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MENTAL HEALTH PROBLEMS OF JUVENILE OFFENDERS

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Abstract

The research study focussed on the mental health problems of Male Juvenile offenders in the observation homes. Majority of the juveniles under the juvenile justice board were prone to have mental health problems. These ailments have to be intervened in order to prepare them as a responsible citizen of the society. Normative survey method is employed to collect the data through questionnaire by adopting Stratified Random Sampling technique. The sample size of the study is 460. The area of study is around 9 districts in Tamil Nadu. The main objectives of the study are, to analyze the mental health problem of juvenile offenders, to find out the mental health problem of juvenile offenders based on, birth order, family Configuration, parental occupation, parent's educational qualification, location of residence. The major findings of the study are, the mental health problem among Juvenile offenders is moderate in nature, and there is a significant difference in the mental health problem of juvenile offenders based on father's occupation. The Juvenile offender whose father's occupation is cooly has comparatively high mental health problem; there is a significant difference in the mental health problem of juvenile offenders based on mother's qualification. In the overall mental health problem, the Juvenile offender who's Mothers qualification is Professional has comparatively high mental health problem; there is a significant difference in the mental health problem of juvenile offenders based on location of residence. In the overall mental health problem, the Juvenile offender whose location of residence is Slum has comparatively high mental health problem. Thus the causative factors for mental health problems have to be

identified and proper remedial measures have to be incorporated to impart positive attitudes

among the offenders which results in the effective functioning of the individual to the society.

INTRODUCTION

The Juvenile offenders in Juvenile Justice System are reported to have mental health

problems. As many as 70 percent of youth in the Juvenile Justice system are affected with the

mental disorder and one in five suffer from mental illness which impairs their ability to

function as a young person and grow into an responsible adult. Children with unaddressed

mental health sometimes enter a juvenile justice system that is ill – equipped to assist them,

even if they receive a level of assistance, some are then released without access to ongoing

needed mental health treatment. An absence of treatment may contribute to a path of

behaviour that includes continued delinquency and eventually, adult criminality. The Bureau

of Justice statistics estimates that more than three quarters of mentally ill offenders in

detention centres had prior offenses. Effective assessment and comprehensive responses to

court – involved juveniles with mental health needs can help to break this cycle and produce

healthier young people who are less likely to act out and commit crimes.

Operational Definition: Mental health Problems

Mental health problems can be seen as an unstable continuum, where an individual's

mental health may have different behavioural and cognitive associated disorders. The term

mental health problem highlights unstable emotional well-being, the incapacity to live a full

and creative life, and the maladaptive to deal with life's inevitable challenges.

Mental health problem is defined as a state or condition on which an individual

inability to feel a sense of well-being. This exhibits the negative impact for the individual to

live life in fulfilment of what they want to achieve in accordance to the available resources.

Mental health problem makes an individual to think abnormally and being problematic for

them self and for their community.

Need and Significance of the study

The study exemplifies the mental health problems of the young offenders and the

necessity in taking herculean steps for bringing out effective behaviour. Steps should also be

taken to cater to the mental health needs and to establish healthier young people, who are less likely to act out and commit crimes. The study outlines the decisive role of educational institutions in taking the pivotal role to shape the attitude towards mental health. As the crime rates associated with the juveniles increasing rapidly, hence it requires an immediate remedy, in order to grow them as a responsible citizen and to reduce the rate of victimisation.

Review of related literature

Candace Moreno Ferguson (2011) conducted a research study on "Aftercare for Youth with Mental Health Disorders in The Juvenile Justice System" The main purpose of this study is to describe the ideal characteristics of an effective mental health. The second purpose is to conduct a case study and assess the aftercare program using the ideal characteristics. Finally, recommendations that should assist all juvenile probation departments to supervise youth with mental health needs are developed. The methodologies used in this case study include structured interviews, document analysis and archival data analysis. Document analysis was conducted using the Country's policy and procedure manual and archival data such as case plans and chronological notes were used as a supplemental data collection method as well. A systematic sample of archival data was conducted of 21 youth randomly selected from a total of 103 youth sent to or released from post-adjudication facilities during 2004 – 2005.

Results: Overall, the Aftercare Program could improve services by: providing set guidelines in Policy and Procedure, providing specialized training for Aftercare Officers, developing a specialized Aftercare Team, and providing staff development through ongoing training and evaluation.

Robert P (2010) conducted a research study on "Treating Offenders with Mental Illness" The research study discusses the prevalence rate of offenders with mental illness and the relationship between mental illness and criminal conduct. The study introduces a framework for the treatment of offenders with mental illness. The research findings shows the existing interventions and treatment programs at points of contact within the criminal and juvenile justice system, including arrest, booking, court, incarceration, and probation and parole. This section also reviews interventions and programs for youthful and adult offenders in community and institutional settings including in addition to research on cost

effectiveness. The report concludes with best practice recommendations for managing and treating mentally ill offenders in the criminal and juvenile justice system.

