

# A Qualitative Study to Explore the Lived Experiences of Caretakers Working in Observation Homes at Selected Districts of Western Maharashtra.

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## Article History

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**Abstract:** The purpose of this study is to explore the lived experiences of caretakers working in observation homes in selected districts of Western Maharashtra. Method: A Qualitative approach and phenomenological descriptive research design were used. Saturation of data was achieved with 10 samples. The cluster sampling method was used, and observation homes were selected from the Kolhapur and Sangli districts of Western Maharashtra. The data was collected through one-to-one in-depth semi-structured interviews. Results: A thematic analysis was employed using the Colaizzi method to assess the collected data. Based on commonalities within the data, themes and categories were formulated. • Theme no 1: Psychological experiences with sub-themes as stress related to abscondment of children and Challenges for caretakers. • Theme no 2: Work-related experiences with sub-themes as positive work experience, workload and physical fatigue. • Theme no 3: Experience related to work and family, with sub-themes as work-life balance. • Theme no 4: Social experiences with sub-themes as inadequate social interaction and professional identity, and social perception. Conclusion: The participants have more positive experiences than negative. Stress and challenges at the workplace seem higher, as well as workload and inadequate social interactions, were some negative experiences, whereas positive work experiences and good recognition in society show positive experiences. Findings will help in providing mental health services, such as counselling and emotion-focused therapy, to the caretakers.

**Keywords:** Caretakers, Observation homes, Abscondment, Social perception, Emotion Focused Therapy.

## INTRODUCTION

Children are the most valuable and vital national assets. In today's world, children are subjected to psychological challenges as a result of parental illiteracy, ignorance, competition in many fields, extreme poverty, and wealth. If we do not provide them with satisfactory answers, they create fictitious explanations that may be more dangerous than the actual truth. We therefore have the responsibility to mould and shape their current conditions in the best possible way because children have the right to grow up in a healthy environment, and only then will they realize their full potential. According to the Indian constitution, there should be separate detention centers for juvenile prisoners or those under investigation. They are also called observation homes, or remand homes, as they were formerly known<sup>1</sup>. The multidisciplinary teams that work in observation homes are primarily made up of social workers, caregivers, counsellors, psychologists, educators, medical professionals, and security personnel. Employees in monitoring homes should be qualified, experienced, and

certified to deal with juvenile offenders. A positive work environment can foster a vibrant work environment and help to achieve desired goals. Happier employees are 13% more efficient and leads to better results, according to a survey conducted by Oxford University<sup>2</sup>.

A person with lived experience serves as a role model and quickly built trust with beneficiaries from the perspective of someone who has been in a similar situation. Yet, people with live experiences face many obstacles in order to gain entry and progress into the workforce<sup>3</sup>. In today's work environment, most workers must choose their own workplace in order to thrive in a more flexible work environment and family constraints. These are crucial in protecting the rights of a young offender, who ensure that they are not endangered or treated unfairly. In addition, they are rehabilitated and integrated into society in observation homes<sup>4,5</sup>. The term "job burnout" was first introduced to describe the detrimental effects of work-related exposure to a wide variety of challenging situations faced by human services workers<sup>6</sup>.

Studies on the experiences of caretakers working in observation homes are extremely rare. It is necessary to delve deeper into and examine the live experiences of the caretakers employed in the observation homes. It is necessary to identify the views, perceptions, and life experiences of the caretakers employed in the observation homes.

## METHODOLOGY:

A qualitative research approach with phenomenological descriptive research design was used to explore the lived experiences of caretakers working in observation homes. The research was carried out in the observation homes from the Satara, Kolhapur, and Sangli districts. Population of the study consisted of all the Caretakers working in observation homes. The eligibility criteria were the caretakers who are willing to participate in the study and who will give Written Informed Consent, stay for minimum 8 hours/day with children and are able to understand Marathi or English language. The exclusion criterion was the caretakers who do not have experience for more than six months.

