who have a desire to change their behaviors are most likely to change as the result of competent staff interventions and interactions (Davidson-Arad et.al, 2009; Margolis & McCabe, 2006; McGarvey, 2005). The interview format was used to ascertain the officer's experiences and beliefs regarding the use of de-escalation strategies to reduce youth's disruptive behaviors within the juvenile facility environment. Although, I relied on self-report from the participants, the officers appeared to answer the questions openly, honestly and sincerely. Yet, it is possible the officers may have tried to present themselves in a favorable light. (Dewangan & Roy, 2012; Van de Mortel, 2008). To avoid possible misinterpretation of the information provided by the participants, I provided each participant with a copy of their interview transcript and themes.

Significance of the Study

Significance to Theory

This study added to the body of knowledge the lived experiences of juvenile correctional officers in the juvenile justice corrections. The GA DJJ executive managers oversee the daily operations of 21 juvenile correctional facilities. In these facilities, direct care correctional officers provide supervision to remanded youth. Apart of this supervision is to maintain control and to provide a safe living environment. The effective use of de-escalation strategies increases correctional officers' abilities to redirect aggressive and disruptive incidents. Marsh et al. (2010) posited the person's belief in his or her capability to complete a task has a significant impact on his or her ability to

perform the task. In this study, the participants' confidence in using de-escalation strategies affected their perception of how well these strategies work to reduce the violent and aggressive behaviors. I wanted to understand if facility correctional officers' experiences of de-escalation strategies increase safer and therapeutic juvenile correctional cultures. Yet, no qualitative studies were found that were specific to the lived experiences of juvenile correctional officers. Understanding the officers' experiences and their beliefs in the of the strategies helped to determine whether the strategies truly assist in decreasing the number of physical altercations between youth or between youth and staff. In doing so, the research findings may substantially influence the designing of training programs and increase the success of implementing on-the-job training skills with new correctional officers to assist juvenile correctional facilities.

Significance to Social Change

Studying the correctional officers' experiences using de-escalation strategies contributed to the existing literature in three-fold manner. First, the information provided insight on how the officers' experiences using these strategies and their perception of their use of de-escalation strategies create safer and secure environments. In that, participants believed the intervention strategies taught created safer environments and the officers' competency and proficiency levels with utilization of strategies redirected potential violent conflicts. This counteraction may eventually contribute to safer living environments where juveniles learn conflict resolution and problem-solving skills. In turn, juveniles have the potential to improve academically and enjoy personal success. The participants responses on use of de-escalation as means to resolve conflicts have the

potential to change executive's attitudes regarding safety concerns and the use of least restrictive strategies in correctional environments. These same insights from the participants will assist juvenile justice training staff with the development of specific techniques and strategies for teaching staff skills to reduce violent and aggressive incidents.

Second, the results of this study added to the limited literature surrounding the use of de-escalation strategies in juvenile correctional facilities to create safer and secure living environments. The literature review revealed very few research studies existed in juvenile correctional facilities where the experiences of line officers discuss the use of de-escalation strategies to reduce violent and aggressive behaviors. The participants responses in this study indicated the use of de-escalation is a viable method for creating safer and secure facilities by increasing opportunities to reduce aggressive behaviors and critical situations. These findings add to the existing research literature in the juvenile justice field and have the potential to impact institutional and social policies pertaining to the use of least restrictive measures. These findings may also prompt juvenile justice executives to conduct additional research with other facility staff (counselors, education staff, support staff, etc...) and detained youth about their experiences with the use of de-escalation strategies.

The findings from this study may assist administrators in developing job-specific criteria for hiring staff to work with this population. Changes in job criteria and hiring practices based on the participants' responses regarding perception of and use of strategies may impact and improve the retention of juvenile correctional officers. These

potential social changes might be beneficial for juvenile justice executives and stakeholders with meeting their designated missions and responsibilities.

Summary

Correctional cultures changed with the development and implementation of appropriate strategies to guide correctional officers, as well as, juvenile offenders (Dempsey, 2007; Inderbitzin, 2007). When officers are better equipped and trained with de-escalation strategies, they can reduce or redirect potentially aggressive or violent situations (Inderbitzin, 2007). The focus of this study was to understand officers' lived experiences when using these strategies.

The use of therapeutic strategies, such as making empathetic connections, appropriate verbal and nonverbal skills as opposed to punitive offensive strategies, assisted officers in the development and implementation of most suitable intervention skills (Dempsey, 2007; JKM, 2010). These strategies train and teach staff how to respond to rebellious behavior depicted by youth. Understanding direct-care officers' experiences regarding these strategies may assist policy makers in developing appropriate procedures and interventions that increase safer facilities.

In Chapter 2, a literature review includes a brief description of the relevant research, the literature search strategies, and the key search terms used in this study. The conceptual framework, the qualitative design and the Phenomenology approach were described.

Chapter 2: Literature Review

Introduction

In the 1980s, crimes committed by juveniles increased dramatically. In 1994, juvenile delinquency peaked with crime steadily declining over the next ten years (OJJDP Statistical Briefing Book, 2013). The severity of the offense increased (i.e. murder), while the number of crimes decreased (OJJDP Statistical Briefing Book, 2013). Burglary, aggravated assault, and murder are a few of the offenses committed by juvenile offenders (ODJJP, 2013). The most significant spike in juvenile offending occurred in the female juvenile population. Between 1999 and 2008, arrests of juvenile males decreased more than half for juvenile females (Knoll, & Sickmund, 2012).

Juvenile Arrest Rates for All Crimes, 1980-2010

As a result, youth committing these crimes are detained in juvenile correctional facilities. The correctional direct-care officers are responsible for providing a safe and secure living environment (Rosenbloom, 2010). A part of providing this safe environment is to address and redirect inappropriate, potentially violent and disruptive behavior that violates the facilities policies and regulations (Rosenbloom, 2010, DJJ Disciplinary Policy 16.1). One method of re-directing potentially violent and aggressive behavior and resolving incidents is to use least restrictive measures' strategies (Deeming & Johnson, 2009; JKM, 2010; Nelson et. al., 2010; Price & Baker, 2012). The least restrictive measures such as de-escalation strategies used in therapeutic settings assisted to resolve violent and aggressive behaviors. The research literature supports the use of these strategies in therapeutic settings.

Correctional direct-care officers are the first staff members to respond to the youth's negative acting out behavior. The correctional officers are trained to use de-escalation strategies to redirect negative acting-out behaviors and to increase safety within GA JJ correctional facilities (GA DJJ, 2015). The focus of this research was to explore the phenomenon of the use of de-escalation strategies.

The experiences of direct-care officers' utilizing de-escalation strategies exist in research findings pertaining to medical and mental health fields. Qualitative research studies exist in other direct care fields concerning line staff experiences using de-escalation strategies to reduce violent and disruptive events (Price & Baker, 2012; Robertson & Thomas, 2011). I explored how correctional direct care officers' view the use of de-escalation strategies to reduce violent and aggressive behaviors. A secondary purpose was to gain insight from direct-staff to determine if they feel the use of de-escalation strategies reduce and prevent violent and aggressive behaviors/situations in correctional settings. Understanding the experiences of direct care staff assisted in bridging the gap in the literature about juvenile correctional environments. The research goal was to explore the direct care officers' experiences of the use of de-escalation strategies to assist with creating therapeutic and safer living environments.

A review of the literature provided information that de-escalation strategies benefit staff in various environments. Research studies exist outlining how de-escalation strategies are a benefit in some adult correctional environments, medical and mental health environments (Price & Baker, 2012; Robertson & Thomas, 2011). Marsh et al. (2012) and Price and Baker (2012) also indicated using these strategies when applied

correctly in juvenile settings will create safer and secure living environments. Yet, little research existed to determine if staff feel competent in the use of de-escalation strategies as an intervention to reduce disruptive situations as well as to create safer conditions/cultures. I gained an understanding of correctional officers' experiences about the use of de-escalation strategies to create safer and secured environments. I believed the results from this study begins to fill the gap in the literature about real-life experiences of the juvenile correctional direct care officers' and the use of de-escalation strategies.

In this chapter, the social learning and self-efficacy theories pertaining to learned behavioral tasks of juvenile correctional officers, and self-efficacy of implementation of therapeutic strategies are reviewed. Other concepts discussed in this chapter were use of de-escalation strategies within juvenile correctional settings.

A review of the literature suggested few qualitative studies exist exploring the lived-experiences of juvenile correctional officers regarding the phenomenon of the use de-escalation strategies in correctional settings. In the third chapter of the study is an overview of the methodology used for the conduction of the research study. The research study was conducted off-site of the juvenile correctional facility located in the southern State United States of America. The interviews were conducted with the officers working inside the juvenile correctional setting to analyze their experiences towards the implementation de-escalation methods to increase safety within the living environments.

Literature Search Strategy

A search of the literature conducted through an electronic research of psychological, sociological, and educational databases is from Academic Search Premier, PyschARTICLE, and SociINDEX with full text, Teacher Reference Center, Psych INFO, and the other library resources from Walden University. The keywords used to find information included *self-efficacy, social learning theory, juvenile, juvenile crimes, gangs, disproportionate minority contact, recidivism, juvenile arrest, juvenile corrections, juvenile correctional facilities, correctional officer training, law enforcement training, safe crisis management, self-motivation, correctional culture, juvenile culture, de-escalation, positive behavioral interventions, therapeutic environments, de-escalation skills/techniques, phenomenology, phenomenological process, phenomenological interviews, qualitative research designs, and disruptive aggressive behaviors*. Other keywords used through Walden University Thoreau databases and dissertation topics are *verbal skills, violence prevention, conflict resolution, self-efficacy, self-confidence, empathic self-efficacy, phenomenology, sampling, qualitative research, interviews, use of force, excessive use of force, policy implementation, crisis intervention, correctional training, and social cognitive theory*.

All information was downloaded and the full-text documents such as articles, books to a CD and printed for easier reference and compilation of facts for the literature review of the dynamics of juvenile correctional cultures, environments, and the increase youth's behavior. The literature review spans over a 12-year period to receive the historical context of juvenile justice concerns, theoretical foundations, and updates in the use of theories about the juvenile justice systems.

A review of the literature revealed the characteristics of the juvenile offender and juvenile correctional officers' training. The literature provided a detail review of the juvenile crime over the past 15 years revealing the risk factors that link delinquency and recidivism. The literature review also provided the premise behind the correctional officer training and the rigorous courses provided for developing quality, ethical and professional officers. In addition, several de-escalation systems implemented in school's systems and in a few juvenile correctional systems in Ohio, Pennsylvania, and Kentucky. Research studies have been conducted regarding staff's experiences of the use de-escalation skills in medical and mental health environments, adult, child, and adolescent correctional environments. A synopsis of the research studies suggested few studies exist pertaining to the lived-experiences of line staff and the use of de-escalation strategies in juvenile correctional living environments.

Conceptual Framework

The conceptual framework for this dissertation focused on the SLT and self-efficacy theory as well as the concept of de-escalation strategies. Theories like the SLT and self-efficacy served as an appropriate foundation to understand the experiences of de-escalation strategies used by officers on potentially violent and aggressive behaviors of youth. These theories suggested that officers will continue to use the strategies to reduce negative acting out behaviors if the officers believe the strategies are effective in reducing incidents. The use of these procedures by officers to reduce violent and aggressive situations influences the culture within the correctional environment. Staff who observe the positive use of the strategies are more likely to use the same strategies

when faced with a similar situation (Nelson et. al., 2009). The framework of de-escalation strategies guides how staff utilizes these strategies to reduce potentially violent and aggressive behaviors.

Social Learning Theory

The SLT was expanded by Rotter in 1954 to include human behavior was based on the type of reinforcement that was gained immediately following the behavior. Rotter believed that the positive behavior was more likely to occur if an individual felt that he or she would receive a positive reward or outcome. This positive result would lead to the repetition of the positive behavior. Rotter proposed that the behavior is the product of environmental factors and not necessarily psychological factors (Bartol & Bartol, 2005). The repetition of behavior within the environment reinforces the changed behaviors. In this manner in this study, the SLT applied because the more staff observed the positive use of de-escalation strategies to redirect violent and aggressive youth behavior and to reduce the violent and aggressive situations, the more likely other staff will see these strategies as beneficial. As a result, staff will begin to rely on these strategies rather than on punitive strategies of physical intervention or room confinement.

In 1977, Bandura expanded Rotter's ideas by incorporating the aspects of behavioral and cognitive thinking. Bandura believed that the human behavior was learned through the observation of others and modeling. Bandura suggested that perceptions, thoughts, expectancies, competencies, and values need to be examined to understand criminal behavior (Bartol & Bartol, 2005). Bandura introduced the concept of observational learning or modeling to support his theory. Observational learning involves

a series of processes that consist of four major components: attention, retention, motor reproduction, and motivation (Bandura, 1977). Bartol and Bartol (2005) further stated negative behavior can be diminished if not become extinct when using these components.

The SLT provided the conceptual framework for staff learning and implementing new behaviors to create safer living environments. The concept of the SLT is that individuals learn primarily by observing and listening to others within their environment (Lyon & Weiser, 2009). Individuals imitate the new behaviors especially if the individual who is displaying the behaviors receive a reward or some positive reinforcement in response to that action. Imitation of the behavior is less likely to occur if the observer witnesses the individual displaying the behavior receive some punishment or negative reinforcement (Lyon & Weiser, 2009). A key factor in creating therapeutic environments is in the positive use of de-escalation and relationship building strategies by staff when interacting with youth (JKM, 2010; Lyon & Weiser, 2009). Creating therapeutic environments in correctional settings requires line staff to utilize de-escalation and relationship building strategies with the detained youth. SLT provided a foundation for how staff can create therapeutic and safe environments.

Staff implement learned behaviors as means of reinforcing positive behavior. SLT suggested behaviors are learned through observational learning, particularly, whether certain behaviors result in positive reinforcement or negative reinforcement (Price & Bake, 2012). Researchers revised and explored these theories many times for the implementation of new programs, along with the evaluation of treatment options for interjecting new findings and beliefs surrounding the complexities of juvenile

delinquency (Conway, 2009). As a result, the implementation of de-escalation strategies increases the desired behavior. In this case study, officers indicated they were more likely to use therapeutic strategies instead of using punitive strategies to manage violent, aggressive, and disruptive youth behaviors.

Jolivette and Nelson (2010) asserted the application of therapeutic strategies such as de-escalation when engaging youth, teaches the youth to choose less disruptive behaviors to resolve their problems. For young people to be successful in this skill, staff need the right skill-sets and beliefs. Staffs' experiences with the use of de-escalation strategies whether good or bad are paramount to their reliance and use of these procedures. The empirical studies from Boyce (2011) and Deeming and Johnson (2009) indicated when these factors of conducive learning environments and staff self-efficacy are in sync, youth will learn how to resolve their problems correctly without the use of violent and aggressive behaviors through observing staff 's use of de-escalation strategies.

Building effective relationships assists with learning new behaviors. The SLT also discusses the need to develop effective relationships between staff and client to for the client to learn these new behaviors (Marsh et al. 2010). Positive officer's interactions within the environment assist the youth to learn and form new behaviors (Di Giunta et al, 2012; Marsh et al. 2010). These positive interactions occur between staff and youth when staff listens, empathize, interpret nonverbal cues, build trust, minimize restrictive, and punitive controls (Marsh et al., 2010; Price & Baker, 2012). Officers learn these skills to effectively communicate with staff and with youth. These are the same skills used in de-

escalating disruptive, violent, and aggressive behaviors/situations (Marsh et al., 2010; Price & Baker, 2012). Based on Bandura's concepts, staff and youth interactions around demonstrating and explaining positive behaviors as well as exploring other prosocial skills provides opportunities to increase positive interactions, safe and caring environments (Marsh et al. 2010). The efficient use of therapeutic strategies was one contributing factor to positive staff and youth interactions often leading to redirecting and de-escalating critical incidents creating safer living environments.

