Constructing assessment tool for Juvenile Delinquents in India to assess the efficacy of Interventions based on life skills

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ABSTRACT

Mental health of juvenile delinquents has always been a cause of concern of various government agencies. In accordance to the statistics by National Crime Records Bureau (2014), the Indian scenario reflects a constant rise in the trends of occurrence of juvenile crime from 2.08\% in 2011 to 2.58\% in 2013-14 of total cognizable crime. Enormous literature supports the growing fame and evidence for the role of life skills in the development of psychosocial competencies among younger generation (UNICEF, 2016). Life skills education works as a structured programme of needs- and outcomes, based on participatory experiential learning, which primarily aims to assist an individual to develop and simultaneously practice psychosocial skills that decrease risk factors and increase protective factors in life (UNICEF, 2016). Type here brief abstract of your work giving overview of work and limit the text to 200 words. This paper focusses on problems of juvenile delinquents in observation homes. It aims at designing a tool to assess the improvement in life skills of juvenile delinquents. The assessment has been conducted in a pre-post intervention method with 60 inmates of 12-16 years. The tool has been designed to assess ten generic life skills, considering the problems of delinquent children in the observation homes, their past and future.

Keywords: Juvenile Delinquency, Observation Homes, Life Skills Education,

Introduction

The term ‘Juvenile Delinquents’ or ‘Children In Conflict With The Law’ in India refers to any person below the age of 18 who has come in contact with the justice system as a result of committing a crime. The increasing rate of Juvenile Crimes (under IPC) is alarming as the percentage of juvenile crimes to total crimes is around 1\% during 2001 to 2011 (Ministry of Statistics and programme Implementation, GOV of INDIA., 2011). In India there is a shortage of aftercare services and a lack of service coordination in the juvenile justice system which suggests the need to develop treatment models that integrate and coordinate multiple services for adolescent offenders.

Over crowdedness in the institutions and low budgets and inadequate facilities, puts forward the need of counselling and activities for development of these children so that they can be mainstreamed on their release (Pandit, 2013). The current environment of juvenile institutions reflects the monotony in the lifestyles of juvenile delinquents.

Life skills are abilities for adaptive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life” (WHO, 1997, p.1). Life skills education training targets facilitation and development of psychosocial and coping skills required to deal with the demands, stresses and challenges of everyday life. It includes the application of life skills in the context of specific risk situations where children and adolescents need to be empower themselves to be able to promote and protect their rights. Powell (1995) has defined life skills as the coping skills that relate to the developmental tasks and processes of basic human development. These are the skills necessary to perform tasks at a given age and for specific gender in the following areas of human development. Psychological, Physical, Sexual, Vocational, Cognitive, Moral, Ego and Emotional. Following the study of many different life skills programmes, the WHO Department of Mental Health identified five basic areas of life skills that are relevant across cultures.
Literature review

The Juvenile Justice (Care and Protection of Children) Act 2015 (Ministry of Law and Justice, 2015) defines juvenile as a person who has not completed his/her 18th year of age. It outlines two target groups: Children in need of care and protection and Juveniles in conflict with law. The second chapter of the Act addresses Juveniles in Conflict with Law (JCLs). The act proposes for the establishment of Juvenile Justice Boards (JJBs) formed by the state governments. These are entitled to have a Metropolitan or Judicial magistrate and two social workers where one of the workers must be a woman. The magistrate is required to have a background in child psychology or child welfare. JCL cases can only be heard in the JJB and not by another court. The powers of the JJB can be exercised in a High court or Court of Session when an appeal has been made as part of the act. The state also has to set up Juvenile observation homes for need and protection of under trial and convicted Juvenile Delinquents. After the proceedings of a particular case are complete, the JJB may decide that the rehabilitation of the child is not complete and hence place them in a Special home for no longer than three years.

The Juvenile Justice (Care and Protection of Children) Bill, 2015 inserts a special provision for the possibility of trying 16-18 year olds committing heinous offences, as adults. A heinous offence is defined as one for which the minimum punishment under the Indian Penal Code is seven years. (PRS Legislative Research, 2016).

An evaluation of Ohio's Behavioral Health/ Juvenile Justice initiative in 11 counties found the various intervention program benefits most young offenders diverted from detention centers to community-based agencies to treat mental health issues, drug problems. (J. M. Kretschmar, 2014) Juvenile offenders can benefit from diversion or intervention programs through community agencies with services for mental health problems and substance abuse. Thus providing a significant reason of creating a behavioral health promotional model based on the life skills training as an intervention for juvenile delinquents in India.