The study included 10 caretakers who worked in observation homes as the sample size. Data saturation was reached at the designated sample count. Samples from particular districts in Western Maharashtra were chosen using the cluster sampling method. After an extensive review of literature, referring the books and journals, abstracts, research articles, discussion with guide and through expert opinions the tool was

developed for the data collection. The data collection tool was divided into two sections.

SECTION I: - Demographic data which included age, gender, marital status, type of family, education and experience in caring children from observation homes.

SECTION II: - This section had open ended questions. The questions were focused on experiences related to the psychological strain, experiences related to work, family and social experiences. An audio recorder was used to record the information during one-to-one, in-depth interviews, which served as an information gathering method.

To ensure the content validity of the tool, the tool was submitted to experts. With suggested corrections needed changes were done after the discussion with guide and final tool was prepared.

Institutional ethics committee of Bharati Vidyapeeth Deemed To Be University, College of Nursing approved the research proposal. Permission from the Satara, Kolhapur, and Sangli district authorities of observation homes were obtained to approach the participants to conduct pilot study and main study. Informed written consent was obtained from each participant prior to conducting the study.

The collected data was encrypted, organized, analyzed using descriptive statistics for demographic variables and thematic analysis using Collazis method of analysis to generate themes and sub-themes.

## RESULTS

- Based on the objectives of the study, Analysis and explanation of the results are arranged under the following headings:
- Section I - Frequency and percentage of demographic variables
- Section II - Analysis and interpretation of the themes and sub-themes

TABLE No. 1: FREQUENCY AND PERCENTAGE DISTRIBUTION OF DEMOGRAPHIC VARIABLES (N=10)

| S.N. | DEMOGRAPHIC VARIABLES | CATEGORY         | FREQUENCY | PERCENTAGE |
|------|-----------------------|------------------|-----------|------------|
| 1.   | AGE (IN YEARS)        | 21-30            | 2         | 20%        |
|      |                       | 31-40            | 2         | 20%        |
|      |                       | 41-50            | 5         | 50%        |
|      |                       | 51-60            | 1         | 10%        |
| 2.   | GENDER                | MALE             | 10        | 100%       |
|      |                       | FEMALE           | -         | -          |
| 3.   | MARITAL STATUS        | MARRIED          | 8         | 80%        |
|      |                       | UNMARRIED        | 2         | 20%        |
| 4.   | TYPE OF FAMILY        | NUCLEAR          | 2         | 20%        |
|      |                       | JOINT            | 8         | 80%        |
| 5.   | EDUCATION             | PRIMARY          | -         | -          |
|      |                       | SECONDARY        | 5         | 50%        |
|      |                       | HIGHER SECONDARY | 2         | 20%        |
|      |                       | GRADUATE         | 3         | 30%        |

|    |                                   |                    |   |     |
|----|-----------------------------------|--------------------|---|-----|
| 6. | <b>EXPERIENCE IN CARING SINCE</b> | 6 MONTHS-1 YEAR    | 1 | 10% |
|    |                                   | 1 YEAR- 10 YEARS   | 2 | 20% |
|    |                                   | 11 YEARS- 20 YEARS | 5 | 50% |
|    |                                   | 21 YEARS- 30 YEARS | 2 | 20% |

The above-mentioned data in table 1 reveals that, out of 10 participants, 2 (20%) were in the 21-30 and 31-40 age groups, respectively. In the age group of 41-50 years, there were 5 (50%) and only 1 participant belongs to age group of 51-60 years. All participants 10 (100%) were male. 10 out of 8 (80%) were married and 2 (20%) were unmarried. It was noted that 8 (80%) lived in joint families and 2 (20%) in nuclear families when gathering their experiences. 5 out of 10 (50%) had secondary and 2 (20%) had higher secondary education and 3 (30%) were graduate. Whereas years of experience in caring the children at observation homes is the vital inquiry while collecting the information, in which 5 (50%) have been caring for more 11-20 years ,2(20%) for the 1year-10years, as well as 21- 30 years and 1 (10%) have been caring for last 6 months to 1 year.