Self-Efficacy Theory

A significant factor impacting the staffs' ability to use their skills confidently is their belief in self to learn and apply the concepts. The belief in one's ability to complete a task is often referred to as self-efficacy (Klassen & Lynch, 2007). The premise of self-efficacy theory (Bandura, 1998) is psychological and behavioral changes occur through assessment of personal skills and increased expectations of an individual. Staffs' ability to successfully apply the task is based on their perception of how well the task works in a given situation. Marsh et al. (2010) asserted strong relationships between youth and adult (in this case staff) are necessary to prevent and to respond appropriately to delinquent behavior. Marsh et al. suggested positive and consistent staff are needed to provide good care. Apart of providing good care for youth also means that correctional officers provide safe correctional environments. One means for providing safer environments is for correctional staff to build strong relationships with youth as well as to intervene appropriately and to respond to delinquent behavior. The use of de-escalation strategies is one method that direct-care staff can use to redirect negative and aggressive behaviors.

Staff develops self-efficacy in tasks through repeated meaningful and fruitful experiences when using that task (Di Giunta et al., 2012; Marsh et al., 2010; Newton & Bussey, 2012; Price & Baker, 2012). In this manner, the more staff experience success with using a task, like de-escalation strategies, the more confident and more often staff will use the strategies to deter and minimize violent and aggressive situations. The opposite of this statement can also be true. If staff believe the strategies do not work to reduce violent and aggressive incidents, then staff may believe the strategies are ineffective. Hence, the staff may not have the confidence to use the learned skills to de-escalate violent and aggressive situations. If staff have negative experiences with using the strategies, then they are less likely to use the strategy. Their confidence in the strategies may affect their perception if the strategies are effective to create safer juvenile correctional environments. In this study, self-efficacy belief was a motivational construct based on an officer's self-perception of their experiences of the strategy to create safer juvenile correctional environments.

Juvenile Offender and Crime

Offender Crime

Juvenile offenders and their crimes were important to this study as well as their pathways that led to crime, arrests, and incarceration. Several pathways exist that lead juveniles to correctional facilities and interactions with correctional officers. Juvenile crime rates are based on law enforcement agencies' data reports (Snyder & Sickmund, 1999) to the Federal Bureau of Investigations (FBI) Uniform Crime Reporting Program. Based on the FBI's reports, juvenile arrest data consists of violent and property crime

indexes (Sickmund et al., 1997; Snyder & Sickmund, 2001). The Violent Crime Index includes the number of arrests for murder and no negligent manslaughter, forcible rape, robbery and aggravated assault (Sickmund et al., 1997; Snyder, 1997). The Property Crime Index reflects burglary, larceny-theft, and motor vehicle theft and arson arrests. These two crime indexes determine the juvenile crime rate. The crime rates for juveniles began to rise steadily in late 1980s and peaked in mid-1990s with 2.7 million juvenile arrests in 1995 (Sickmund et al., 1997). The highest crime and arrest rates since mid-1980s occurred in 1995 (Sickmund et al., 1997) with 885,100 juvenile arrest specifically for violent and property crimes. The large number of arrests provided a glimpse of the type of crimes juveniles committed in the mid-1990s.

The rate of juvenile arrests looks different at the beginning of the 21st century. Adolescent crimes arrest rates began to decline from 2.5 million in 1999 (Snyder & Sickmund, 2001) to 1.5 million juvenile arrest in 2011 (Puzzanchera, 2013) to 1 million juvenile arrests in 2014 (OJJDP, 2015). Jenson and Howard (1998), Puzzanchera (2013), and Rosenbloom (2010) suggested the implementation of strict legislations, institutional policies, and practical changes within the state and community juvenile justice systems assisted with the decline of juvenile arrest rates over the past 24 years. With the changes in juvenile codes, policies, and practices, we have seen a change within the rates of juveniles remanded to a correctional facility.

Characteristics of Youthful Offenders

The characteristics of a youthful offender vary from race, ethnic, gender, economic and social components. According to Sickmund and Puzzanchera (2014), these

factors contribute to the juvenile's involvement in criminal activities. The Uniform Crime Report (1997) defines a juvenile is a person under the age of 18. The age of first offense is a risk factor and an indicator of future offending behavior.

Age of the offender. The age of the offender is an important factor in the severity of the crime committed. Most juvenile arrests are youth between the ages of 12 to 16. Juveniles 12 years and younger commit more property crimes (Cuervo et al. 2014) than older youth; while, juveniles 13 to 15 commit more violent crimes (Snyder & Sickmund, 1999). The Violent Crime Index in 1995 (Snyder, 1997) indicated 30 percent of the juvenile arrests for murder were youth under the age of 15 and that juvenile crime arrest rates for youth 14, 15, 16 years of age steadily increased from 1985 to 1995. In 1995, Juveniles 12 years and younger arrest rates were higher in the areas of arson, vandalism, nonviolent sex offenses, simple assault, and larceny-theft (Sickmund et al. 1997). Juveniles between the ages 12 and 15 accounted for 28 % of arrests rates for arson, simple assault, and disorderly conduct (OJJDP, 2015). Cuervo et al. (2014) suggests neighborhoods and family dynamics including those youth living below poverty level (Sickmund & Puzanchera, 2014) and questionable parental supervision (Wright et al., 2014) are high-risk factors for juveniles under the age of 12 to engage in violent and aggressive behaviors. The earlier a youth begins offending, the more likely the youth will continue to offend (Cuervo et al., 2014). Age is one predictor of future crime offending. Both, male and female juveniles commit offenses; yet, females arrest rates steadily increased (Snyder & Sickmund, 2001) over a period of fifteen (1985-1999) years. Understanding the types of crimes committed by certain age groups assisted the

researcher in understanding the dynamics of the juvenile correctional officers' perceived experiences of using de-escalation strategies when working with detained youth.

Female offender. Gender was another characteristic of the juvenile offender. Females accounted for one out of four juvenile arrests in 1995 and 1997 (Sickmund et al. 1997). Further, female juveniles accounted for 16 % of violent crimes and 28 % of property crime arrests. In 1997, female juvenile population accounted for 58 % of runaway and prostitution arrests (Snyder & Sickmund, 1999) and in 1999, female juveniles had higher arrest rates in liquor-related violations, simple assaults, and disorderly conduct. These arrests rates remained high for female juveniles well into 2014 with 41 % of the juvenile arrests for larceny-theft and 35 % of disorderly conduct arrests. Hodges et al. (2014) suggests the rise in female arrest is attributed to school and law enforcement policies and procedure as well as the different pathways to criminality. One pathway for female criminality is through the prostitution and runaway. Base on the FBI's Uniform Crime Report, in 2014 (OJJDP, 2015), females accounted for 71 % of prostitution and commercialized vice arrests. A review of the Uniform Crime Report from 1995 to 2014 (Puzzanchera, 2003; Sickmund et al. 1997; Sickmund & Puzzanchera, 2014; Snyder & Sickmund, 1999) indicates female juveniles were arrested more often and at higher percentage rates than males. Female offender arrest rates and crimes highlighted the different pathways females enter correctional facilities

Male offender. Juvenile males accounted for 74 % of the total 2.7 million juvenile arrests in 1995 (Sickmund et.al., 1997) and accounted for over 60 % of violent and property crimes (Snyder, 1997). Male offenders continued to account for a significant

percentage of arrest rates in the United States except in 1999 (Snyder 2001) when female juvenile arrest rates were disproportionately higher than males for aggravated assaults, murder and no negligent manslaughter, motor vehicle theft simple assaults and weapons violations (Snyder & Sickmund, 2001). Additionally, 75 % of juvenile homicide offenders were male and were more likely to use a firearm in the commission of a crime (Snyder, 2001). Over the next 14 years, male juvenile offenders continued to account for the large percentage of arrest rates in violent and property crime indexes (Puzzanchera, 2013; Sickmund & Puzzanchera, 2014). Even though violent and property crimes declined since 1980 (Puzzanchera, 2014), juvenile males still constituted 71 % of 1 million arrests in 2014 (ODJJ, 2015). Additional male and female juvenile offender characteristics are described through race and ethnic origin.

Race, ethnic origin and Offending behavior. Juvenile arrest rates vary not only by gender but also by race and ethnic origin. Sickmund and Puzzanchera (2014) suggested the juvenile population racial character changed since the 2000 United States (US) Census report. Before 2000 U S Census Bureau, juvenile race classifications were White, Black or African American, American Indian or Alaska Native, Asian or Pacific Islander (Sickmund &Puzzanchera, 2014). Sickmund and Puzzanchera (2014) asserted 90 % juveniles of Hispanic ethnicity were counted as White while the remaining 10 % classify themselves as Black, American Indian or Asian. The Bureau of Justice (BJS) and the (OJJDP) provide crime arrest data based on the pre-2000 Census Report race categories. After 2000, the US Census Bureau separated the Hispanic ethnicity from the white race category.

In 2010, juvenile offenders' race and ethnicity varied from state to state.

Sickmund and Puzzanchera, (2014) reported in several northeastern states, 90 % of the youth offenders were non-Hispanic (not of Hispanic or Latino origin) while 58 % of the juvenile offenders in southwestern states were Hispanic (of Hispanic or Latino origin). Approximately 35 to 50 % of the juvenile offenders in southeastern states were Black juveniles (Mallet, 2014; Puzzanchera, 2013; Sickmund & Puzzanchera, 2014). The Uniform Crime Report does not discuss race by age or gender for youthful offenders. Juvenile crime occurs in all racial and ethnicity categories.

White offender. The White offender category consists of multiple races and ethnic origin. Caucasian, Hispanic, and European decent are classified as White offenders (Sickmund & Puzzanchera, 2014). According to the 1995 Uniform Crime Report (Snyder, 1997), White juvenile offender arrest rates were higher than black juvenile offenders and other races. White offenders accounted for more than 54 % of forcible rapes, 70 % of burglary, larceny-theft and running way. White juvenile offender arrests rates began to decline as black juvenile and other races arrests rates increased for violent crimes; yet, arrest rates remained high for White juveniles in property crimes of arson, burglary, and larceny-theft, vandalism, weapons, and liquor law violations (Snyder, 2001; Snyder & Sickmund, 2001). However, the rates began to decline in 2011 to 66 % of the total juvenile arrest rate (Puzzanchera, 2014) with further reduction in arrest rates in 2014 (OJJDP, 2015) to 63 % of the juvenile crime arrest rates. White offenders arrest rates tended to be higher in the areas of property crimes and liquor law violations.

Several factors contributed the high arrest rates for White juveniles. Sickmund and Puzzanchera (2014) asserted factors contributing to high property and liquor law violations for White juvenile offenders has to do with possible means and opportunity to commit the crimes. Wright et al. (2014) also suggested that youthful offenders living in privileged communities have increased access to such resources. An additional factor to consider was the inclusion of Hispanic juveniles within this category. Snyder (1997) and Sickmund and Puzzanchera discussed the fact that Hispanic youth accounted for 57% of the White offender category. Perhaps, the large number of crimes in this category may be attributed to Hispanic juveniles; however, the data reports prior to 2011 do not differentiate crimes between Caucasian and Hispanic youth. Another factor may be disproportionate minority contact with the criminal justice system. Sullivan et al. (2016) suggested white juveniles are less likely to be detained for similar crimes committed by minority juveniles; yet, when arrested and tried for their crimes white juvenile tend to receive stricter dispositions for their crimes. Several factors contributed to the dynamics of the high white juvenile arrest rates.

Black Offender. The U.S. Census report classifies the Black juvenile offender as Blacks, African Americans, and Hispanic-black youth. In 1995, Black youth accounted for 28 % of the 2.7 million juvenile arrests and are disproportionately represented in the number of arrests for murder, forcible rape, robbery and aggravated assault (Sickmund et al., 1997). From mid-1980 to 2002, Black juveniles used firearms in a commission of a crime (Snyder & Sickmund, 1999) and were more likely to murder a family member or acquaintance (Puzzanchera, 2013; Snyder, 1997). Black offenders high arrest rates in the

mid-1990's marked the beginning of higher arrest rates for violent and property crimes in the 21st century.

Black juvenile offenders remained overly represented in the juvenile justice system. In 2011, Black juvenile offenders remained disproportionately represented in arrest rates of robbery, murder, property crimes, and vandalism (Mallet; 2014; Puzzanchera, 2013; Sullivan et al. 2016). The arrest rates remained steady in 2014 (OJJDP, 2015) with overall arrest rates of 34 %. Sullivan et al. (2016) suggested Black juveniles are more likely to be detained and remain in the juvenile justice system than white juveniles. With law and policy changes of the 1980s and 1990s (Jenson & Howard, 1998; Sullivan et al. 2016), Black juveniles appeared to be targeted more often especially with tougher laws regarding weapons and murder. These charges often coincided with the black juvenile's involvement with drugs and property crimes (Puzzanchera 2013; Sullivan et al.,2016.) Also, Black juveniles are more likely to be exposed to violence and crime (Sullivan et al. 2016) as well as live in poverty-ridden (Wright et al. 2014) neighborhoods. It is argued the judgmental policies, decision-making processes, and differential treatment (Mallet, 2014) within the juvenile justice system contributed to disproportionate minority contact (Sullivan et al. 2016) lending the appearance that Black juveniles' behaviors are more violent (Wright et al. 2014) disruptive and aggressive in nature. This differential treatment increases the likely hood that Black and nonWhite youth interface with law enforcement and juvenile justice agencies more often.

Other Offenders. While most juvenile arrests are for White and Black juveniles, a small portion of arrests includes other races and ethnicities. Native American and

Asian/Pacific Islanders represented less than 3 % of the arrest rates in 1995 (Sickmund et al. 1997) with a steady decline over the next 14 years to less than 2 % of the total arrest in 2014 (OJJDP, 2015). Cuervo et al. (2015) and Sickmund and Puzzanchera (2014) suggested an indirect link between poverty and living conditions, neighborhood culture (Wright et al. 2014) contributed to delinquency. Other races such as Native Americans also defined the juvenile offending population.

Socioeconomics of Offender. Juvenile Offenders often live or at below the poverty level and in poorer neighborhoods. According to the 2010 U.S. Census, the national percentage of juveniles live below the poverty threshold level of \$22, 000.00 annually is 22 % and in Georgia, 25 % of juveniles live below the poverty line level (Sickmund & Puzzanchera, 2014). Moreover, nationally, approximately 50 % of the youth in juvenile justice systems live in extreme poverty with family incomes below \$15, 000.00 annually (Sickmund & Puzzanchera, 2014). Minority youth between the ages of 5-17 are more likely to live in poverty (Sickmund & Puzzanchera, 2014) and in poorer neighborhoods (Cuervo et al. 2014). The possibility exists that socioeconomic conditions contributed to high or low arrest rates of juvenile offenders.

An indirect link exists between poverty, poor economic communities, and delinquency. This indirect link suggested juveniles living in poverty and poorer neighborhoods have less access to resources than juveniles living in privileged communities (Cuervo et al. 2014; Sullivan et al. 2016). The deprived resources may entail basic needs such as water, food, shelter (Cuervo et al. 2014) as well as exposure to violence and deviant peers within the neighborhood (Wright et al. 2014). Cuervo et al.

and Wright et al. suggested unsupervised peer association coupled with the deviant behaviors and attitudes from the neighborhood members perpetuates juvenile offending. Limited resources and exposure to neighborhood violence are factors that may lead to juvenile involvement in the juvenile justice system.