Incidents of violence have been evident at various observation homes in India. At the Sewa Kutir in Mukherjee Nagar, the juveniles broke the computers installed for their training. These issues require urgent attention. Delhi Minister for Women and Child Development Kiran Walia has accepted that there is immense need for a serious change and improvement in the environment of the observation homes (Pandey, 2013). Experts view it as a challenge to reintegrate the delinquent children into the mainstream, as most of them come from a fractured environment. Social inclusion of youth with mental health conditions, a report by United Nations Department of Economic and social affairs states that juvenile delinquents all over world suffer substantially in higher rates of prevalence of mental-health conditions than youth in the general population. (C.Bradshaw, 2014).

Incarcerated youth are regularly subject to violence, intimidation, exploitation and inhumane conditions, such as lack of adequate nutrition, hygiene and medical care. In a number of low- and middle-income countries, inadequate or non-existent juvenile facilities have resulted in youth being housed with older inmates, where they may be subject to abuse, exploitation and/or degrading treatment. (El-Khoury, 2009). Introduction of productive training programme for the juveniles is required as an essential action in order to treat them with affection and instill a positivity and hope in their lives. To equip them to face the challenges of life ahead it is important to engage them in a correction or intervention programme that caters to the need of developing in life as better individuals and thus helping to mainstream them. Life skills education training can prove as an ideal intervention measure for juveniles in India (Kulkarni, 2013). Broken homes, lack of parental affection and security, lack of family ties, besides divorce and separation of parents are contributory factors to delinquency of juveniles, reveals a sample study carried out by the Empowerment of Children and Human Rights Organization (ECHO), a Centre for Juvenile Justice, Bangalore. The study ‘Root Causes of Juvenile Crimes’, carried out in collaboration with the Department of Women and Child Development and the UNICEF, analyzed the cause for juvenile crimes. The study revealed that a majority 94 per cent of the boys were not under parental care. Also, about 89 per cent of them came from poor economic background. The study states that those facing economic stress in their day-to-day lives are forced to work at a young age where they get in touch with anti-social groups. Most of the juveniles are school dropouts and come from families below the poverty line.

Life Skills Education

Life skills promote wellbeing and can work for improved mental health and prevention of many deviant and maladaptive behaviors like suicidal tendency, adult criminality. It is evident from the study done in Cambodia that concludes promotion of life skills in schools may enhance the overall mental health of young people, preventing the student population from engaging in high-risk behaviors. This study was an experimental study with two schools where one was control group and the other was experimental. Six classes were randomly selected from two schools each, one designated as experimental and the other as control school, respectively. In experimental school 168 young people (M = 92, F = 76) received 6 sessions of life skills education and in the control school 131 students (M = 53, F = 78) received three general sessions on health. The pre-post difference was measured on Life-Skills Development Scale Adolescent Form (LSDS-AF) and Youth Self-Report (YSR) questionnaire. The results reflected improvement in Human Relationship, Health Maintenance and the Total Life Skills Dimensions in both the genders. (B Jegannathan, 2014)

A study was conducted at Karnataka with rural population of adolescent girls (Pujinar, Hunshai, & Bailur, 2014) The girls were assessed for five life skills that were problem solving, creative thinking, critical thinking, coping with stress and empathy by using self-administered checklist as a method of data collection. The intervention was given to rural adolescent girls for a period of 3 months in the form of training through developed training module, guest lectures, brain storming methods and role play to discuss and by practicing the skills. The main aim of life skill intervention was to make rural adolescent girls perform better in all walks of life by acquisition of psychological competence, finding proper solutions to day to day problems, creating positive attitude, coping with different situations in life and improving their ability of dealing with ups and downs of life. After the intervention, with a gap of one month, the posttest assessment was done to know the impact of intervention on life skill development of girls. Frequency and percentages were computed in order to know the levels of life skills of adolescent girls. Students’ test was used to know the comparison between pretest and post test results. The study concluded that the intervention on life skill education seemed helpful for the rural adolescent girls to take positive actions and improved their coping skills of stress and problem solving ability as evident with the differences in the pre-post results.
Life Skills if imparted as a part of daily routine of these children at the observation homes, along with Yoga and spiritual training, it can work wonders in enhancing the quality of life of such children (Khanam & Bhadra, 2016).