Objectives of the study

- 1. To analyze the mental health problem of juvenile offenders.
- 2. To find out the mental health problem of juvenile offenders based on,
 - Family Configuration
 - Parental occupation
 - Parent's educational qualification
 - Location of residence

Hypotheses of the study

- 1. The mental health problem of juvenile offenders is moderate in nature.
- 2. There is no significant difference of mental health problem among juvenile offenders based on.
 - Family Configuration
 - Parental occupation
 - Parent's educational qualification
 - Location of residence

Methodology and area of investigation

Normative survey method is employed to collect data using the questionnaire by adopting Stratified Random Sampling technique. The sample size of the study is 460. The area of study is around 9 districts in Tamil Nadu. It was considered that this approach to the collection of data would render the results of study more realistic and in tune with ground realities.

Mental Health Problem – Questionnaire

Mental health problem questionnaire was constructed and standardized by the Investigator under the guidance and supervision of Research Guide. The questionnaire consisting of 43 items under the following five dimensions namely,

S.No	Dimensions	Items
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1	Deal with negative thinking	1,2,3,4,7,8,16,18,26,36,40,41
	patterns	
2	Manage with moods	10,23,27,28,30,31,32,43
3	Follow good sleep	5
4	Self – esteem	6,9,12,13,14,15,19,20,21,22,24,25,2
		9,33,34,38,42
5	Maintain Positive relationship	35,37

Scoring Procedure

Scoring for this 3 – point scale is assigned a weight – age ranging from 3 to 1 as given in the tool. The maximum score is 129 and the minimum score is 43.

Usually
$$-3$$
, Sometimes -2 , Never -1

Interpretation of score

Juvenile male offenders who score between 0-66 were considered to have low mental health problem. Juveniles who score from 67-83 were considered to have Moderate Mental health problem and Juveniles who score above 84 were considered to have High Mental health problem.

Pilot Study

The pilot study was conducted on 50 juveniles to establish reliability and validity of the tool. The reliability of the Mental health Inventory was found to be 0.98 using Karl Pearson product correlation method. Validity of the tool was found to be 0.99.

Samples for the main study

After obtaining a prior permission from "The Directorate of Social Defence", Government of Tamil Nadu, the data for the study was collected randomly. A representative sample of 460 Juvenile male offenders of age group between 15 – 18 years from 9 different districts in Tamil Nadu as scheduled by 'The Directorate of Social Defence' were considered to be the sample for the present study.

Statistical analysis

Hypothesis - 1

The level of mental health problem among juvenile offenders is moderate in nature.

Table 1 Level of Mental health problem of male juvenile offenders

Variable	Category	Frequency	Percent	Cumulative percent
	Low	57	12.4	12.4
Mental health	Moderate	233	50.7	63.0
problem	High	170	37.0	100.0
	Total	460	100.0	

It is inferred that the level of mental health problem among Juvenile offenders is moderate in nature. Hence the null hypothesis is accepted.



Hypothesis – 2

There is no significant difference of mental health problem based on father occupation

Table 2 Mental health problem – Father Occupation

Variable	Source of	Sum of	df	Mean	F-	Level of
	Variance	Squares	All or	Square	value	Significance
	Between	1,941.589	3	647.196		
Mental health	Groups				7.026	0.01
problem	Within Groups	42,004.783	456	92.116		
	Total	43,946.372	459			

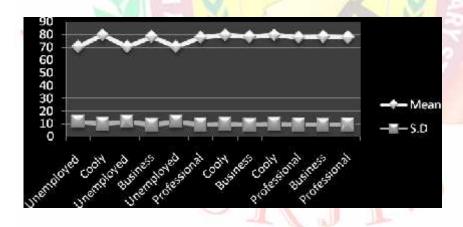
The calculated 'F' value is found to be (7.026), which is greater than the table value, it is concluded that there is a significant difference in the mental health problem of Juvenile offenders based on father occupation. Hence the null hypothesis is rejected. The table has been subjected for further analysis using 't' test.

 Table 2(a)
 Mental health problem Vs Father Occupation

Father	Sample	Mean	S.D	't'- Value	Level of
Occupation					Significance
Unemployed	27	70.44	11.534	3.89	0.01
Cooly	155	79.57	9.814		
Unemployed	27	70.44	11.534	3.72	0.01
Business	178	78.30	9.254		
Unemployed	27	70.44	11.534	2.98	0.01
Professional	100	77.70	9.296		
Cooly	155	79.57	9.814	1.28	NS
Business	178	78.30	9.254		
Cooly	155	79.57	9.814	2.05	0.05
Professional	100	77.70	9.296		- N. IA
Business	178	78.30	9.254	3.45	0.01
Professional	100	77.70	9.296	Lie III	

Analysis of mean difference between the Father occupation was tested which reveals that, in the overall mental health problem, the Juvenile offender whose father's occupation is cooly (79.57) has comparatively high mental health problem.