Parental involvement and economic stability in a juvenile's life may contribute to juvenile delinquency. Sickmund and Puzzanchera (2014) indicated 31 % of juveniles live in one-parent homes while 23 % of these youth tend to live in one-parent homes headed by their mothers (Sickmund & Puzzanchera, 2014). A disproportionate number (50 %) of Black juveniles and Hispanics (26 % nonWhite juveniles) live with their mothers. However, some youthful offenders live in two-parent homes above the poverty threshold level and in socioeconomically sound neighborhoods. Eighty-four percent of Asian juveniles live in two-parent homes, and 72 % live at or above the poverty threshold level (Sickmund & Puzzanchera, 2014). Wright et al. (2014) assert youth residing in two-parent homes are less-likely to engage in delinquent behaviors. This statistic may support the current low arrests for Asians and Pacific Islander juveniles as well as serve as indicator as risk factors for youth in low socioeconomic conditions.

Gangs and Drugs Offender. Juvenile offending and gang activity may be linked to delinquency. Gang activity occurs when three or more individuals in clubs or organizations engage in criminal or illegal activities and behaviors (Sickmund & Puzzanchera, 2014; Tapia, 2011). Gang membership crosses gender, race, and ethnicity parameters. In 2008, 90 % of gang members were minorities and in 2009, 93 % of gang members were males (Sickmund & Puzzanchera, 2014). Most juveniles are

first introduced to gangs and activity between the ages of 12-13. The definition of gangs indicates involvement in illegal and criminal acts; hence, juvenile gang membership increases the chances for delinquency and arrests (Sickmund & Puzanchera, 2014).

Juvenile gang involvement and criminal behavior historically contributed to higher arrest rates. Considering, higher numbers of White and minority juveniles participate in gang activity (Tapia 2011), it might be safe to assert a link exists between gang activity and high juvenile crime rate. Sickmund and Puzanchera (2014) suggested the connection to gangs and crime is closer to gender, race, and ethnic origin. Pyooz et al. (2016) and Tapia also suggested the mere definition of gangs increases the chances of disproportionate minority contact and increases the chance of law enforcement agencies making arrest decisions based on prior juvenile activity. The effects of disproportionate minority contact and differential treatment in decision-making processes for juveniles provided insight on the type of juvenile detained in juvenile correctional facilities.

Recidivism Rate

The youthful offender is either male or female between the ages of 10-17 of any racial and ethnic origin living in either deprived or privileged neighborhoods. These youth often remain in the system due to reoffending behaviors. The widely accepted definition of recidivism is any subsequent arrest after the initial arrest or disposition (Shapiro et al. 2010). A national recidivism rate does not exist as each state calculates and reports the recidivism rate differently (Sickmund and Puzanchera, 2014). Each state's recidivism report suggests how well juvenile systems meet their missions to protect the public and rehabilitate the youth.

In 2009, 33 % of juveniles in Georgia reoffended within one year of release and 41 % of juveniles reoffended after two years of release from a 60-90-day program (Buckner, 2011). Juveniles with originating felony offenses were more likely to reoffend within the time above frames (Buckner, 2011). Buckner reported juvenile risk and needs assessments were the best predictor for determining if the juvenile was in danger for reoffending. Shapiro et al. (2010) suggested the key determinants for reoffending are gender, age, race, and family involvement. These are the same factors assessed on the risk and needed instruments (Buckner, 2011; Viljoen et al. 2016). The recidivism rates in Georgia suggested the majority of juvenile reoffend within two years of release from a program.

In the efforts to address these factors, several different methods exist to deter juvenile from reoffending. Some methods are sanctioned-based programs, scared-straight programs involving incarcerated youth attempting to frighten first time youth or troublesome youth from offending (Lancaster et al. 2011) or risk assessment instruments to determine the risk factors that contribute to possible reoffending (Williams & LeCroy, 2014) or policy and law code reforms to deter the juvenile crime (Viljoen et al. 2016; Lancaster et al. 2011). The best tools for reducing recidivism rates are program risk and needs assessments that determine the underlying causes that contribute to criminal offending (Lancaster et al. 2011; Shapiro 2010; Viljoen et al. 2016). The presenting results provided facility and community staff with an outline for developing specific treatment plans and programs that juveniles can complete (Lancaster et al. 2011; Shapiro

2010; Viljoen et al. 2016). Utilizing these tools assisted facility agents with providing appropriate services as means of deterring possible juvenile reoffending behaviors.

When officers understand the factors that contributed to the juvenile offending behaviors, then officers have a better opportunity to develop appropriate and meaningful relationships with the youth. The use of de-escalation strategies worked best when officers develop positive relationships with youth. Understanding the juvenile offender and crime provided a framework of the type of juveniles supervised by officers. Once officers understand the characteristics that contribute to juvenile delinquency, officers may begin to develop positive rapport with youth and begin to rely on de-escalation strategies to create safer correctional environments. Apart of creating safer correctional environment is training correctional direct-care officers in strategies that assist with supervision of youth. These training curriculums are another contributing factor to officer's experiences with using de-escalation strategies.

Correctional Staff Training

Training

Juvenile Correctional Officers (JCO) or direct-care officers work closely with juveniles remanded to the correctional facilities. Juvenile Correctional Officers duties include onsite monitoring and supervision of juvenile offenders. Also, JCOs follow and implement rules, regulations, procedures, state laws about control and supervision of juvenile offenders while maintaining public safety (GA DJJ, 2015). These duties require officers to respond to aggressive and disruptive juvenile behaviors (Doran et al. 2011; Payne, 2015). Understanding the training of the JCO's assisted the researcher with

gaining insight into JCO's experiences. The type and length of JCO's training received prepare the officers to respond appropriately to the crisis and aggressive situations.

Correctional officers learn to properly respond to incidents during their training. Responding appropriately to a crisis or an aggressive, disruptive incident is instrumental in maintaining a safe living environment (Jolivette & Nelson 2010; Payne, 2015). Training in interpersonal and de-escalation strategies (Payne, 2015) assisted officers with the ability to know which strategies preempt potentially violent and aggressive behaviors or incidents (Doran et al., 2011). The communication skills coupled with the de-escalation strategies increased officer's abilities to control and maintain safety, (Payne, 2015) a top priority and a duty of a JCO. When tasks are carried out correctly and consistently, the safety of the juveniles and staff within the facility increases. To perform these duties successfully, JCOs must receive the required training in accordance to GA Peace Officer Standards and Training (P.O.S.T) Council and GA DJJ policies to supervise and monitor the juveniles in their care.

Requirements. Georgia Juvenile Correctional Officers receive well over 300 hours of training within first six months of hire date. Apart from correctional officer's training consisted of 40 hours of On-the-Job Training and 240 hours of Basic Correctional Officer Training (GA DJJ, 2015). Even though DJJ's officers are not considered law-enforcement officers, GA POST Council mandates all agencies acting in a peacekeeping manner to meet minimum peace officer standards and training (GA POST, 2009). Meeting the minimum training standards required successfully completion of mandate training programs for law enforcement officers.

Georgia POST Council outlined the minimum training guidelines for law enforcement officers. Georgia POST Council defined a peace officer as anyone by law who is entrusted to protect and preserve life and property (GA POST, 2009). In this manner, JCO's are considered Peace Officers as their job is to protect life and provide safety to those in custody. GA POST Council governs the training standards and curriculums for GA peace officers and public safety staff. This governing body sets the standards for all peace officers and agencies to adhere while meeting the mission of providing qualified, ethically, and well-trained professionals (GA POST Council, 2009). Before attending to basic correctional foundations' course, all newly hired officers attend and complete On-the-Job Training.

On-the-Job Training. The Juvenile Correctional Officer's On-the-Job training (OJT) consists of 8 hours training with human resources; 8 hours of classroom instruction with the Field Training Officer (FTO); 10 hours On-line Training Modules; 8 hours of First Aid and CPR Training, and a minimum of 32 hours shadowing a Field Training Officer on a variety of Posts (DJJ, 2015a). The OJT training provided newly hired officers with core competencies skills and prepares a foundation for basic training.

The On-the-Job training included the review of the DJJ Mission, Vision, and Core Values as well as FTO checklist before assuming a Post on the living unit or to supervising youth. Additional topics covered within the first 15 days of hire are facility environmental health and safety plan, chemical, key, and tool control, bullying, special incident reporting and documentation writing, Prison Rape Elimination Act (PREA), Sexual Abuse Prevention and Response; and Cardio Pulmonary Resuscitation (CPR),

Standard First Aid, and Automatic External Defibrillator (AED). New officers must pass the online On-the-Job Training test with an 80 percentile for eligibility to complete the six-week basic foundations course. The On-the-Job Training provided new officers with the basic information for working in GA juvenile justice system.

Field Training Officer Checklist. Once direct-care officers complete the first hours of training with personnel and support services staff, they shadow the field training officer on a variety of post. The goal of shadowing the FTO is to provide officers an additional 32 hours of training on a facility position with a certified facility trainer (DJJ Policy 4. 3). Shadowing the FTO allows the newly hired direct-care officer an opportunity to acquire competence in carrying out the different responsibilities of positions within the facility. The FTO rates the recently hired officer's competent performance level in 16 categories. The categories range from juvenile supervision, safety skill, accountability, customer service to judgment and decision making to teamwork and cooperation to professional development and documentation skills (GA DJJ, 2015b). Before and after attending Basic Correction Officer Training (BJCOT), the FTO has an opportunity to observe newly hired officers in a variety of situations including crisis and aggressive, disruptive incidents. Observing the officer is a chance for the FTO to provide praise or to provide corrective feedback for appropriate utilization of communication de-escalation skills.

Basic Correctional Officer Training (BJCOT). Upon completion of initial training sessions (OJT/FTO), Juvenile Correctional Officers attend the six-week basic training. The BJCOT is a 240-hour course designed to provide to necessary skills for staff

supervising youth. The course provides training in security practices and procedures. The security practices and safety protocols (DJJ Training, 2014) includes counts, movement, and transition of youth, Standards of Conduct and Ethics, 40 hours of Mental Health; Abuse Prevention and Intervention; Search and Seizure, Medical Illness and Substance Abuse, Gender Responsive, Report and Documentation writing. The course topics support the information learned during initial training sessions.

During this course, direct-care officers learn a variety of communication and crisis intervention skills, as well as trauma informed-care geared towards developing communication skills and reinforcing de-escalation skills taught during physical skills training week (DJJ Training, 2014). The communication and de-escalation skills courses provided the officers with a foundation for building positive relationships with juveniles. Prior to graduation, officers received approximately 73 hours of communication and de-escalation skills training to assist with redirecting aggressive and disruptive behaviors. Even though, the officers received training, how well and how often these skills are used to utilized is based on officer's perception of how successful these strategies are when working with aggressive and disruptive behaviors. Understanding this phenomenon was the primary focus of this research study.

De-escalation Strategies as path of conflict resolution

Training

De-escalation strategies are one method for resolving conflicts. Price & Baker (2012) assert that training in de-escalation strategies is the best method for reducing unnecessary restraints and minimize aggressive episodes. Positive staff and client

interactions are significant to reducing violent and aggressive situations (Price & Baker, 2012). In juvenile correctional environments, front line staff are responsible for responding to critical and aggressive situations involving the detained youth. It becomes imperative that these officers engage in positive interactions with the youth.

One de-escalation system is the Safe Crisis Management (SCM) system. The Safe Crisis Management (SCM) system, designed to assist with youth safety, (JKM, 2010) is an evidence-based program recognized by the National Juvenile Detention Association and other child advocacy groups. The de-escalation system is successful at teaching de-escalating crises approaches, building relationships, and taking a proactive approach for making positive changes in the environment (JKM, 2010). Agencies utilizing SCM tend to use the least restrictive alternative to managing acting out youth behavior while providing for youth safety (JKM, 2010). The SCM system, created by Joe K. Mullins, a former director of training in Pennsylvania's Juvenile Justice Court Commission, was first implemented in its current form in East Kentucky 's Commonwealth juvenile justice state operated program (JMK, 2015). Consistent use of de-escalating and relationship building strategies by staff will increase the level of safety within facilities as well as decrease the level of chaos within secure work environment (JKM, 2010). De-escalation and positive relationship building strategies assist with the development of safer living environments.

De-escalation systems work to assist staff with solid interventions for controlling potentially disruptive situations. Safe Crisis Management (JKM, 2010) philosophy teaches nonverbal interventions as the preferred intervention as it allows the youth to

avoid the influence of the peer group (JKM). Nonverbal communication begins with the staff modeling calm and controlled posture for the youth who are in a crisis, demonstrating for the youth how to redirect their strength to resolve the issue and to return to appropriate behavior (JKM, 2010). Several nonverbal and verbal communication strategies assist direct-care staff with maintaining controlled over the situation and living environment. Correctional staff learned nonverbal and verbal communication skills of planned-ignoring, understanding the meaning of body language and gestures.

Understanding the meaning of body language and gestures are physical cues that provided insight to what the person maybe feeling or thinking (JKM, 2010). For example, a person with crossed- arms may signal to other people that they are closed to the hearing any new information. The Paraverbal intervention strategies are the conscious use of tone, rate, and volume to clarify or emphasize the meaning of certain phrases. Active listening is a verbal intervention tool used to understand, bond and react to youth (JKM). Attending and attuning are two active listening strategies that assist officers with understanding what the other person is saying or feeling. Another verbal intervention strategy uses encouragement, open discussion, and direction to de-escalation when working with aggressive and violent youth (JKM.2010). The information from JKM foundation indicated that de-escalation strategies when used consistently and across the board by all line staff, will decrease violent and aggressive incident. A review of this system does not provide insight from staff on their experiences with the use of de-escalation strategies to reduce such incidents. Further, the JKM literature does not discuss

the perceptions of the use of de-escalation strategies to increase safer living environments.

An essential skill for the application of a de-escalation strategy is empathy. Empathy is the ability better emotionally to understand the thoughts and actions of his fellow men. A respectful attitude towards an individual prevents the escalation of conflicts. The more viable and stable, the educational relationship is the more the individual can overcome crises (Jolivette & Nelson, 2010; Price & Baker 2012). Empathy is an essential component in developing effective relationships where de-escalation can be used to redirect aggressive behaviors.

The focus of this research study was to explore the use of de-escalation strategies to prevent conflicts and reduce violent/aggressive youth behaviors. I wanted to understand how direct-care staff believes the de-escalation strategies assist with preventing incidents and creating safer juvenile correctional environments. Few researchers explored the use of de-escalation skills in juvenile correctional environments. The current literature reviews explored the lived-experiences of medical and mental health personnel in various settings. The findings from this research added to the existing literature in the fields of juvenile justice correctional living environments.

Use of Force Within Juvenile Corrections

Use of Force

Juveniles Correctional Officers duties require officers to respond critical incidents. Critical incidents are those that interrupt the normal operations and/or lead to a crisis (DJJ, 2012) involving juveniles. Responding to critical incidents required officers

to use the least restrictive measures to ensure the safety of the youth as well as maintain control of an incident or event (DJJ, 2015c). Apart of preparing officers to properly respond to incidents is to successfully complete use of force and restraint training during basic juvenile correctional officer's (42 hrs.) and annual in-service (24) training. During these trainings, officers learned the proper techniques, how to apply the techniques, and the levels within Use of force continuum.