**Methodology**

This study focusses on the development of reliability and validity of the adapted version of the Life Skills Scale (Vranda M., 2009) for juvenile delinquents in India. It also assess the effect of intervention based on life skills education on behavior of Juvenile delinquents. In India, the importance of life skills has been recognized (Vranda M. N., 2011; Bharath & Kumar, 2010). Although WHO (1997) has advised that data collection and analysis for life skills programs should be assessed in terms of process (qualitative) and impact (quantitative), (Fiona Kennedy and David Pearson, 2014). Drawings and use of Pictures as a part of Qualitative assessment (Merriman & Guerin, 2006), can prove of extreme importance, for the Indian population of juvenile delinquents, keeping in concern that most of such children come from shattered socio-economic backgrounds and are not educated. Such children can express themselves in a better manner through drawings and Pictures (Singh & Bhadra, 2014). These can be analyzed as qualitative data. Though there is a lack of existence of any specific measures that would cater to the needs of Juvenile Delinquents specifically. In order to create an appropriate assessment tool, Permission from the author of LSE scale M N Vranda is obtained to translate and adapt the scale in accordance to the juvenile delinquent population in India (Vranda M., 2009).

**Designing a Questionnaire**

Questionnaires are the most frequently used data collection tool in educational and evaluation research. Questionnaires provide for an ideal platform to help to gain information’s on various types of phenomenon such as attitudes and opinions of people, knowledge and behavioral attributes. In a review of 748 research studies, Radhakrishna, Leite, and Baggett (2003) found that 64% used questionnaires. For construction of a questionnaire, it is a crucial to analyze purpose, objectives, research questions, and hypothesis of the proposed research. Determining the background and educational levels and accordingly deciding the mode of selecting the participants is an equally important step. A thorough understanding of the problem through literature review and analysis is required to develop an appropriate tool. After understanding the research population and its context, the next step should be to formulate statement or questions for the questionnaire. Content that is well understood and analyzed through literature review is transformed into statements and questions.

The next step is focused on writing statements and selection of measurement scale for calculating the responses of the subjects on a particular variable. It is essential to understand the value of developing a relation between the levels of measurement and appropriateness of the data. Reliability is the final and most requires step in the process of developing a valid tool. A pilot test is conducted to obtain reliability. Reliability refers to random error in measurement. It indicates the accuracy or precision of the measuring instrument (Norland, Tillburg, 1990). The pilot test establishes if the questionnaire is consistently measuring what it intends to measure and quantify. The use of reliability of different types (test-retest, split half, alternate form, internal consistency) depends on the nature of data (nominal, ordinal, interval/ratio) (Radhakrishna, 2007).

In the present study internal consistency of the questionnaire is essential to establish the appropriateness and reliability of the questionnaire. Cronbach’s alpha is used as a measure of internal consistency or reliability of instrument. It is important for all the items of a questionnaire or scale to measure the same thing, as it is needed for develop inter-item correlation. Cronbach's alpha generally increases when the correlations between the items increases. For this reason the coefficient is also called the internal consistency reliability of the test.

The value of alpha (α) may lie between negative infinity and 1. Generally, alpha coefficient ranges in value from 0 to 1, and is used to describe the reliability of factors. In order to achieve an appropriate statistical significance of an assessment tool the reliability score should be at least of 0.60 or higher (Explorable.com, 2010).

**Adaptation of the Life Skills Scale**

Life skills scale (Vranda M., 2009), is on the Likert technique of 5-point scale. Mental health professionals who are working with adolescents can use present scale to assess the overall life skills or specific skills of adolescents and plan for developmentally appropriate life skills intervention program. The present scale can be used to monitor and evaluate the effectiveness of life skills training in terms of application and development of life skills for a particular population over a period of time (Vranda M., 2009).

Life skills assessment tool for Juvenile Delinquents in India, a questionnaire of 34 items especially designed for the juvenile delinquents population adapted from the Life Skills Scale (Vranda M., 2009) was developed and tested through a pilot. Its reliability and validity was obtained in the result analysis of the current research study.