Graph showing the mean and standard deviation based on father occupation



Hypothesis - 3

There is no significant difference of mental health problem based on Mother Qualification

 Table 3
 Mental health problem - Mother Qualification

Variable	Source of	Sum of	df	Mean	F-	Level of
	Variance	Squares		Square	value	Significance
Mental health	Between	862.671	3	287.557		
problem	Groups				3.044	0.05

Within Groups	43,083.701	456	94.482	
Total	43,946.372	459		

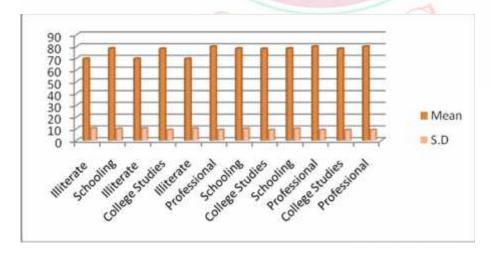
The calculated 'F' value is found to be (3.044), which is greater than the table value, it is concluded that there is a significant difference in the mental health problem of Juvenile offenders based on mothers qualification. Hence the null hypothesis is rejected. The table has been subjected for further analysis using 't' test.

Table 3(a) Mental health problem Vs Mothers qualification

Mothers	Samples	Mean	S.D	't'- Value	Level of
Qualification					Significance
Illiterate	21	69.67	10.394	2.59	0.01
Schooling	232	78.43	10.101	1	L 16
Illiterate	21	69.67	10.394	2.05	0.05
College Studies	152	78.17	8.957	11.11	
Illiterate	21	69.67	10.394	3.12	0.01
Professional	55	80.04	9.000	70	
Schooling	232	78.43	10.101	2.02	0.05
College Studies	152	78.17	8.957		2
Schooling	232	78.43	10.101	0.99	NS
Professional	55	80.04	9.000		
College Studies	152	78.17	8.957	3.42	0.01
Professional	55	80.04	9.000		

Analysis of mean difference between the Mother qualification was tested which reveals that, in the overall Mental health problem, the Juvenile offenders whose Mother qualification is Professional (80.04) has comparatively high Mental health problem.

Graph showing the mean and standard deviation based on Mother Qualification



Hypothesis – 4

There is no significant difference of mental health problem based on location of residence

Table 4 Mental Health problem – Location of residence

Variable	Source of	Sum of	df	Mean	F-	Level of
	Variance	Squares		Square	value	Significance
	Between	93.595	2	46.798		
Mental Health	Groups				5.006	0.01
problem	Within	4,272.396	457	9.349		
	Groups					
	Total	4,365.991	459			

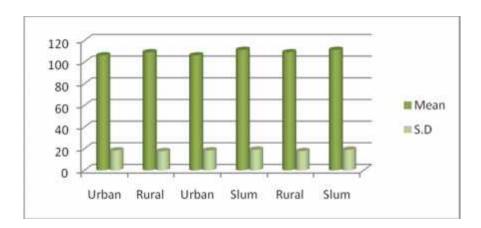
The calculated 'F' value is found to be (5.006), which is greater than the table value, it is concluded that there is a significant difference in the mental health problem of Juvenile offenders based on location. Hence the null hypothesis is rejected. The table has been subjected for further analysis using 't' test.

Table 4(a) Mental health problem - Location of residence

Location	Samples	Mean	S.D	't'- Value	Level of Significance
Urban	142	106.11	18.355	2.44	0.05
Rural	137	109.00	17.701	6	
Urban	142	106.11	18.355	3.33	0.01
Slum	181	111.26	19.023		//
Rural	137	109.00	17.701	1.98	0.05
Slum	181	111.26	19.023	100	

Analysis of mean difference between the location of residence was tested which reveals that, in the overall Mental health problem, the Juvenile offenders whose location of residence is Slum (111.26) has comparatively high Mental health problem.

Graph showing the mean and standard deviation based on Location



Findings of the study

- The mental health problem of Juvenile offenders is moderate in nature.
- There is a significant difference in the mental health problem of juvenile offenders based on father's occupation. In the overall mental health problem, the Juvenile offender whose father's occupation is cooly has comparatively high mental health problem.
- There is a significant difference in the mental health problem of juvenile offenders based on mother's educational qualification. In the overall Mental health, the Juvenile offenders whose Mother qualification is Professional has comparatively high Mental health problem.
- There is a significant difference in the mental health problem of juvenile offenders based on location. In the overall mental health problem, the Juvenile offender whose location of residence is Slum has comparatively high mental health problem.

Educational Implication

There is, however, reason for hope. Projections and trends are not destiny. Successful intervention measures can be adopted to reverse these trends based on identified positive and negative characteristics -- protective factors and risk factors -- that are present or lacking in communities, families, schools, peer groups, and individuals. These factors either equip a child with the capacity to become a mentally vibrant and productive individual. Of equal importance, communities are learning that they can make dramatic changes in delinquency levels by adopting human sustainability and remedial measures that can successfully reduce the risk factors and strengthen the peacefulness in children's lives.

Conclusion

Thus the study expounds the mental health problems of Male Juvenile offenders and the importance of intervening the offenders with various remedial and intervention procedure to over come the risk factors and to reduce the rate of victimization.

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