The Use of force continuum acts as a guide for officers to determine the best technique(s) or measure(s) to use during an incident to maintain or regain control (Bulman, 2011). Bulman describes Use of force continuum as a vast array of techniques arranged from least restrictive measure of no force needed to most restrictive measure of lethal force used. GA DJJ's Use of force continuum (DJJ, 2015c) consists of staff presence (no force) to use of deadly force (lethal force). The continuum outlines that use of force is acceptable in cases where staff is defending self, protecting youth, staff, or others; preventing of major property damage; preventing escape; executing an arrest or enforcing lawful orders (DJJ, 2015c). Officers utilize their best judgment based on the size of youth, level of youth's cognitive reasoning, and disabilities when deciding which level of force is necessary to ensure safety for all parties. The amount of force used by an officer is based on the officer's perception of the situation.

Injuries and excessive use of force. Juvenile Correctional Officers authorization to use force is to ensure safety for self-others and property. Injuries to staff and youth often occur as a result from too much use of force especially if the person resists or if the officers must use physical force. Bulman (2011) reports officers using any type of

physical force especially hands-on force have a higher risk of injury to the officer and to the person. If a youth fails to follow through on instructions given by officers and their behavior meets the established threat criteria, then officers can use a physical technique to gain compliance from the youth. Considering this, a youth who struggles with officers during an altercation where physical force is used may receive injuries. Officers use their judgment to determine which level of force to use to in a situation.

The decision to use physical force intervention should be the least amount of force needed to gain compliance or regain control over the situation. If an officer used unnecessary force to gain compliance or control a situation, then injuries or death may occur (Rembert & Henderson, 2014). Rembert and Henderson report the use of excessive force can lead to injuries, death, civil, and criminal lawsuits. Excessive use of force occurs when force whether physical, chemical agent, or restraints (handcuff, leg irons, or belly chains) are used “above and beyond” what is necessary to gain compliance and control in an incident or over an aggressive youth (Rembert & Henderson, 2014, pg. 199). The excessive use of force occurs when correctional officers misjudge a confrontational situation and uses too much force when a lesser measure of force could have sufficed to bring about the appropriate end to the situation.

GA DJJ and Use of Force. As indicated earlier, the US DOJ cited GA DJJ facilities for using excessive force frequently and as the sole means of confronting aggressive and disruptive youth behaviors and incidents (DOJ, 1998). Rembert and Henderson (2014) assert cultures within correctional environments accept the practice of using force first and talking later as the primary method for resolving conflicts and

aggressive behaviors. The DOJ also noted several incidents resulting in major youth and staff injuries occurred in GA DJJ facilities where excessive use of force was the practice for intervening with youth (DOJ 1998). Factors such as stress, staff shortages, fear of the youth, or poor ability to perceive threat cues (DOJ, 1998; Rembert & Henderson, 2014) may contribute to the accepted practice of use of force first and talk later. These were similar factors noted in DOJ's rulings which lead to GA DJJ executive's agreeing to implement more therapeutic measures of intervention for working with youth (DJJ, 2009). The mandated agreement led to the implementation of a specific set of de-escalation strategies to assist with confronting and redirecting youth aggressive behaviors.

The implementation of de-escalation strategies assisted with transitioning from punitive to therapeutic facility cultures. For successful transition of the culture to occur, juvenile correctional officers must successfully implement the strategies. Exploring the officer's experiences assisted with understanding their perceptions with utilizing the strategies. In addition to understanding the previous practices of use of force within the organization's culture assisted with gleaning insights to officer's perceptions on the updates to the use of force policy which relied heavily on de-escalation strategies to redirect youth aggressive and disruptive behaviors.

Policies and Procedures Implementation

Policies and Procedures

Agencies and organizations periodically review policies and procedures to ensure the purposes are relevant to the current trends and practices within their field. Changes in

the policies and procedures may occur in response to current litigation, changes in state and federal laws (Chang et al. 2012; Tummers et al. 2012). In response to the DOJ violations, GA DJJ executives implemented new policies and procedures for confronting and redirecting youth aggressive behaviors (DJJ, 1998). Several procedures replaced how youth were admitted, housed, educated, and disciplined within the correctional facilities. The Use of force policy updates included the addition of use of de-escalation strategies.

Attitudes of policy implementation. The willingness to implement new policies maybe met with challenges from mid-level managers and direct-care line staff especially if the policies are misunderstood and deemed difficult to implement. Chang et al. (2014) and Tummers et al. (2012) suggested managers and line staff attitudes have a major impact on how successful a new policy or procedure is within a given environment. Factors that influence the successful implementation of policy are staff and management attitudes, willingness to implement meaningfulness of policy (Tummers et al. 2012). Managers' and staffs' unwillingness to implement a procedure could result in policy violations and ineffective practices.

A variety of reasons existed for why managers and staff are unwilling to implement policies and procedures. Tummers et al. (2012) suggest policy content and discretion, organization context and personal characteristics of staff influence the success of the policy implementation. Policies provided general guidance to managers for implementing new procedures. Some policies allowed for managers to create local operating procedures. The personal meaningfulness of a policy for the manager influences how the managers interrupt, develop, and implement the policy (Tummers et

al. 2012). In this manner, if the manager does not find personal value in the policy, the manager's attitude towards the policy may impede their objectivity in developing and implementing the procedure. This attitude may be incorporated in how managers discuss the procedures with their staff and how their staff interrupt and implement the same procedure. The more the manager and staff gain positive meaning in the procedure the more willing they are to successfully implement the policy. In this study, it was determined the more meaningful the officers found the use of de-escalation strategies to reducing aggressive and disruptive behaviors, the more willing they were to use the strategies thus increasing the self-efficacy in implementing the skills.

Organizational Context. Another factor in successful procedural implementation is staff participation. Staff participation in developing procedures and protocols increased staff's buy-in of the procedure and increases the effectiveness of the new process (Tummers et al. 2012). Exploring the juvenile officer's experiences of de-escalation strategies provided insights pertaining to their views of the policy process and their ability to implement to the strategies. Gleaning insights from officer's attitudes toward the utilization of de-escalation strategies assisted in understanding why some officers successfully perform and why other officers unsuccessfully perform de-escalation strategies. Examining these factors assisted with understanding the lived experiences of the phenomenon of de-escalation strategies.

Therapeutic Beneficial Approaches

Therapeutic Settings

A review of the peer journals indicated mental health, juvenile residential, and medical intensive units use de-escalation strategies with aggressive and disruptive clients. Registered nurses in mental health units learned to use de-escalation strategies to develop therapeutic environments (Cowin et al. 2003). The skills learned are staff autonomy, self-knowledge to achieve the goal, being self-aware, remembering the dignity of the client, and avoiding physical conflict when using the least restrictive measures (Cowin et al, 2003). Staff learned additional therapeutic skills such as verbal warnings, taking the client through the moment, use of conflict resolution and problem-solving skills that assisted nursing staff with de-escalating situations, avoiding restraint use and isolation away from general population (Cowin et al, 2003).

For effective use of de-escalation strategies, direct-care officers needed to be proactive and consistent (Cowin, et al 2003) with the use of the strategies when intervening and redirecting youth's aggressive and violent behavior. Better staff and youth relationships resulted in fewer incidents and increased staff self-efficacy (Cowin et. al.2003) occurred when staff consistently use de-escalation strategies. Cowin et al. surveyed mental health nurses and the results indicated the nurses continued to do well with periodic reminders of the de-escalation process and with reiterations of the skills needed to use least restrictive measures in aggressive and violent situations. Even though the study conducted was qualitative in nature, the study's results does not capture the lived experiences of correctional staff. The self-efficacy information was not gathered

through one to one interviews but was derived through the several survey tools. Second, the findings of the study are based on adult behaviors in mental health units with health care professionals not with juveniles in a correctional facility with direct-care officers.

Residential Settings. Juvenile residential therapeutic settings use de-escalation strategies to review mental health experiences of the youth. De-escalation strategies are used in evidence-based practices for children housed in psychiatric facilities (Delany, 2006). Mental health and psychiatric hospitals had to meet federal guidelines in the areas of restraints and seclusion interventions. Delany contended with the increase in federal regulations to reduce the use of restraints and seclusion in psychiatric hospitals, health care professionals had implemented alternative methods for working with aggressive and violent behaviors in children. Delany suggested few studies exist that concentrates on the use of de-escalation strategies and training as means of reducing restraints and seclusion. A meta- analysis finding of the use of de-escalation strategies as a sole means to punitive measures suggested de-escalation strategies do not work to reduce the use of restraints or seclusion incidents (Delany, 2006). Instead, a combination of de-escalation strategies, with continued training, and individual client assessments are the best means for reducing the use of restraints and seclusion (Delany, 2006). Even though the focus of the study was the use of alternative methods for reduction of restraints and seclusion, evidence existed pertaining to the use of de-escalation strategies in psychiatric settings to assist with redirecting violent and aggressive behaviors. Yet, the author does not shed insight to the staff's experiences with using de-escalation strategies with clients.

Nurses and mental health professionals utilize de-escalation strategies when working with violent and aggressive behaviors of their clients. Olausson et al. (2014) provided an in-depth review of five nurses' experiences of working in the intensive care units at a hospital. The phenomenological approach provided the researchers with an avenue to gain an understanding of how these nurses view their job duties and responsibilities to elderly patients especially when these patients displayed violent behavior. The nurses expressed the use of de-escalation strategies as a necessary means to gain control of violent behavior displayed by elderly patients. The nurses expressed their experiences as successful if everyone used the strategies consistently (Olausson et al. 2014). Consistent use of de-escalation strategies by all staff is one means to controlling elderly violent behaviors.

Nurses also used de-escalation strategies in resolve conflicts and calm environments. Price and Baker (2012) provide a detail review of a research study regarding nurse's use of conflict resolution skills to maintain calm environments within the residential settings. The nurse's viewpoints supported the concept that de-escalation strategies create safer living environments. Price and Baker in their phenomenological study provided insights from nurses who use of de-escalation strategies to decrease violent and aggressive incidents. The viewpoints of these nurses believed the use of de-escalation techniques assisted with creating safer environments in residential settings (Price & Baker, 2012). The findings based on the experiences of nurses within residential settings provide support that the use of de-escalation strategies create safer living environments in residential settings.

Correctional Settings/Law Enforcement. Correctional facility medical and mental health staff used de-escalation strategies to address aggressive and violent behaviors. Weiskopf (2005) conducted phenomenological interviews with nurses to explore their experiences with the use of de-escalation strategies pertaining to their daily interactions with prisoners. The nurses and mental health staff interviews supported the use of de-escalation and conflict resolution strategies worked to minimize violent and disruptive situations (Weiskopf, 2005). The lived experiences of the nurses and mental health staff in a prison provided support for use with resolving conflicts; yet, the interviews do not discuss the use of de-escalations skills to create safer juvenile correctional environments.

Understanding the experiences of the correctional staff with de-escalation strategies was the focus of this study; yet, few studies existed that explored the experiences of juvenile justice's staff to create safer living environments. One phenomenological study pertaining to juvenile safety in correctional environmental explores the perceptions of juvenile justice staff's and the use of screenings instruments for self-harm behavior. Knowles et al. (2012) suggested staff's attitudes conducting the screenings had a major impact on the type of information that was received from the screening instrument. Accordingly, 8 staff were interviewed using the phenomenology process to determine how staff's attitudes influenced the outcomes of self-harm screenings to determine suicidality of youth during the intake process (Knowles et al, 2012). The results from these interviews indicated that staff 's perceived attitudes of confidence and/or attitudes of benefit to assist the youth made a difference in the level of

observational care and interaction with mental health services (Knowles et al, 2012). The exploration of staff's perceptions of a job duty captured and provided the researchers with valuable information pertaining to conducting self-harm instruments. The information gained suggested that if staff 's efficacy in the effectiveness of instrument is high then staff's perceptions of the instrument is positive, and staff are more likely to administer the instrument successfully. Knowles et al. explored the officers' experiences with de-escalation strategies to reduce disruptive behavior and to create safer living environments. The information gleaned from this article is the closest article providing insight into juvenile staff's perceptions of implementing a job duty based on established procedures.

As stated earlier, very few articles existed regarding the correctional direct-care officers' perception of use of de-escalation strategies in juvenile correctional settings. The aim of this research was to provide insight and understanding as well as bridge the literature gaps regarding these staff's views the of use of de-escalation skills within their juvenile settings.

Summary and Conclusions

The current literature information provided the views of nurses and mental health workers on how de-escalation skills assisted them with minimizing and preventing violent/aggressive behaviors in prisons or the medical/mental health fields. The literature review explored the juvenile offender and an in-depth account of rise and type of juvenile crime as well as the characteristics of the juvenile offender. In addition, the correctional officers' training program review provided a glimpse into the topics used to prepare the

officers to carry out their duties. In the literature review, a detailed account of the use of de-escalation strategies was provided as a method for creating the safer working and living environments. The existing information in the literature review also provided an overview of how de-escalation strategies will work in juvenile living settings regarding use of force continuum and policy implementation; yet, the literature does not give the direct-care officers' viewpoints. The review of the literature discussed little information on how juvenile correctional direct-care officers believe the strategies work in potentially violent incidents nor whether correctional direct-care officers have confidence to use these skills to prevent violent/aggressive incidents.

This research study provided insight from direct-care workers and explored their experiences with the use of de-escalation strategies as an effective method to deter aggressive and violent behaviors within juvenile justice. The current literature has a wealth of information on how medical and mental health staffs' experience use of de-escalation strategies with potentially violent and aggressive clients in residential settings. Yet, little to no research studies explored the lived experiences of juvenile direct-care officer's use of the skills to create safer environments within the juvenile correctional living environment. This research dissertation builds on the current literature of using de-escalation strategies in law enforcement by determining that juvenile correctional staff experiences of use of de-escalation strategies is very similar to those experiences of have similar that medical and mental health staff experience to increase safety in residential environments.

In Chapter 3, the phenomenological study was explained as well as the details of the research designed explained the phenomenological study and details of the design. The designed included a review of the participant identification, the proposed questions to the method for gathering, organizing and analyzing of the participant information.

Chapter 3: Research Method

Introduction

The purpose of this phenomenological study was to examine and to understand the experiences of direct-care staff use of de-escalation strategies for managing violent and disruptive behaviors in juvenile correctional facilities. Juvenile direct-care officers often responded to critical incidents and disruptive juvenile behavior within the correctional facilities. Juvenile direct-care officers respond using the least amount of force needed to redirect behaviors and quell incidents. The least amount of force used is often de-escalation strategies to regain control over the situation. Agencies implemented similar crisis intervention techniques using de-escalation strategies to assist officers with handling potentially aggressive and violent individuals (Davidson, 2015; Payne 2015). However, the officers' lived experiences were not explored or discussed.

Upon review of the literature, little information existed regarding the correctional officers' experiences and perceptions of using de-escalation strategies in juvenile correctional facilities. The research study's findings may add to the current literature by exploring juvenile correctional officer's perceptions of the phenomenon. The exploration of correctional officers' lived experiences may assist correctional and law enforcement officials developing or enhancing current crisis intervention strategies in a similar manner that occurred in the medical and mental health fields.

In this chapter, the research design and approach are reviewed as well as an overview of the problem and purpose. The criteria for participation, recruitment, sampling method, the sample size, and the location used for interviews were discussed.

Also addressed in this chapter are the research and the interview questions along with a review of the data collection, analysis methods, issues of trustworthiness and ethical considerations.

Research Design and Rationale

A phenomenological study approach details the descriptions of recounted experiences as means to understanding the experience (Moustakas, 1994). Moustakas asserted that the goal is also to gain an understanding what the experience(s) means to the person who observed or lived the event(s)/experience(s). A phenomenological study allows the individual to relive the experiences to provide a detailed account for the exploration of the nature of the experience (Moustakas, 1994). The phenomenological design was chosen to understand the lived experiences of direct-care officers.