**Reliability of Life Skills Assessment Scale**

This paper focuses on the quantitative analysis of the data obtained through the pilot study conducted at an observation home in Bariety. The questionnaire specially designed for juvenile delinquents with a reference from Life Skill Scale (Vranda M., 2009) has been used to obtain pre post intervention data. The current study is a pre-post design without control group. Since the target population is of juvenile delinquents, who reside under special provisions and concerns. It would be unethical to keep a control group of same population and not give them intervention. As all the children who reside in the observation home set up are mostly from the vulnerable section of society and face similar situations and problems like violence, abuse and lack of education and proper facilities. A 12 days pilot study was conducted to obtain the data on the Life Skills Assessment questionnaire for Juvenile Delinquents of 34 questions with 60 participants. It was analyzed with the help of SPSS. The Life Skills Scale (Vranda M., 2009) has a Cronbach Alpha value of 0.9. The present adapted version has the Cronbach Alpha value of 0.629, which can be considered as an acceptable value for an adapted version, keeping in concern the small data size of 60 participants.

<table>
<thead>
<tr>
<th>Cronbach's Alpha</th>
<th>Cronbach's Alpha Based on Standardized Items</th>
<th>N of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>.629</td>
<td>.672</td>
<td>34</td>
</tr>
</tbody>
</table>
Establishing validity is the next important step and it can be established using a panel of experts and a field test. Type of validity (content, construct, criterion, and face) to be obtained depends on the objectives of the study. If the questionnaire is measuring what it intends to measure then it’s a valid questionnaire. For the current life skills scale concurrent validity is established, as it is an adapted version of a standardized scale. The results of Pearson product-moment correlation revealed that overall score of LSS was moderately correlated (r=0.470, p<0.01) with total score of Life Skills scale (Vranda M., 2009), which is (r=0.507, p<0.01). Thus reflecting the concurrent validity of this adapted version is nearly same and can be used for the target population.

Table 2 indicates the Correlation Values and its significance

<table>
<thead>
<tr>
<th></th>
<th>Total Pre Score</th>
<th>Total Post Score</th>
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<tbody>
<tr>
<td>Total prescore Pearson  Correlation</td>
<td>1</td>
<td>.470**</td>
</tr>
<tr>
<td>Sig. (2-tailed) N</td>
<td>60</td>
<td>60</td>
</tr>
<tr>
<td>Total post Pearson Correlation</td>
<td>.000</td>
<td>1</td>
</tr>
<tr>
<td>Sig. (2-tailed) N</td>
<td>000</td>
<td>60</td>
</tr>
</tbody>
</table>

Analyzing effects of interventions by paired sample t test

The effects of intervention are clearly visible through the result obtained on the paired sample t-Test. The t-test results reflects an increase in the life skills score after intervention. The total pre score t-test mean increases from 108.27 to total post test mean result of 130.77. Hence, showing a significant difference in the pre and post test scores.

Table 3: Pre and post intervention differences through t-test

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>N</th>
<th>Std Deviation</th>
<th>Std Error Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair 1</td>
<td>108.27</td>
<td>60</td>
<td>10.243</td>
<td>1.322</td>
</tr>
<tr>
<td>total prescore</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>totalpst</td>
<td>130.77</td>
<td>60</td>
<td>6.503</td>
<td>.839</td>
</tr>
</tbody>
</table>

Conclusion

Following a systematized development process of framing a questionnaire for data collection is important to reduce measurement errors. It helps in conducting a research in a proper manner and it also helps a researcher to understand the issues and problems of the target population. Understanding the process of developing a questionnaire is of immense value to educators, researchers and academicians in present scenario. It has to be a ground rule for conducting an error free research, to establish a research methodology that targets the hypothesis efficiently.

The present pilot study conducted has given an insight into both the concepts of delinquency in India, and problems that these children further face in the observation homes. Purpose of this study is to develop an intervention module for these children through life skills education training which could be used as a part of the routine of the children staying in the observation home. The results of the pilot study have indicated a difference of score on many life skills like decision making, communication skills and inter personal relations, pre post intervention. Thus, paving way to develop this research model. Positive feedback was given by the authorities of the observation home and as well as the participants seemed satisfied and interested in being a part of such LSE based activities. It was evident from the Semi structured interviews of the care takers and authorities along with the participants that were conducted both pre and post training, that LSE as a training module not only will benefit the juvenile delinquents but will also create a better scenario with in the observation home. With help of the activities conducted in this training module, children will be able to adjust and accept their situations and will understand the amount of risk and vulnerability in their lives. Children will be able to develop better decision making abilities, thus preventing them from reentering into the vicious cycle of crime and delinquency.

References