**TABLE NO 2: Analysis and interpretation of the themes and sub-themes N=10**

| SR.N O. | THEMES                                | SUBTHEMES                                                                    |
|---------|---------------------------------------|------------------------------------------------------------------------------|
| 1.      | Psychological strain                  | Stress related to abscondment of children<br>Challenges for caretakers       |
| 2.      | Work-related experiences              | Positive work experience<br>Workload<br>Physical fatigue                     |
| 3.      | Experience related to work and Family | Work-life balance                                                            |
| 4.      | Social experiences                    | Inadequate social interaction<br>Professional identity and social perception |

Table No. 2 outlines four main themes, of which eight sub-themes have been expounded upon in other tables. To make each theme easier to understand, they are divided into sub-themes. To make the psychological experiences more understandable, stress associated with children absconding from observation homes and difficulties managing children who have a history of addiction and controlling violent behavior of children were classified as a sub-theme. Similarly, concerns about working were defined as having positive work experience, having a lot of work to do, and being physically tired. Sub-theme work-life balance was created by further classifying concerns pertaining to work and family. Sub-themes of inadequate social interaction, professional identity, and social perception were used to explain social experiences.

## ANALYSIS AND INTERPRETATION OF DATA

**TABLE NO. 2.1: Description of theme psychological experiences N=10**

| SR.NO. | SUB-THEME                                 | CODES                                                                                                                    |
|--------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| 1.     | Stress related to Abscondment of children | Facing Mental strain<br>Due to children running away from observation home.                                              |
| 2.     | Challenges for caretakers                 | Confronting difficulty in handling children with addiction history and controlling children with their violent behaviour |

### Psychological experiences

It has been noted that there are certain stressors associated with working in observation homes, which contribute to

caretakers' increased psychological stress. In their interviews, almost all caregivers disclosed psychological stressors. Almost all caretakers told about psychological stressors during their interview. The majority of caretakers have experienced mental strain as a result of children absconding from observation homes. They also encounter difficulties when managing children who have a history of addiction and reining in aggressive behavior.

#### Stress-

A greater number of caretakers reported feeling more psychologically strained when children from observation homes attempt to run away. They will have to search tirelessly to look for them at bus stops, railway stations, and other prominent locations in the community. If they are unable to locate them, they must notify their superintendent, who will then report the matter to the police station. Up until the child is found, caretakers are under immense stress. (P-1) “Tension rahat jevha mothi mule palun janaycha plan kartat, mule palvata shodhtat, aamhi tyancha shodh ghetto nantar Police stationla kalvato,..”

- (P-2) “Ekhada mulga palun gela ki tension yet...”
- (P-3) “Maansik taan rahto, mule palun janyacha marg shodat astat, aamhi shodh ghetto, shakyato te gharich jatat..”
- (P-4) “Kahisa maansik taan vadhto jevha mule palun jatat..gunhegaritil mule ji astat ti sahasa mitrankade jatat, aamhi tyancha shodh ghetto, railway station, bus stand, aajubajuchya parisarat, nahitar nantar mag police stationla sahib kalavat...”
- (P-9) “Mule palun janyacha prayatn kartat to sukhrup pochchuperyant tension rahat....”
- Challenges for caretakers-
- Additionally, caretakers discussed the difficulties they are encountering. The majority of caretakers expressed that they faced challenges while handling young children who had a history of addiction as well as controlling young children who behaved violently.
- (P-1) “Vyasani mule aikaat nahit ..karan tyanna to padarth milala nahi tar te baichen hotat...tyanna sambhalan kathin jaat...”
- (P-3) “Tyana control karane he sarwat motthe aavhan aste...tyanna thod ordaav laagat, jara bhiti dakhavto, thodi kadak bhumika ghyavi laagate...”
- (P-10) “...Vyasanasathi mule palun janyacha prayatn kartat, maarhan kartat, tyanna sambhalane he mothe aavhan aahe...”
- (P-1) “Mule viable hotat, taat-vatya apattat...”
- P-2) “Ekhada mulga atokyachya baher asel tr tyala control karne avgad hote...”
- (P-5) “Mulw shivya detat...Mule angavar yayla bagta mag Adhikshakanna suchana deun aamhi tyanna control madhye aanto.t...”
- (P-6) “Mule aikat nahit shivigal kartat..changlyachya maage koni jaat nahi, vayitachya maage jatat...”