The best method for understanding the experiences of these strategies was to gain insight from the staff that use them on during the operation of their duties. The primary research question was designed to ascertain the lived experiences from direct-care staff.

How do juvenile correctional officers perceive and describe their experience of use de-escalation skills in resolving critical incidents among juveniles remanded to correctional facilities?

Phenomenology: A Research Tradition

For this study, a phenomenological research method was used. According to Rajasekar et al. (2006), research methodology can be understood as the systematic approach a researcher takes to discover a prospective explanation for an existing problem. It can also be called the study of methods. Developing an appropriate solution

for any issue is vital to ensure that a proper research methodology is selected and used. Choosing the right research methodology is a significant part of conducting research since the method can make or break the results of the study. For this purpose, I concentrated on the aims of this study and planned the research methodology accordingly.

The qualitative design was an effective method for ascertaining perceptions of how officers experience the use of de-escalation strategies during potentially disruptive and aggressive situations within correctional facilities. Stake (2010) asserted that qualitative methods help the researcher to gain an in-depth understanding of the topic rather than just obtaining numerical data. Creswell (2009) posited that qualitative research is a collection of data from various settings and focuses on how the individuals perceive the problem or issue. Stake described several strategies used in qualitative research. These strategies are ethnographic, phenomenological, case studies, grounded theory, and narrative research.

Rationale of Choice

Ethnographies are the collection of observational data with members of the same ethnic or cultural group over time (Merriam, 2009; Scott & Garner, 2013). Grounded theory is a formalization of a theory based on the abilities, activities and interaction of the participants (Onwuegbuzie & Leech, 2007; Scott & Garner, 2012; Stake, 2010). Case studies explore the perceptions of several participants about an event, activity, or program (Stake, 2010). The case study approach allows the researcher an opportunity to explore the experiences and perceptions of the participants. These strategies were not appropriate

for this study because my intent was not to observe the participants over an extended period nor was the intent to build or refine a theory based on participant's behavior over an extended period. My purpose was to understand the experiences of juvenile line officers use of de-escalation strategies create therapeutic and safer cultures.

Phenomenological. The phenomenological strategy explored the individual's lived experiences of the nature of a phenomenon (Gee & Loewenthal 2013; Moustakas, 1994; Plunkett et al., 2012). The individuals described their experiences as it related to the situation (Gee & Loewenthal, 2013). Gee and Loewenthal asserted through the experiences of the one group, are better able to understand what occurs in all stages of the experience. I wanted to know the correctional line officers' experience using de-escalation strategies to reduce aggressive behaviors. The phenomenological method allowed me the ability to review the experience of multiple individuals as it occurred in a single event (Plunkett et al. 2012).

In phenomenological research the primary method for ascertaining the information from the participants is the interview process (Moustakas, 1994). Moustakas also wrote the interview process is often conversational in nature and uses open-ended questions to engage the participant. The interview methods were used to ascertain this information and I had the opportunity to gain an understanding of the meaning of the phenomenon (Englander, 2012; Walker, 2011). Englander asserted the interview process allow the researcher to ask pertinent questions to the participant that allows them to describe their lived experiences of the phenomenon. The interview techniques assisted with determining the participants' themes of the lived experiences (Nurse Researcher,

2011). The interviews from direct-care staff provided an understanding of the experiences using de-escalation strategies to respond to critical incidents.

Role of the Researcher

During the research period, I assumed several roles and performed a variety of tasks. As the primary organizer and facilitator of the research, I contacted the participants, developed measures to protect the participants, arranged interview times and locations, conducted the interviews, collected, and interpreted data. Prior to contacting potential participants, I received approval from Walden Institutional Review Board (IRB) and authorizing agencies. As the interviewer, I listened and collected the participants interview responses as well as coded the information, determined themes and interpreted the findings.

Having worked in a juvenile correctional facility for over ten years in various capacities, including a correction facility assistant director, I had first-hand knowledge of how situations among residents or between residents and staff can quickly turn disruptive and volatile requiring the use of physical restraint. Even though I do not currently work in juvenile correctional facilities, I have maintained several peer and coworker relationships within the Agency. It is important to note that I did not supervise nor work in the same Departmental Division as any of the direct-care correctional staff selected for this study. The appropriate means were taken to ensure biases did not influence the interview or interview outcomes as well as I ensured the confidentiality of participants.

Scott and Garner (2012) suggested several methods for reducing personal bias when conducting a study and interviewing participants. The areas proposed by Scott and

Garner are transparency; the way the questions are asked; and how the information received from the interviews is interpreted. Prior to the start of the interviews, to ensure transparency, the details of the design were explained and how the participant's interviews would provide insight regarding the phenomenon of the use of de-escalation. The second method used to minimize personal biases in the collection of data was to pay attention to how I asked the questions to avoid asking leading questions while encouraging the participant to fully answer the questions.

In several interviews, the use of open-ended questions was used to clarify a statement or to encourage the participant to answer the question. The last method used was to explain the purpose of audio-recording of the interview and how the transcriptions would provide rich details of their lived experiences. Scott and Garner suggested another method for minimizing personal bias when analyzing data is to check for "falsibility" (69). In checking for falsibility, alternative reasons for the comments and themes were checked against the opposing view point of individuals. A detailed explanation of data collection and analysis are discussed in the last section of this chapter.

Methodology

Participant Selection

This phenomenological study was to examine and to understand the lived experiences of direct-care officers' use of de-escalation strategies for managing violent and disruptive behaviors in juvenile correctional facilities. In situations where violent, aggressive, and disruptive behavior may occur, the front-line staff are the first to respond and the first to intervene. The direct-care officers were trained in a variety of techniques from de-

escalation to physical intervention. The direct-care staff were the best group of individuals to interview to glean insight regarding the use of de-escalation strategies. I recruited individuals who work in of the juvenile correctional facilities in Georgia. JCOs, also referred to as direct-care staff, will be recruited for participation in the study. The direct-care staff in the correctional facilities are male and female from 18 to 65+ years of age.

In Georgia, the correctional direct-care staff must complete the Basic Juvenile Correctional Training (BJCOT), 6-week basic course, before supervising youth by themselves. Recruitment of direct-care officers were from juvenile facilities within a 100-mile radius of the central Georgia area. The direct-care officers selected for participation in the study completed the BJCOT and served as juvenile correctional direct-care officers for at least 18 months. The completion of basic training ensured the officer received the training and had an opportunity to use de-escalation strategies within their assigned facility.

Sampling and Sampling Procedures

The sampling size in phenomenological studies can be as few as six participant-interviews and as many as 40 participant- interviews (Mason, 2010; Walker, 2012). Walker and Mason based the sampling size suggestions on the research of Guest et al. (2006) who discussed that enough information can be gathered in as little as six interviews and saturation of information can also occur within the 25 interviews (Rowland et al. 2016). A total of 20 staff inquired about the participating in the study; however, nine direct-care staff completed the study. Guest et. al. asserted that six to eight

individuals are an ideal participant size as well as suggested that the number of the individual participants depended on the subject matter, the level of experience, and the researcher's desire for in-depth or prima fascia insights. I recruited participants within a 50-mile radius of central Georgia vicinity. Five juvenile correctional facilities exist within the 50-mile radius of the central Georgia region. I received less than ten consent forms from staff from these facilities, so I extended the recruitment to facilities within 100 miles radius of central Georgia. I followed the same recruitment process until nine staff completed the entire interview process.

Participant Criteria

The participants completed BJCOT and worked for 1 year were recruited from a juvenile correctional facility within the state of Georgia. Some researchers indicated the number of interviews to be conducted to ensure saturation depends on the goals of the research and the level of insight the researcher wishes to understand (Breen, 2006; Onwuegbuzie & Leech, 2007; Plummer-D'Amato, 2008). Walker (2012) and Mason (2012) indicated thematic saturation occurs through repetitive themes and no new information is obtained from the participants.

In phenomenological studies, data saturation can occur after six interviews and within the 12 interviews (Guest et al. 2006). Based on current research, I interviewed nine direct-care officers to ascertain their experiences of the phenomenon using the interview questions (Appendix A) related to the research question: How do juvenile correctional facility officers perceive and describe their experience of the use of de-

escalation skills in resolving critical incidents among juveniles remanded to correctional facilities?

Procedures for Recruitment, Participant, and Data Collection

I received approval to recruit and interview these individuals through the established Agency and Walden University protocols. Upon approval from Walden's IRB (06-27-17-0036287) committee, I completed the GA DJJ Research application (Appendix B) explaining the research study and requesting permission to recruit and to conduct interviews with the correctional direct-care officers from the facility. After approval was given to conduct the research, I posted flyers (Appendix C) in the breakrooms and the approved staff areas to recruit participants. The flyers contained a brief overview of the research design and my contact information. Once I received inquiries about the research, I e-mailed the potential participants to invite (Appendix D) them to officially participate in the research, explained the research study, and the guidelines for participating in the research study. I interviewed nine direct-care officers from the individuals who indicated a desire to participate in the study.

After the participants agreed to participate in the study, I explained the teleconference process as well as the e-mail regarding the Demographic Information Questionnaire (Appendix E) and the consent form to ensure the participant met the study criteria and understood the study. Once the demographic information was received, I contacted the individuals via telephone to schedule the telephone interview for the study, to review the consent form and to ask permission to audio-record the interview. After verbal and written confirmations of participation, I confirmed the date, time, and

provided the conference call number and access code for the teleconference interview.

The one-to-one interviews were conducted via teleconferencing using the FreeConference Call system which audio-recorded the interview. The interview dates and times did not conflict with the participant's work schedule. The interviews were not designed to last longer than 90 minutes; yet, the interviews lasted as long as necessary for the participant to provide feedback to the questions.

Data collection. Moustakas (1994) stated after preparing the interview questions, the researcher conducts the data collection phase in a trusting and safe environment. At the beginning of each interview, I reiterated to the participants the confidentiality of their identities and their responses as well as reviewed the consent form, the purpose of the study, and the methods for resignation from the study. I asked permission to audio-record the participants during the interview. I used this method to capture their responses as well as served as a reference point for data collection. After I reiterated these items, I continued with the interviews by using the semistructured questioning process.

After answering the fundamental questions and before the end of the interview, I provided the participants an opportunity to make final comments and to give additional thoughts (Breen, 2006). The individual interviews were approximately 45 minutes in length. The time allotment allowed me an opportunity to gather the information from the participants. Before the end of the interview, I reviewed the initial questions for completions. I sent a summary of the participant's interview for his or her review and to provide additional comments.

During the individual interviews, I audio-recorded the individual responses for information gathering. The downloaded audio-recordings were transcribed and placed on my laptop in a password protected documented folder. I debriefed with each participant after his or her interview and provided an opportunity for them to ask questions about the research study. A summary of each participants' interview was provided for their review for review and to provide comments. Each participant received my contact information to address any questions or concerns they had.

Data Analysis Plan

After completing the interviews, I transcribed the interviews and then began analyzing the information using Moustakas's method of data analysis. Moustakas (1994) analyzed the transcribed information through using four method process-horizontal, meaning list, clustering, and descriptions of the content. Using the horizontal method, I gathered all the data relevant to the topic and the initial research questions (Moustakas,1994) by reading through the written notes and transcripts line by line highlighting the key phrases related to the topic. I used color highlighters to identify key phrases and ideas. The color-coded legend was written in the margins. After gathering the critical statements, I used a numbering system to identify the clusters.

After I identified the clusters, I developed based on contextual meanings and relationships (Moustakas, 1994). From the descriptions, the intrinsic nature of the phenomenon is devised. The written descriptions discussed the original thoughts and beliefs of the participants regarding using de-escalation skills to create therapeutic and

safe correctional environment. The description serves as a debriefing session for this research study.

Issues of Trustworthiness

Credibility

Credibility is whether the reader believes the results gathered from the individual interviews (Breen 2006; Plummer-D'Amato, 2008a). Credibility in a research design is the extent the results reflect the genuine and accurate experiences of the participants (Breen, 2006; Lincoln & Guba, 1985). In this manner, the comments and unique ideas from the participants provided the internal validity of the study. I ensured the comments were accurately transcribed and coded from each interview session.

To enhance the credibility, I encouraged the participants to elaborate on their responses and to expand on their ideas. This elaboration assisted me with describing their experiences as well as assisted with examining if other individuals in the same position had similar experiences. To increase creditability and with consent from the participants, I audio-recorded the interviews and transcribed the interviews for accuracy of themes and concepts from each participant.

Several techniques existed to determine credibility in qualitative studies. Lincoln and Guba (1985) suggested seven methods for checking and verifying truth in findings. Member checking is one method for verifying the accuracy of information transcribed (Lincoln & Guba, 1985). Member checking occurs when themes, data, interpretation, or categories are reviewed by the individuals from the group (Lincoln & Guba, 1985). Utilizing, member checking allowed me the opportunity to allow the participants to

correct errors, discuss ideas they may disagree with, to clarify information, and to determine the accuracy of the findings.

By using member checking, I informally checked the research findings with the participants. I reviewed the results and provided the participants with a copy of the findings. The copy of results allowed the participants to examine the themes from the interviews. The participants discerned the accuracy of the information. To ensure accuracy of information, participants were given an opportunity to clarify any misinformation. (Breen, 2006; Plummer-D'Amato, 2008a). I increased the credibility of the research findings by allowing participants to review the captured themes and concepts from the interviews.

Transferability

In qualitative studies, transferability is the extent to which the reader makes the judgment about the generalization of the research findings to similar groups or situations (Breen, 2006). The analysis provided adequate detail to allow others to determine if this study applies to their setting (Breen, 2006; Plummer-D'Amato, 2008a). A detailed description of the data, the sample of the participants as well as the demographic information of each participant, detailed outlining of the themes and occurrences that emerged from the analysis is provided regarding the results of this study. Based on this information, future researchers will be able to determine if the study design can be applied to their setting.

Dependability

Dependability implies the research findings are consistent if reproduced in a similar study design. Internal consistency is the extent to which the items within an instrument measure the variable being investigated (Burns & Grove, 2005). Reliability measures through similarity (Gerrish & Lacey, 2006) and compares the level to which two versions of the same topic generate the same results (Creswell, 2005). According to Cooper and Schindler (2006) stated that reliability in qualitative research occurs when either the same observer or different observers are able to assign similar information into similar categories. In qualitative research, dependability is the measure used for reliability.

To ensure dependability, I provided a detail outlining of the techniques used to make the decisions regarding the results of the study (Plummer-D'Amato, 2008a; Stake, 2010). Lincoln and Guba (1985) suggested the use of external audits or inquiry audits to check for consistency within the findings. A part of the inquiry audit is to have an outside individual review the process of gathering and transcribing the data (Lincoln & Guba, 1985). This allowed for checking the process for accuracy and summarizing of the findings.

Conformability

Conformability is the extent to which the results are to the participant's intent of the discussion (Plummer-D'Amato, 2008a). The goal is to ensure I am reflective and have not influenced the results of the information (Breen, 2006). Breen and Plummer-D'Amato asserted the researcher is to be aware of his influence over the discussion and

the ideas presented. I was mindful how the questions were asked including nonverbal cues such as tone, voice, and use of encouragers to avoid influencing the participants to either change their ideas, conform to the group ideas, or to disengage in the discussion (Breen 2006; Stake, 2010). To address conformability, I disclosed my background to participants and used the same tone of voice and encouragers during the interviews (Plummer- D'Amato, 2008a) as well as provided a detailed review of the decision-making process.

Another method for addressing conformability is by using audit trail. The use of an audit trail provides a step by step record of the development and assessment of the findings (Lincoln & Guba, 1985). A detail account of the steps taken in the process from the gathering of the raw data, to data transcription, to data reduction to category development to the process are provided in Chapter 5 of this study. Utilizing this method provided a clear record of the process. This information is kept in spiral notebook and in manila folders labeled according to the step. All materials pertaining to the research data and findings are maintained in a locked cabinet in home office.

Ethical Procedures

My ethical procedures for the study and for protecting the participants were two-fold. I obtain approval from Walden's IRB and followed the Walden's IRB guidelines for conducting doctoral research as well as state and federal guidelines. The one-to-one interviews were conducted for each participant via the FreeConference teleconference system which recorded each conversation. The scheduled interview day and time were

according to the participants availability. The interview was conducted via telephone and minimal interruptions occurred.

To reduce potential ethical concerns, the strategies outlined below were implemented. Moustakas (1994) asserted researchers are to ensure the participants understand the agreement to participate in the research, the informed consents, nature and purpose of the research as well as the collection and analysis of the data. First, I introduced myself as the researcher and explained the goal of the research was to explore experiences of de-escalation strategies in juvenile correctional facilities. Second, I reiterated the personal information gathered from the participants will be confidential and would not be included in the study. I explained the individual's responses to the interview questions will remain confidential. I confirmed the information in the consent form with each participant before I began the interview and reminded the participant of use of audio-recorder to capture responses. The participant had an opportunity to ask questions about data collection and data analysis. I checked with each participant regarding the signed the informed consent form before start of the interview and received a signed copy of the consent form. I reminded the participants that participation is voluntary, and they may resign from the study at any time without any penalty. I also informed each participant that he/she can refuse to answer any question and at any time discontinue their participation in the study.

Third, I used the same format to start each interview by asking the same question: How do you define de-escalation strategies? Lastly, I conducted the interviews in a conversational manner using open-ended questions (Breen 2006; Moustakas, 1990;

Walker, 2016). As a result, the participants were provided an opportunity to ask questions to clear up any misconceptions in the responses. The participants were provided an opportunity to review and correct any information that was inconsistent with their experiences of the phenomenon.

Audio, electronic, and written information will be kept in a secured locked cabinet in my home office for five years after the conclusion of the research. The data is stored on my password-protected laptop in my locked private home office. The audio-recordings, interview transcripts, and other interview materials will be kept for five years beyond the close of the study. After five years, the all interview materials will be destroyed by records Destruction Company.

Inform Consent

Each facility participant received the consent form before the study was conducted. Participants were informed the data collected from this study was used for research only, the information gathered is kept confidential and the researcher is the only person who has access to personal information. The participant's information is stored in a locked box located in a locked file cabinet in my private home office where I am the only person who has access to both the locked box and file cabinet. No information was collected from individuals who did not complete the consent form.

A participant will only be permitted to participate in the study upon agreement to the terms stated on the consent form. The participant wrote "I consent" on the e-mail to agree to participate in the study. The staff member will reply to this email with the words "I consent". The participants were provided the information stating that they may drop

out of the study and choose not to complete the interview at any time. No adverse events occurred during the interviews that required reporting to a supervisor or completing agency paperwork of the event.

Summary

In Chapter 3, several qualitative methods were discussed to determine the best method to conduct this study. The focus of this study was to explore the experiences of direct-care officers' use of de-escalation strategies as a means of creating safer living juvenile correctional environments. The best method to gain this insight from the direct-cares officers was the phenomenological method.

In this chapter, I reviewed the process for gaining approval to conduct the study from Walden University as well as DJJ Agency. The criteria for selecting the participants were outlined. The consent form was reviewed as well as the process of scheduling the participant interviews.

I reviewed the qualitative methods for conducting and analyzing the research information. The reasons for conducting one-to-one interviews were outlined as well as a preview of the interview questions as they pertain to the research question. The data collection included researcher notes and use of the electronic audio-recording device during the meetings. The data analysis was conducted using axial coding method. The two-phase process included color coding of key phrases and ideas and synthesizing of themes into major headings. Ethical Protection and Issues of Trustworthiness are discussed.

In Chapter 4, I reviewed the results of the themes from the findings of the interviews. The findings are presented in a detailed manner based on the Moustakas analysis of the transcribed interviews.

Chapter 4: Results

This study was conducted to examine the lived experiences of direct care officers' use of de-escalation strategies in juvenile correctional facilities in the GADJJ.

Historically, juvenile correctional officers are the first responders to critical incidents with youth in their care. The purpose of this phenomenological study was to examine and to understand the lived experiences of direct-care officers' use of de-escalation strategies for managing violent and disruptive behaviors in juvenile correctional facilities. The study focused on the overall perceptions of direct care officers' definition of de-escalation strategies, basic training experiences, the purpose of de-escalation strategies, describing their use, any issues encountered when using strategies, as well as assessing their level of confidence when using de-escalation strategies. The research question used in this study was

1. How do juvenile correctional officers perceive and describe their experiences using de-escalation strategies in resolving critical incidents among juveniles remanded to correctional facilities?

The analysis in Chapter 4 derives from the lived experiences of 9 direct care workers currently employed by the GA D JJ. The interviews were conducted between November 2017 and January 2018. The GA DJJ granted permission to serve as the site partner for the study.

The research results are presented in four sections. The first section is the setting. This section describes the personal or conditions that may have influenced the participants perception of the research topic. The next section is demographics. The third

section describes the data process and collection. The last section outlines the data analysis. Following the data analysis section, evidence of trustworthiness is discussed and is followed by the results section addressing the research question. The last section includes the summary of the collective findings from the research question.

Setting in Juvenile Correction

During the time of the interviews, no specific incident occurred in GA DJJ that may have influenced the participation in the interview. However, Georgia has implemented a series of juvenile justice reforms. Georgia Governor Nathan Deal extended a special council on Criminal Justice Reform to include a review of the Juvenile code. The Special council made recommendations guiding the new codes and reforms for juveniles (JustGeorgia, 2013). The recommendations are divided into nine articles that address the definitions of key terms such as child abuse, child neglect, and children in need of services, as well as juvenile codes in the areas of judicial assessments, alternative detention, judicial court administration, access to courts and hearings codes (JustGeorgia, 2013).

By defining, Children in Need of Services (CHNS) as children who are unruly, the Commission limits the types of crimes and behaviors that are detainable to correctional facilities (Swift, 2013). Low level offenses such as misdemeanors and status offenses are better served in the community rather than detention facilities. As a result, the Special Council recommended that low level offenders be serviced in communities with appropriate services instead of detention courts where the youth could negatively be impacted by higher-level offenders (Swift, 2013). With the implementation of the

Juvenile Justice Reform recommendations for Children in Need of Services, fewer youth with lower risk behaviors are admitted to juvenile correctional facilities. With fewer lower risk youth being remanded to facilities, correctional environments tend to have more youth with medium to higher risk behaviors.

The implementation of Juvenile Justice Reform impacted the type of youth admitted to correctional facilities and how direct-care officers interact with negative and disruptive behaviors. The impact of interacting with these youth increases the chances that direct-care officers will respond to disruptive situations by using therapeutic strategies, specific to de-escalation strategies. Participants in this study discussed the impact of how higher risk behaviors and disruptive situations increased the number of times they used the therapeutic strategies, their perceptions of therapeutic strategies and their ability to successfully utilize these strategies.

Demographics

Characteristics of Participants

Nine direct care officers voluntarily participated in this study. The participants were identified as Participant 1 – Participant 9. Five male direct-care officers and four female direct-care officers were interviewed. The participants' ages range from 33-56 years with largest number of participants indicating their age range from 33-40 years old. The participants range of years of employment at GA DJJ is 5 to 25 years with an average of 11.7 years. The demographic information of the participants' ethnic group, number of years employed at GA DJJ, and job titles is in Table 1.

Table 1

Table 1 Demographics of Participants

Participant	Ethnic Group	Years of Employment	Job Title
Participant 1	Caucasian/White	5	Lieutenant
Participant 2	Black/African-American	20	Captain
Participant 3	Black/African-American	5	Sergeant
Participant 4	Caucasian/White	8	Lieutenant
Participant 5	Caucasian/White	10	Lieutenant
Participant 6	Caucasian/White	8	Sergeant
Participant 7	Black/African-American	25	Lieutenant
Participant 8	Black/African American	15	Lieutenant
Participant 9	Black/African-American	10	Sergeant

Process of Data Collection

Type of Data Collected

Once the Department of Juvenile Justice gave approval to conduct the research project in their correctional facilities, I received approval from Walden's University IRB to proceed with the research. To invite potential participants, I posted the approved participants' flyer in the breakrooms and on bulletin boards in the correctional facilities. The flyer included a brief description of the research study and my contact information. Originally, the flyers were posted in two facilities in Central Georgia area. In addition to these facilities, additional flyers were posted in three more facilities in central Georgia. A total of 20 potential participants contacted me about participating in the study. As individuals contacted me, I e-mailed them the participant invitation letter (Appendix D)

outlining the research purpose, as well as the demographic question (Appendix E). Once a direct-care officer contacted me agreeing to participate, I forwarded the demographic and consent information to them for review and completion. After receiving the signed consent, I e-mailed the participant the Freeconference.com telephone number and access code along with the date and time of the interview. I e-mailed reminders to the potential participants who contacted to complete the process. I continued this process until nine direct care officers completed the entire interview process.

Location, Frequency, and Duration of Collection

The interviews were conducted via phone using Freeconference.com. The interviews were scheduled during hours when the participants were available. Each participant was given a participant number as an identifier. The average length of the interview was 45minutes. Interviews were conducted over a 3-month period: two interviews in November 2017, five interviews in December 2017, and two interviews in January 2018.

How Data was Recorded

Prior to the beginning of each interview, I reviewed the consent form, the research interview questions and the audio-recording of interview. Each participant was informed they could ask questions and their responses to the interview questions would be kept confidential. The participants were asked if they had any questions prior to the start of the interview. The interview began after confirmation of consent and any initial questions. All the interview questions were asked and answered by each participant.

The interviews were audio-recorded via www.freeconference.com on a secured website. The participants' audio-recordings are stored on the Freeconference.com secured website and in a password protected folder on my password protected laptop. The printed copies of the demographic questionnaire, emails, and transcripts are stored in a file in a locked filing cabinet in my home office. The electronic copies of e-mails are stored in the password-protected folder on my password-protected laptop. All stored electronic data will be deleted, and printed materials will be shredded 5 years after data collection.

Data Collection and Analysis

The audio-recordings were transcribed verbatim and the transcripts were read twice along with the audio-recording to check for accuracy. The transcripts were e-mailed to participants for review for accuracy of the information collected. Nine participants reviewed the transcripts and approved the information captured. Once the participants approved their transcript, I read-through to check for themes. Moustakas (1994) stated the researcher studies the material to garner clear themes and common categories. I read line by line highlighting key phrases related to use of de-escalation. The key words and phrases were color coded. I read through the nine transcripts three more times to ensure that I highlighted all the key phrases related to the research topic. A meaning list, a component of horizontalizing to ensure equal value is placed on key phrases (Moustakas, 1994), was created using the highlighted phrases. I counted the number of times the key phrases occurred on the meaning list. Having read through the transcripts several times, I began to recognize common themes. This made it easier to

cluster the key phrases and words. Using the keywords, the color-coded phrases, and the number of times the key phrases and words occurred, I devised the common themes.

Ten themes were derived from the original meaning list. I continued to review these themes to remove overlapping statements and to consolidate themes into contextual categories. Table 2 consists of examples of key phrases found in the meaning list. Three major themes emerged that reflected the direct-care officers' perceptions of the use of de-escalation strategies in correctional facilities.

Table 2

Table 2 Examples of Themes Derived From Raw Data

<i>Key Phrases</i>	<i>Meaning List Code</i>	<i>Theme</i>
<i>“bringing a crisis or issues down without having to put hands on “</i>	<i>Situation Under Control</i>	<i>Resolving Conflict without Using force</i>
<i>“talk without putting hands on /or use of force”</i>	<i>Use of Force/calm down</i>	<i>Use of words to calm to de-escalate</i>
<i>“get both sides to calm down”</i>	<i>Calm dawn</i>	<i>Use of words to calm Resolve a situation</i>
<i>“Talk to them down instead of physically handling them”</i>	<i>Use of Force</i>	<i>without Using Force Resolving Conflict</i>
<i>“stop it before it starts”</i>	<i>Situation under control</i>	<i>Reduction of Liability</i>
<i>“it reduces liability and keeps people from getting hurt”</i>	<i>Physically hurt</i>	<i>Staff use of de-escalation strategies during incidents</i>
<i>“staff has a good rapport with youth and was to calm youth down.”</i>	<i>Staff abilities</i>	

Evidence of Trustworthiness and Credibility

During the data collection process, I followed the suggested strategies by Lincoln & Guba (1985) for ensuring trustworthiness and credibility in the study. I encouraged participants to elaborate on their responses to the approved interview questions Appendix B.

To ensure the accuracy of the findings, I used the member checking method. After transcribing each interview verbatim, I read each transcript several times to make sure I captured all the themes presented in the interviews. After reading the transcripts, I highlighted and coded the key phrases from the interviews. I provided each participant with a copy of their interview. Each participant reviewed and determined the accuracy of themes and ideas based on their responses. A few minor corrections were made to the themes.

Transferability

In this study, I provided a detailed description of demographic information of the participants and a rich, detailed description of emerging themes from the analysis. From this information, future researchers should be able to determine if the study can be replicated in their setting.

Dependability

During the data collection process, all the interviews were conducted according to the description in Chapter 3. I conducted nine interviews via Freeconferencecall.com. I used the approved interview questions. All Walden University IRB protocols were followed.

Conformability

To ensure confirmability, during the initial contact with participants, I disclosed my background and work history with Department of Juvenile Justice. Each participant received a description of the data analysis process to check and verify key ideas and themes from the interview responses. In addition to disclosing my DJJ work history, I kept a step by step record of the development and assessment of the findings. I provided a detailed description of the transcription of the audio-recording, the process of highlighting, coding, and clustering of the raw data.

Results of Findings

Findings: Identified Themes

In this section, the emerging themes from the nine interviews are discussed. After transcribing verbatim, the transcripts and coding all the data, I identified three major themes that exemplify the phenomenon of de-escalation. The identified themes are (a) staff use de-escalation strategies to avoid use of force and reduce liability of injuries, (b) staff resolve conflicts using their words to de-escalate the youth or the situation; and (c) staff use de-escalation strategies based on their training and perceived level of confidence and effectiveness in the de-escalation strategies.

Theme 1: Staff use de-escalation strategies to avoid use of force and to reduce liability of injuries. The key phrases taken directly from the participants' interviews defines de-escalation and its purpose in correctional facilities. Key phrases are *talk down a situation, use to resolve conflicts, get situation under control without using force, use to prevent use of force, use to limit the amount of physical intervention use, get youth to*

comply without using force, and seeing other ways to get compliance without force. The participants' direct responses support the theme that de-escalation is used to regain control over situation without use of force.

Interview question 1 responses contributed to the theme of staff use de-escalation to avoid use of force. Participant 1 stated "it is something used to resolve an issue without use of force. It is bringing a crisis or issue down without having to put your hands on."