**Table No 2.2: Description of theme Work related experiences N-10**

| SR.NO. | SUB-THEME                 | CODES                                                                                                                                                                                                                                                                       |
|--------|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.     | Positive work experiences | i)Encouragement to stay away from addiction<br>ii)Experiencing feeling of goodness when working as a team<br>iii) Experiences related to fulfilling the needs of children and their safety<br>iv) Experiences related to support from the authority<br>v) Work satisfaction |
| 2.     | Workload                  | Increased burden at the work                                                                                                                                                                                                                                                |
| 3.     | Physical fatigue          | Feeling lack of energy after work                                                                                                                                                                                                                                           |

#### Work related experiences-

Caretakers at observation homes shared both positive

and negative perspectives, with the emphasis being placed on the importance of having a positive work

experience. While some showed a greater workload, others expressed less. It may interfere with the current working conditions and other facets of life. Though a few caretakers acknowledged that their workloads are hefty, they nevertheless collaborate well and work as a team to maintain harmony.

When they work, caretakers express that they have a lot of duties and to fulfil a variety of roles. They have a sense of responsibility and are aware of the upbringing and security of children. Additionally, many of the caretakers stated they feel secure in their work because authorities support them well. Positive aspects of their work were developed by caregivers at observation homes. Caretakers are expressed that, they learn many things from the children.

Caretakers working at observation homes developed positive aspect of working. They have communicated that, they learn many things from the children. Caretakers also communicated that, they get encouragement to stay away from the addiction. In addition, they are happy with their jobs. Additionally, they get the support they require from their authority. This will suggest that, caretakers developed positive impact of working in observation home. Caretakers perceive children with optimism. A caretaker appears to have a positive outlook on children and their future.

#### Positive work experiences-

Caretakers seem to have a higher percentage of positive than negative experiences. These are listed in the following order:

- Encouragement to stay away from addiction
- The majority of caretakers claimed that when they work with children who have a history of addiction, they receive encouragement to avoid addiction.
- (P-2) “Mulan kadun kahi gosti shiknya sarkhya astat, kadhi haar maanu naye, tyatun pudhe jaat jaav...”
- (P-4) “Aamhi vyasanapasun door rahto, ya mulankade bagun amhi shikto. Ithale aalele anubhav gharisuddha vaparta yetat...”
- (P-6) “Mulankadun pan baryach gosti shikayla miltat...”
- (P-9) “Aamchi pan mule lahan aahet, ithalya mulankade baghun aplya mulana pn shikavta yete”
- (P-10) “Aamhidekhil vyasanapasun door rahto karan ya mulankade bagun shikto”
- Experiencing feeling of goodness when working as a team

In an emergency, caretakers may be called in to work at any time. They carry out their duties according to shift schedules. The other caretakers perform their duties and adjust for one another if anyone needs time off or leave from their responsibilities.

If any caretakers need leave or off from their duty, the other caretakers help with their duties and make adjustment for each-other. In their communication, caretakers said that they feel good about themselves and their team when they work together.

- (P-1) “Sansthechya garjenusar aamhala duty karavi lagte, don maanse kadhi-kadhi 2 divas kaam kartat, ase asunhi aamhi aamchya kartavyashi eknishth rahto, tyabaddal anand vatato...”
- (P-3) “Adjustmentnusr duty aste, ekmekanna madat karto..kaam karayla anand vatato.”
- (P-8) “Dusarya caretakerla adjust karave lagte...”
- (P-10) “Karyakramasathi, San-utsav aslyas konaladari adjust karave lagte...”
- iii) Experiences related to fulfilling the needs of children and their safety

As children are the most vital component of an observation home, caretakers must prioritize their needs and safety while they are at work. It is vital for caretakers to be attentive to the needs of the children. The caretakers have expressed that this has been a good experience for them as well.