Several participants reiterated the concept that de-escalation is defined as a way to "a way not to use any kind of physical intervention" (Participant 4); "techniques used to prevent use of force" (Participant 6), and "methods used to keep from putting our hands on the youth" (Participant 7). Participant 3 adds "involving one or more person where you are trying to get both sides to calm down" and further described by Participant 8 as "just a way to kinda stop it before it starts." More specifically, Participant 5 stated "it's a way to calm kids down and talk them down without using force" and Participant 9 stated "de-escalation is when you are talking kids down before you have to use force to get them to do what you asked". Participant 2 defined de-escalation as "based on experience is taking situations by using words that is positive with emphasis on reinforcing instructions that are given to the individual I am trying to calm down." Further, Participant 4 stated that "mainly you can use it with verbal skills and even some body language." In this manner, Participant 4 asserted that verbal and nonverbal skills of the officers can either "escalate or de-escalate an incident." The definitions provided by the participants shed insight to their perception of the purpose of de-escalation.

The participants' responses to interview question 3 regarding the purpose of de-escalation contributes to the theme of avoiding use of force and reducing liability of injuries. Several participants indicated the purpose is to "prevent it from getting out of control to calm it down quickly" (Participant 6) and "to get a situation under control before it goes left or right before it out of hand" (Participant 3) as well as "to resolve an issue and to reduce use of force and liability" (Participant 1). Participant 1 further explained "reduce the chances for staff getting hurt physically" while Participant 4 suggested that "limiting the amount of physical intervention that is to be done which can limit injury or pain or injuries to staff. When you have to become physical in any kind of way you run the risk of hurting yourself or those around you." Participant 9 added "for me, de-escalation is about calming kids and people down so that we can keep the incident from going too far and getting out of hand and folks getting hurt."

Several participants' responses support the reduction of liability. Participant 5 stated, "it is to make it safer for everybody for student and staff. Sometimes, going hands-on officers gets hurt and staff are out for long periods of times. Sometimes, when we have to use hands-on, the kids get hurt." In addition, Participant 8 stated, "if there is a way to use calm a situation without having to use physical intervention 'cause it is safer and keeps people from getting hurt, it is just safer. It creates a safer environment when you don't have to use physical intervention. I think it makes the kids feel safer in the environment as well." Participant 7 suggested "purpose of de-escalation I think is to lower the amount of incidents within a facility." Participant 7 also stated "it seems like management is only concerned about the type of incidents and sometimes about the well-

being of others.” The responses from the participants indicated de-escalation’s purpose is to limit the use of force and to minimize injury liability.

Theme 2: Staff resolve conflicts using their words to de-escalate the youth and/or situations. All the participants indicated they use their words to de-escalate incidents in correctional facilities. The key phrases from the interview responses are *using your words or actions, use my words positively, use words to get compliance, using words to achieve our goal and make the situation better through our words.*” In addition to using words, participants also indicated they *talked the them and know how to approach the youth and talk to them.* The responses from the interview questions outlined the description of the direct-care officers’ experiences using de-escalation strategies.

The participants’ specific phrases are *use of words, talking with the youth, and clarifying thoughts.* Responses from Interview question 4 included “using the right words gets the kids to open up and cool down” (Participant 2) and Participant 6 stated “help me retrain my mind to be able to understand the right approach towards the situation.” Specifically, Participant 1 stated “basically just approaching them using a word to calm them or talking to them like a human being.” “I rather talk a youth down instead of going in and trying to use physical force.” Further, participants suggested that youth need time to allow them to say what they need. Participant 7 stated “allow her to vent, listen to her concern, and respond with a calm tone and rate with my voice.” Participant 8 added “My first instinct is to try to work it out through words how to calm down incident.... If, we can, you know, make a situation better through words then that is always my inclination.” Participant 5 asserted “I just listened, just listen” and “I said okay do you feel better? ...

I'm willing to listen." Participant 9 stated "My experience is to talk with the youth first and I try to use words that encourage the youth to talk about their feelings. I will listen to the youth and try to encourage youth." These responses described the participants' experiences with using de-escalation.

Participants' experiences using de-escalation also indicated that sometimes "the youth is not always able to comprehend the instructions given. "He is not able to pick up what is being said "(Participant 5) and as Participant 8 stated "when you have to be like okay we've talked about this and you're still very angry and you are still lashing out." Participant 7 reiterated "unfortunately, you can't expect positive results with everyone no matter how hard you try." Several participants also suggested the youth are unwilling to participate in de-escalating the situation. Participant 3 stated "They don't want to hear its' going to be okay. They just don't want to listen." Participant 1 added "the youth feels they have hit the point of no return... there is no turning back." Participant 2 indicated "we encounter youth who are ramped up and their minds are made up and in essence so they take it to the next level." Participant 6 suggested "you have that one person in a situation... and cannot calm themselves down to reorganize their thoughts." Participant 4 stated "there are trigger words that individuals used that made it worse" and Participant 9 indicated "certain staff members' presence during an incident causes youth to lash out even worse."

The Participants described their observations utilization of de-escalation to resolve conflict. Participant 3 states "staff talked with youth." Participant 7 added "use of correct talking techniques." Participants indicated that "supervisors spoke with the

youth and by using de-escalation he was able to get the object” (Participant 1) as well as Participant 5 indicated “she began to talk with him and calmed him down and got him to the point he went to his room. She really impressed me how she handled that.”

Participant 2 recounted how “a young staff had a good rapport and just a few words with emphasis on positively and positive language and got the youth to comply.” Similarly, Participant 8 described “staff have different styles of rapport. He has an awesome sense of humor and he can come in a room and just, and he can make like one or two comments and just completely quell the incident.” Participant 4 reiterated “he was able to sit down with the youth and he was always able to find a way to relate to the youth and say that he understood the youth -but this wasn’t the way to go.” Participant 9 suggested “watching a supervisor talk a youth down and be sincere while doing it showed me the importance how I use my words and even the tone of my words make a difference in getting the youth to comply.” The participants’ encounters and experiences support the use of de-escalation strategies to resolve conflicts.

Theme 3: Staff use de-escalation strategies based on their training, their perceived level of confidence and effectiveness in de-escalation strategies. The participants’ key phrases of *learned to use words to make positive impact, learning to reflect and ask the right questions, ability to gain trust by talking with them and practice using positive body language calms a situation, having a good rapport with youth* as well as *having the ability to talk to youth calms the situation* described the training and the level of confidence in the use of de-escalation strategies. The responses from interview

questions 2, 6, and 8 are how staff perceive their ability based on their training and confidence level to use de-escalation strategies in critical incidents.

All the participants discussed how their basic and subsequent trainings prepared them to use de-escalation strategies when working with youth. “My basic training taught me how about my approach, listening skills and the posturing in attempting de-escalation.” (Participant 7). Participant 1 stated “I went through different trainings like verbal judo or interpersonal communication on how to handle different situation.” Both Participants 8 and 9 discussed receiving training in “motivational interviewing”. Specifically, Participant 8 stated “motivational interviewing helped a lot to be able to say back to them what they said and to realize the youth knows we are listening to them.” Participant 9 added, “I learned how to ask the right questions using what or how or tell me instead did you or do you. I learned I get more information from the kid that way.” Participants indicated “I learned how to talk down a youth” (Participant 3) and “to reorganize my thoughts and think about what the person is going through” (Participant 6). Participant 2 stated

We learned to take their words ... and come back with something little more positive than what they are saying. Hopefully, to get them to clarify or to understand what is needed to get them to do what we need without using physical force.

Additional trainings courses enhanced the participants’ skills. Participant 4 stated “each training has a got a bit that adds to it between the management classes and the leadership classes and the Sergeants course everything like that they all build off each

other and give insight to the person that you are how to talk with the people around you.”

Participant 5 added

I have been in the business for 35 plus years and I remember in the old days our idea of dealing with a conflict was beat down. I learned over the years and through trainings going from one side of the spectrum to the other. I like the other side better which is basically talking them down instead of physically handling them.

The participants stated the basic trainings helped them to use de-escalation strategies in critical incidents.

Participants discussed the effectiveness of and their level of confidence in the use of de-escalation strategies. “They are very effective, a positive way gain trust and respect as most of the residents have trust issues” (Participant 7). Participant 1 stated “The practicals helps to train how to handle different situations. They work because it enables you to calm them down, and it helps to them to know we can work with them and find other options.” Participant 4 added “They can be extremely effective. Anytime, we don’t have to use physical intervention and run the risk of injury of a youth or ourselves, I think that is awesome. We can see there are other ways to get compliance.”

Other Participants indicated the effectiveness of de-escalation skills depends on a variety of factors. Participant 6 explained “If it is done correctly and the proper words are used it can be very effective and if you are articulate the situation it can be helpful. Participant 3 added “it is effective to see how staff is able to lower their voices, change their approach, and everybody using the same skills on the same page.” Participant 5

stated “It depends on the individual. It depends on the officer and their ability to understand what they are trying to do and how they are trying to say it.” Participant 8 further discussed

For the most part they are very effective. We need to know our youth and we need to know when it is time to move to the next level. We need to know which youth it is most effective with and which ones it is not. Staff have to believe in the de-escalation strategies. We have staff that don’t believe in the de-escalation and want to go straight to physical force. In this case, it does not work.

Participant 9 stated

Any technique is only effective if you know how to use it. I think it is effective in most situations. However, some of our girls just will not listen to staff who seem unsure about what they are saying or doing. I don’t have this problem. I mean sometimes de-escalation works and sometimes it does not.

Participant 2 explained: “It’s successful when you use the right words and have the right rapport with youth. In this job, you can’t take it personally and you can’t use words that will antagonize or degrade youth.” Participant 5 concluded “some people have good verbal skills and it depends on the individual whose talking and how they apply it.” The participants’ perception of the effectiveness of de-escalation in critical incidents depends on the individual and their understanding to use the strategies.

Participants described their level of confidence as *still learning, continually learning to use my words positively* and *confident that as I remain calm they’ll be calm*. Several Participants have a high level of confidence. “I have a high level of confidence. I

have experience in the business for 35 years of dealing with different types of personalities and I am able to calm them down” (Participant 5) and Participant 4 stated “my level is pretty high. I have stepped in and got a situation resolved using my skills.” Participant 2 also stated “I am quite successful in talking with the youth. So, we got to take the time to talk.” Participant 1 answered “I would put myself at an 8. There is always room for learning, more training to use my words positively to de-escalate a situation.” Participant 7 replied “I feel like I level of confidence is at 6 or 7. I have more to learn.”

Several Participants stated their level of confidence are average to above average. Participant 8 stated “I am pretty good at it. I use it more often than I use physical force”. Participant 9 added “I am good at it-above average but a lot of room to grow”. Participant 5 stated “I am little bit over medium. You know there is room for improvement and the more you do it, I feel the better-the more proficient you’ll get at it.” Participant 6 conceded

I am a work in progress. It seemed a little soft to me. I realize that if I was going to be conflict solver that for me I needed to redirect my way of thinking. Using this and knowing that I have complete control over the situation...has really built up my confidence to think it is effective.

The participants’ basic training and experiences formed their perceptions regarding their level of effectiveness, and confidence when utilizing these strategies in critical incidents.

Disconfirming Findings

The purpose of this study was to explore the lived experiences of direct-care officers use of de-escalation strategies in juvenile correctional facilities. The participants’

responses suggested a few conflicting messages with other participants' responses as well as within their own responses. For example, one participant stated they felt very confident with using the strategies even though their initial perception of the use of de-escalation strategies was that using the skill takes time and effort. Another participant stated they use the de-escalation skills only after they determined it was a needed skill as a first responder. Two participants stated de-escalation strategies are effective; yet, the level of effectiveness depended on the individual's skill level, willingness to use, and their belief in the strategies. One participant suggested that de-escalation strategies does not always work with some people or in some situations. All the participants indicated de-escalation strategies are not always used first when breaking up fights or major disturbances; however, the strategies are more likely to be used when following-up with the youth(s) involved in the incident.

Summary and Findings

The participants were interviewed to explore their perceptions of the definition, purpose, issues encountered, level of effectiveness, and confidence in the utilization of de-escalation strategies in critical incidents. This chapter reviewed the results of the data collected from the nine participant interviews. The results indicated staff utilized de-escalation strategies to avoid the use of force when intervening in critical incidents as well as staff use positive words to resolve conflicts. Further, the results indicated staff's perception of their ability to use de-escalation strategies determines the use of de-escalation strategies. A discussion of the interpretations and conclusion of the research findings is in Chapter 5.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The research study was conducted to add to the existing literature by examining the lived experiences of juvenile direct-care officers' use of de-escalation strategies in juvenile correctional facilities. De-escalation strategies are used to assist officers with solving conflicts by using non-violent strategies to gain compliance (Olivia, Morgan, & Compton, 2010; Tully & Smith, 2015). A phenomenological approach was used to fill the gap in the literature by determining the perceptions of juvenile direct-care officers use of de-escalation strategies in critical incidents. The data provided from the participants' interviews will enhance the literature available. The findings are based on the nine direct-care officers' interviews about their experiences. The participants' responses were audio-recorded, transcribed, verified, and analyzed for themes.

The nine participants were interviewed about their lived experiences of use of de-escalation strategies in critical incidents in juvenile correctional facilities. Three major themes emerged from the interviews as addressed in Chapter 4. The themes revealed (a) staff use de-escalation strategies to avoid use of force and reduce liability of injury, (b) staff resolve conflicts with use words to de-escalate the youth or the situation, and (c) staff's use de-escalation strategies is based on their training and their perceived level of confidence and effectiveness in de-escalation strategies. Juvenile direct-care officers in this study appeared to experience de-escalation strategies as a viable tool to avoid use of force and to resolve conflicts. The results revealed the experiences of using de-escalation

strategies allowed the participants when interacting with potentially aggressive and disruptive youth behaviors to maintain and regain control over critical situations.

Interpretation of Findings

In this qualitative study, I examined juvenile direct-care officers' perceptions of use of de-escalation in critical incidents in correctional facilities. The direct-care officers perceived that de-escalation strategies are important to maintaining control and receiving compliance in a critical situation. The participants perceived the purpose of the use of de-escalation is to keep and/or get a situation under control with using the least amount of force needed. The participants indicated that using de-escalation strategies helped to keep the youth calm and allowed for officers to talk down a situation without physical intervention. In this manner, participants suggested the successful use of de-escalation strategies assisted in reducing the risk of youth and staff injuries from use of physical interventions as well as making the environment feel safer for everyone. Even though, all the participants indicated the use of de-escalation is an important strategy for avoiding use of force, they also indicated that de-escalation is not always the initial strategy to use when a situation has risen to the level of a physical fight or major disruption. Overall, the general attitude of the direct-care officers' perception was positive for use the de-escalation strategies.

The participants indicated using words and encouraging the youth to talk about their concern(s) is very important when responding to potentially aggressive situations. The participants' descriptions of the use of de-escalation worked best when staff use positive and calming words during interactions with aggressive and disruptive youth. The

use of calming words also included having a calming demeanor and non-threatening body language. Two participants described using appropriate voice, tone and viewing the situation from the youth's position are important to de-escalating a situation. Six of nine participants indicated de-escalation strategies helped them to find ways to relate and to build a positive rapport with the youth. Three participants also stated knowing the youth helped to determine when words are no longer working to achieve the desired goal. In this manner, the participants suggested using de-escalation strategies is not as effective when the youth is not listening and is ready to fight. Overall, the rich-detailed descriptions revealed the use of positive words, nonverbal communication skills, and building positive rapport with youth assisted direct-care officers with resolving critical incidents.