Caretakers provide all the necessities, including food, medication for the children's ailments, transportation to and from school, school supplies, clothing, and—most importantly—safety. Caretakers at observation home are aware of their duties and responsibilities and view this as a positive experience.

- (P-1) “Mulanna davakhanyat nene ,mulanna kahi lagle tar te purvane, he aamch kaam aahe...”
- (P-2) “Mulanna sahitya purvane, lakshya dene, Kaam kartana anand hoto...”
- (P-3) “Mulanna kalji ghene v savrakshan dene...”
- (P-4) “Mulanna kahi laglyas dene, davakhana, swayampak, mulanna ann purvane, ashya sarv jababdarya aamchyavar asata’.....”
- (P-6) “Mulanchya changlyasathi karto,, mahatvache kalji v savrakshan aahe...”
- (P-9) “Mulanchi kalji aani savrakshan yasathi aapan bandhil aahot, te sarvanni utsahane kele pahije...”
- iv) Experiences related to support from the authority

The caretakers also mentioned that the cooperation of the authorities was a positive experience. Numerous caretakers acknowledged that the government, their organization, and their immediate authority all provide support. An authority will obtain caretakers' concerns and grant their demands. Authority additionally offers support when required.

- (P-3) “Sanstha, adhiakshak sarvjan sahakarya kartat, aamhala kahi laglyas puravtat...”
- (P-4) “Aamchi aarthik paristiti sudharte, karan



Sanstha v Govt. aamhala changle sahkarya karte..”

- (P-9) “Sanstheche khup mothe yogdaan aahe, kadhitar 2-3 mahine pagar zaala nahi,tar sanstha aamhala madat karter..”
- (P-10) “Adhikaryancha support changla aahe, aamhala sambhalun ghetat..”
- V)Work satisfaction

In summary, the data indicates that caretakers are content with their jobs and carry out their responsibilities effectively, In terms of the caretakers' satisfaction with their work.

- (P-1) “Mulanna changl banvat aahot aani aapan yacha ek bhaag aahot, he barr vatat”
- (P-2) “Amalahahi kaam kartana changl vatat, mulansobat changle anubhav yetat”
- (P-4) “...Kamacha ekandarit kamacha anubhav khup changala aahe”
- (P-5) “Mule changli shikun jatat, aamhala bhetayla yetat,,amala chan vatat”
- (P-8) “Jevha mule changlya padavar jatat, aamhala bhetayla yetat he changal vatar...”

### Workload-

However, caretakers also communicate about their workload at work. They have more work because of a number of factors, including inadequate staffing capacities and longer shifts.

- Increased burden of work
- In addition to feeling more burdened at work, caretakers have expressed that they must fulfill roles other than that of caretakers due to a shortage of staff and long work hours. Caretakers occasionally have to work double shifts or longer than 24 or 48 hours.
- (P-1) “Suruvatila faar kasrat karavi laagte, kamacha taan just aahe...”
- (P-2) “Kamacha taan aahe,mulanachyade lakshy dene, tyanna laagel te sahitya purvane...”
- (P-4) “Kamacha taan asto, karan fakt kalajivahak mhanunach navhe tar mulanche savrakshan hehi baghave lagte..”
- (P-8) “..Manushybal kami aahe tyamule kamacha taan vaadhto..”
- (P-10)“Kamavar taan jaanvato,duty shiftmadhye aste,raatrbhar jagave laagte..”

### Physical fatigue

Workload additionally impacts their physical well-being. Many caregivers have reported feeling exhausted and depleted of energy after work.

Physical exhaustion is a typical occurrence for workers of all types. Fifty percent of the participants said they were tired.

It has been observed that due to their working conditions, caretakers experience physical strain, fatigue, and lack of energy.