The findings also revealed the direct-care officers' perceived confidence level and their beliefs are based on their training and observations of the use of de-escalation strategies in critical situations. Verbal Judo and Interpersonal communication skills are the training courses used to teach de-escalation strategies in the organization. The participants indicated they learned and practiced the techniques during class and in scenario-based situations. The participants suggested the more they used the techniques and strategies in real-life situations the more they felt confident in using the strategies. Participants also indicated more training sessions are needed to keep their skills sharp. For some, their level of confidence increased when they witnessed others successfully utilizing the skills. One participant stated he learned more from watching the supervisor use the skills in different situations than when they practiced the skills. Notably, two

participants indicated witnessing a direct-care officer's poor choice of words and intimidating stance helped them to learn what not to do during a critical situation. The participants indicated the effective use of de-escalation is based on the individual's ability to formulate and articulate the information to the youth in a nonthreatening and disrespectful manner. The direct-care officers' use of de-escalation strategies is determined by their capacity and level of confidence to the use de-escalation strategies.

Conceptual Considerations

According to the SLT, staff who witness the positive use of strategies are more likely to use the same strategies when they encounter similar issues (Nelson et. al., 2009). The consensus from the participants in this study demonstrated SLT concepts are correct. Direct care staff were more likely to assimilate and utilize strategies when they witnessed successful use of strategies. By observing supervisors and peers successfully utilizing strategies in critical incidents, officers used similar strategies in the critical incidents. The participants' perceptions of the effective use of de-escalation strategies is also based on the observances of peers' utilization of de-escalation strategies to regain and maintain control in critical situation in juvenile correctional facilities.

When individuals continuously use de-escalation strategies, they build positive relationships with youth which increases opportunities to create positive interactions, safe and caring environments (Marsh et al., 2010). Based on the findings in this study, the use of de-escalation strategies within juvenile correctional facilities were to maintain control over critical situations, to redirect aggressive and potentially violent behaviors, and to calm youth down using positive verbal communication skills. The participants indicated

the building of positive rapport with the youth allowed them to use the strategies to keep the situation/behavior from getting out hand and to make the environment safer for everyone.

Staff develop self-efficacy in tasks through repeated meaningful and fruitful experiences when using that task (Di Giunta et al., 2012; Marsh et al., 2010; Newton & Bussey, 2012; Price & Baker, 2012). The participants stated as they used the strategies in a variety of situations, their level of confidence increased in using de-escalation strategies. The participants' perceptions support the self-efficacy concepts. The participants' level of confidence ranged from extreme confident to average confident to below average confident. One participant stated they were below average in their level of confidence as this was due to their initial view of de-escalation strategies as being a soft skill. Yet, all the participants indicated their level of confidence increased as they continued to engage in the utilization of de-escalation strategies. Participants suggested more trainings with face to face scenarios will continue to sharpen their skill set.

The literature review indicated current best practices is moving towards using least amount of force necessary to resolve critical situations (Boyd, 2008; Olivia, Morgan, & Compton, 2010; Tully & Smith, 2015). The decision to use physical force intervention should be the least amount of force needed to gain compliance or regain control over the situation (GA DJJ, Policy 3.80). If an officer uses unnecessary force to gain compliance or control in the situation, then injuries or death may occur (Rembert & Henderson, 2014). Based on the participant's responses, one of de-escalation's purpose is to reduce use of force and injury- liability for youth and staff. The responses also support

the DOJ's stance on use of force and the request to use therapeutic strategies to create safer living juvenile correctional environments (Rosenbloom 2010). The findings will add to the current literature that participants' lived experiences support the use of de-escalation strategies as the least amount of force needed to resolve conflicts in juvenile correctional facilities.

Staff perceptions of use of de-escalation maybe impacted by mid-level supervisors and/or peers views and implementation of policies and procedures. The willingness to implement new policies maybe met with challenges from mid-level managers and direct-care line staff especially if the policies are misunderstood and deemed difficult to implement Chang et al. (2014). Perceptions from this study participants support that supervisors and managers' attitudes toward and their willingness to use de-escalation impacted an officer's willingness to implement the strategies. Several participants indicated if the staff member did not believe in the skill they were less likely to use the skill as well as if officers did not understand and/or have confidence in the skills, then they are less likely to use them effectively. Tummers et al. (2012) asserted the attitudes of managers impact how others implement the policy. Participants also commented that if supervisors were reluctant to use the skill or if the supervisor stated the strategies did not work on our kind of youth, then direct-care officers were also reluctant and/or acted in a manner that supported the stance of the supervisor. The perceptions from the participants support the concept of the attitudes of mid-level supervisors' perception towards policies and procedures implementation impacts the how well direct-

care officers understand and utilize new procedures as utilizing de-escalation as first defense in resolving conflict.

The literature review indicated that little to no research explored the lived experiences of juvenile direct-care officer's use of de-escalation strategies to create safer environments in juvenile correctional facilities. I examined the lived experiences of juvenile direct-care officers use of de-escalation strategies to assist with closing the gap in the literature. The findings also assist to build upon the existing literature of using de-escalation strategies as means of increasing safety within juvenile correctional settings.

Limitation of Study

A limitation in this study is social desirability to answer questions appropriately. I was careful to use the approved protocol regarding trustworthiness by using the approved interview protocols. I asked the questions in a manner to minimize the risk of asking leading questions and allowed the participant to freely respond. Each participant reviewed the transcript from their interview for accuracy. The participants provided rich details of their experiences using de-escalation strategies in juvenile correctional facilities.

Recommendations

The study's results could be generalized to different juvenile correctional settings in states with similar juvenile justice systems. Recommendations include extending the sample group of participants to various job positions within the juvenile correctional facilities. In addition to juvenile correctional direct-care officers, facility workers also include counseling, educational, recreational, mental health, and medical personnel from

nurses to doctors who interact with the youth daily. It is possible these workers have used de-escalation strategies in similar situations. It may be of interest to explore these facility workers' lived experiences of the use of de-escalation strategies in juvenile correctional facilities. It may also be of interest to compare the findings from the lived experiences of direct-care officers and other facility workers for common themes.

In addition, participants indicated that based on their trainings, staff should have the capability to use the strategies; yet, some workers do not appear to use or believe in the de-escalation strategies or have strong communication skills. These factors may contribute to a person's confidence and willingness to consistently use the de-escalation strategies. A future researcher may explore their lived experiences to glean insight of their use of de-escalation strategies and /or conduct a case study to determine if facility assignments impact direct-care line officers' perception of the use of de-escalation strategies.

Implications for Social Change

The implications for organizational change are the ability to create proactive and therapeutic environments rather than a reactive and punitive juvenile correctional facility environment. The results from this study indicated the use of de-escalation strategies are an effective method for deterring aggressive and violent behaviors within juvenile justice correctional facilities. It is possible the consistent reliance upon therapeutic strategies such as de-escalation may become the first line of defense. Direct-care officers will begin to rely on their verbal judo and interpersonal communication skills more than relying on their hands-on physical intervention techniques. This reliance on therapeutic

techniques may become the norm in facilities for handling aggressive and disruptive situations instead of the exception. As a result, facility administrators may notice an increase in the use of the least amount of force necessary (staff presence and verbal strategies) to resolve a conflict. With the increased use of positive verbal strategies, a decrease in the number of special incidents involving aggressive behaviors will occur. The increased use of therapeutic strategies will contribute to creating safer living environments in juvenile correctional facilities.

Positive social change is affected when the staff uses de-escalation strategies to build positive relationships with youth. The officers are better able to redirect negative and aggressive behaviors without using punitive measures and thereby creating and reinforcing positive and safer environments. The creation of positive and safer environments, as Jolivette and Nelson (2010) asserted, allow staff and youth to feel safe in their environment where youth can learn better problem-solving and decision-making skills. With the increase of direct-care workers building positive rapport with youth, youth may begin to view people in authority in a less threatening manner. Youth may also begin to see how de-escalation strategies can be used to problem solve in their situations in all areas of their life. The youth's ability to successfully use these strategies in their communities contributes to their ability to become law abiding and productive citizens achieving the missions of juvenile justice systems.

Designing effective and applicable training programs for direct-care officers is another an implication for positive social change. The participants' responses suggested direct-care line officers who demonstrated an ability to understand and apply the concepts

tended to de-escalate youth behavior and/or situations quicker without utilization of force and causing injury. The responses also suggested that confidence level increases with continued practice of using the de-escalation strategies in facility situations. The implication from the participants' responses is to increase the number and types of true-to-life training scenarios involving de-escalation strategies throughout the training courses offered to all levels and positions of staff.

With this type of training, managers and supervisors will continue to enhance their therapeutic skills, and with their consistent use of the de-escalation strategies in all interactions, managers can affect cultural and therapeutic changes within the juvenile correctional facilities. The managers and supervisors have the potential to influence the direct-care officers' perceptions of the use of therapeutic strategies and to encourage the direct-care workers to utilize the de-escalation strategies with youth in all situations. The Training Departments' managers can weave de-escalation principles throughout each training course beyond basic training course. For example, nontraditional training resources such as simulated scenarios can be included in training curriculums. Simulated scenarios through use of gaming technology or online training platforms can provide scenarios for direct-care officers to practice using de-escalation strategies in critical situations. This will allow direct-care officers to become proficient in using de-escalation strategies. With the right training programs, managers can begin to track an individual's progress with using the strategies as well as determine their areas of strength and weakness when using the strategies. This information may provide insight where the gap exists from training to application by officers. Managers and trainers can now begin to

focus on providing site-specific or agency-specific trainings to enhance successful utilization of de-escalation strategies by officers in a facility or agency-wide. With increased use of non-traditional facilitation of training courses, agencies can foster the therapeutic culture they desire through providing blended or out of the box training sessions that will prepare workers in therapeutic strategies. Further, the implications may suggest the creation by human resources managers similar programs to foster a culture of hiring and retaining workers who are proficient in de-escalation strategies

Conclusion

In this study, the lived experiences of the direct-care officers supported de-escalation strategies as an effective method to assist with creating safer environments for remanded juveniles. The direct-care officers interviewed for this study provided rich and detailed descriptions of their use of de-escalation strategies to deter and redirect aggressive youth behaviors. The participant's responses supported and built upon the current literature in the medical and mental health fields where de-escalation strategies are routinely used to with aggressive and violent situations. The participants were confident in their abilities to successfully utilize de-escalation strategies in critical incidents as well as reverted to using de-escalation strategies as the least restrictive measure to gain compliance. According to the findings, creating safer living correctional environments are attainable when agencies and organizations begin to increasingly rely on the use of a de-escalation strategies as the first line of defense in critical situations.

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Appendix A: Interview Questions Protocol

- Interview Question 1: How do you define de-escalation strategies?
- Interview Question 2: Describe how your basic training experience in de-escalation strategies prepared you for resolving conflicts.
- Interview Question 3: What do you think the purpose of de-escalation strategies is within correctional facilities?
- Interview Question 4: Please describe your experiences using de-escalation skills.
- Interview Question 5: When using de-escalation skills, what issues have you encountered?
- Interview Question 6: Tell me how effective you believe de-escalating strategies are during an incident?
- Interview Question 7: How effective do you feel de-escalation help with preventing potentially violent and aggressive incidents?
- Interview Question 8: Tell me about an incident where you witnessed another staff successfully utilizing de-escalation strategies during an incident.
- Interview Question 9: Assess your level of confidence in utilizing de-escalation skills to redirect potentially disruptive incidents.

Appendix B: DJJ Research Application

Submit requests to:
DJJ Research Review Committee:

I. Submission Type:

- New Protocol (*study never performed at DJJ*)
- Renewal (*study previously approved by DJJ Research Review Committee*)
- Modification (*study previously approved by Research Review Committee, has been modified from approval*)

Type of Modification: Consent Change Protocol Personnel
 Other (specify): _____

II. Study Type (Select all that apply):

- Data Request not including Personal Identifiable Information (PII)
- Data Request including PII
- Data Request including PII reassigned randomized unique identifiers
- Survey Research of Youth
- Survey Research of Others. Specify _____
- Interview Research of Youth
- Interview Research of Others. Specify _____
- Focus Group with Youth
- Focus Group with Others. Specify _____
- Other Research Methodology. Specify _____
- _____

III. Documents Attached:

- IRB Approval Letter or IRB Modification Approval (required)

Conditional IRB Approval Letter (accepted only by discretion). Explain Circumstances in XI.

- Research Protocol (required)
 Research Summary (required)
 Data Collection Form, if applicable
 Informed Consent Form, if applicable

IV. Study Information:

Title of study: _____

Goal of study: _____

IRB approval obtained from: _____

IRB expiration date: _____

V. Principal Investigator: *(person noted as Principal Investigator in the IRB approval notice)*

Principal Investigator's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Alternate Phone #: _____ Fax #: _____

Email: _____

VI. Funding: *(DJJ does not provide funding for research)*

Funded? Yes No Pending

Source of Funding (if applicable):

VII. Data Collection:

How will data be collected?

Will a data collection form be used? Yes (attach form) No

VIII. Risk:

Possible risk to youth:

IX. Benefit:

Benefit to youth or the Department:

X. DJJ Resources or Impact on Operations:

Resources required:

Impact on Operations: Minimal Medium High

Describe Impact on Operations:

XI. Supplemental Information: *(provide any relevant information or explanation here)***XII. Signatures:** *(by affixing your signature, you certify that all the information is accurate)*

Principal Investigator's Signature:

Date: _____

Appendix C: Recruitment Flyer

Participants Wanted... For a research study
exploring.....
De-escalation Strategies use in Correctional
facilities.



I am looking for adult volunteers to participate in a research study exploring the experiences of using de-escalation strategies within correctional facilities. This research study is a part of my Walden dissertation.

Participant Criteria:

- Must 18 years or older
- Must have worked in DJJ facilities for at least 18 months
- Must have completed Basic Juvenile Correctional Officer training.

Qualifying volunteers will participate in a teleconference answering several questions pertaining to their experience in using de-escalation strategies in responding to youth inappropriate behavior.

Date and times for interviews are flexible.

Appendix D: E-Mail Invitation

Hello,

I am a doctoral candidate at Walden University. I am inviting you to participate in a doctoral research study about the experiences of Correctional Officer's use of de-escalation strategies in juvenile correctional centers and the perceived safety and increase of therapeutic environments. This study may be of interest to you as I seek to understand the direct-care offices' lived experiences when using de-escalation strategies.

Your participation in this study is completely voluntary. You are free to refuse to participate in the study. If you agree to participate and later decide that you do not wish participate then you can leave the study. Choosing not to participate will not affect your relationships within the agency. Choosing to participate in the study will require you to meet with me to share your experiences. A one to one telephone interview will take place using the FreeConference System. The interview should last no more than 90 minutes. During the interview, you will share your experiences regarding the use of de-escalation strategies inside the correctional facility. Your answers will be audio-recorded per your permission and the responses will be kept confidential. I will be the only person to see to your answers. Your name and personal information will not be written in the interview or in the results.

If you are interested in participating in this study, please read and complete the attached Consent Form and Demographic Information Sheet. The Consent form provides additional information pertaining to the study and confidentiality of your information. If

you agree to participate, please respond to this email typing “I consent”, completing, and attaching the Demographic Information. Please include a good contact number where I can contact you to schedule a date and time for the interview.

Thank you for your time and consideration. I hope that you will participate in the study.

Walden University
Researcher

Appendix E: Demographic Information Questionnaire

Thank you for agreeing to participate in this research study. The goal of this study is to collect information about line staff's perception of de-escalation skills use in minimize potential violent and disruptive incidents in the correctional living environment. Please follow the survey link below to complete each item. Please do not leave any items blank.

Your responses are anonymous and confidential. Thank you for participating.

The questions on the survey link are below.

1. What is your gender?
Male
Female
2. What is your age range?
18-24
25-32
33-40
41-48
49-56
57-64
65+
3. What ethnic group do you describe yourself as primarily belonging to?
Caucasian/White
Black/African American
Hispanic
Native American
Asian
Other- Please Specify
4. What is your job title?
5. How long have you worked for this organization?