- (P-1) “Kadhi-kadhi 2 divsanantar suttu milte tyamule thakava jaanvato”
- (P-2) “Continue duty karavi lagte, mag takat kami padlyasarkhi vatate.”
- (P-3) “Double duty karavi lagte, shaaririk thakava jaanavato...”
- (P-4) “Thakava yeto, shevati sagal aaplyavar aahe.”
- (P-10) “Duty shiftmadhye aste, ratrabhar jagave lagte, shaaririk taan-tanaav anubhavayla milto.”

**Table No 2.3: Description of the theme experiences related to work and Family N=14**

| SR.NO | SUB-THEME         | CODES                                      |
|-------|-------------------|--------------------------------------------|
| 3.    | Work-life balance | Balance between work and family obligation |

### 3. Work-life balance

Caretakers explained that while caring for children may impact or alter their family life, interactions with other family members, and their own children.

Balance between work and family obligation

Caretakers must balance their dual responsibilities to their families and their jobs. They prioritize their work above all else and uphold a healthy work-life balance.

- (P-4) “Gharguti karyakramas jata yet nahi, sarv san itech sajre karave lagtat..”
- (P-5)“Sadhya nokari milat nahi,nokari mahatvachi aahe,tyamule gharataledekhil boltat,ilaaj nahi,te kaam kelech pahije..”
- (P-6) “.... Nokari v mule yanna pratham pradhanya dyave lagte..”
- (P-8) “Gharatle boltat,dutyk kara, kashala ghari yeta...emergency aslyas jave lagte..”
- (P-9) “Aapli bandhilaki nokrishhi aste, adjustment zaali tar jata yete..”

**Table No. 2.4: Description of the theme social experiences**

N=14

| SR.NO. | SUB-THEMES                                      | CODES                                                    |
|--------|-------------------------------------------------|----------------------------------------------------------|
| 4.     | i) Inadequate social interaction                | Less interaction with friends and society                |
|        | ii) Professional identity and social perception | Experiencing emotional fulfilment and respect in society |

### Social experiences-

Additionally significant are the caretakers' social experiences. Caretakers reported that their working conditions had an impact on how they interacted with friends and society. Due to their working conditions, the majority of caregivers expressed that they have limited opportunities for interpersonal and social communication with friends, family and society. Their social life is impacted because they won't have enough time to spend with friends, go to social gatherings, or attend religious events.

Moreover, they experience positive social recognition and a sense of respect from society.

#### i) Inadequate social interaction

The majority of caregivers stated that because of their working circumstances, they are unable to spend much time with friends, family and society as they would like to. Their social life is negatively impacted because they don't have enough time to spend with friends, go to social events, or attend religious events.

- (P-5) “...san asude utsav asude aamhala sutti nahi, tyamule mitramandal kami hote..”
- (P-6) “Samajik natesambandhavar parinaam hoto, karan amchi baryapaiki dutych aste..”
- (P-7) “Kamamule thodasa kami vel samajasathi dyava lagto..tyamule samajasathi jast vel deta yet nahi....”
- (P-8) “...mitra mhantat ,kamala jatoy, vel nahi.mitramandalasathi khup kami vel milto, tyamule te chidat....”
- (P-9) “Kamamule samajik natesambadhasathi khup kami vel milto...Kadhitari vel milto..tyamule bahutekvela samajik karyakramas upasthit rahta yet nahi...”
- (P-10) “...mitramandalasathi vel bhetat nahi”
- ii) Professional identity and social perception
- Furthermore, they experience positive social recognition and a sense of respect from society. Positive feelings and an optimistic outlook towards the betterment of children are shared by caretakers.
- (P-1) “Mulanna changal banvat aahot,samajasathi ghadvat aahot aani aapan yacha ek bhaag aahot, he barr vatat”
- (P-3) “Samajachya drushtine aamhi changle kaam kartoy..te aamhal respectfully treat

kartaat..., yacha abhimaan vaatato..”

- (P-4) “Samajamadhye maansanman milto.Lok aamchyakde changlya drushtine baghtat...”
- (P-9) “Samajat ya kamamule changli olakh zaali...lokancha view aamchya kamabaddal changla aahe”
- (P-10) “Sarv changle boltat, sanmanane baghtat, palaksuddha changle boltat..”

## DISCUSSION

According to the research done by Bristi Barkataki, Gautam Sharma, and Shridhar Sharma (Indian J Psychiatry. 2016 Apr-Jun; 58(2): 178–182). on drug use and criminal activity among young people in New Delhi who are under investigation. Research indicates a close connection between drug use and criminal activity. The link between drugs and violence is further complicated by the intoxicating effects of certain drugs and/or their withdrawal symptoms. It is evident that drug abuse and criminal activity are linked. The severity of violence and criminality increases with the level of substance abuse involvement<sup>29</sup>.

The present study result supported by the study of Perceptions of caregivers in Children's Homes in South Africa (Margaret Funke Omidire , Ditlhokwe AnnaMosia, Motlalepule Ruth Mampane, 2015) Caregivers viewed their work environment as child-focused and expressed the need to be acknowledged as professionals and to be empowered with more training<sup>23</sup>.

## CONCLUSION

The perceptions and experiences of caring for juveniles in observation homes were discussed in this study. Through this research, it has become clear that stress is common among the caretakers. A number of responsibilities were defined by the caretakers in this study such as provision of foods, school needs, and healthcare needs of children residing at observation homes.

The most important component of the observation homes are the caretakers. Their lived experiences are significant because they bear the majority of the children's responsibilities.

Caretakers have a positive attitude towards children and are accustomed to working with them in observation

homes. Despite their workload and psychological strain, caretakers consider what's best for the child. Their work also has an impact on their social and family lives. They take responsibility for their work, and caretakers have stated that they plan to remain in observation homes until they retire.

Care, safety and other facilities are provided to the children as per the need. Support from the Government, Authority and donors also play an important role. The conclusion is that caretakers have more positive experiences than the negative.

### LIMITATIONS

- Findings of the study may not be representative of the broader population of caretakers.
- Observation homes may have restrictions on access for researchers, making it challenging to recruit an adequate sample size.
- Caretakers and juveniles in observation homes may have privacy concerns, particularly regarding sensitive information about their work environment and the individuals under their care.
- Caretakers may feel pressure to present their experiences in a socially desirable light, particularly if they perceive the researcher as having a stake in the outcomes.

### NURSING PRACTICE

- The findings of current research regarding perspectives of caretakers working in observation homes will be discussed by nursing professionals who are working in community as well as mental health sectors.
- The result of study will assist nurses to recognize and understand the stressors experienced by caretakers in observation homes.
- Nurses should facilitate access to relevant training programs and resources to support caretakers in their roles.

### NURSING EDUCATION

Community settings should be included into education instead of just being restricted to classrooms.

- Nurses should provide education on stress management techniques, encouraging regular breaks, and fostering a supportive work environment where caretakers feel comfortable seeking help when they need.
- Psychiatric Nurses should teach student nurses regarding interventions to reduce stress and job-burnout among caretakers.

### NURSING ADMINISTRATION

- Nurses should advocate for policies and practices that promote work-life balance for caretakers, including flexible scheduling options, adequate time off, and access to family support services.

- Nurses should advocate for adequate resources and support for observation homes, including staffing levels, training programs, and access to mental health services for both caretakers and children.

## NURSING RESEARCH

- The research findings can be shared with student nurses training and through the publications and workshops'.
- Nurses should develop interventions to support caretakers' mental health, reduce burnout, and enhancing coping strategies.

### RECOMMENDATIONS

- A qualitative study can be conducted to learn more about the experience of juvenile delinquents residing at observation homes.
- A qualitative study could be conducted to investigate the role of caretakers in the rehabilitation process of juveniles within observation homes.
- Longitudinal Studies can be done on caretakers' experiences over an extended period to examine how their perceptions and coping strategies evolve over time.
- Comparative Studies also helps to Compare the experiences of caretakers across different observation homes or facilities to identify variations in practices, support systems, and outcomes.

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### Conflict of Interest

No conflict of interest involved.

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