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International Journal of Law and Psychiatry



Psychosocial adversity, delinquent pathway and internalizing psychopathology in juvenile male offenders



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ARTICLE INFO

Available online 20 August 2015

Keywords: Juvenile delinquency Psychosocial risk Internalizing psychopathology Adolescent Psychopathology Scale — Short-Form

ABSTRACT

The main aim of the present study was to investigate the presence of a set of risk factors relating to childhood life events and other psychosocial factors that may be associated with criminal indicators and with the prevalence of internalizing psychopathology in a sample of adolescent offenders. Fifty male adolescents in the custody of the Portuguese Juvenile Justice System participated in the study (M = 15.8 years of age). The Adolescent Psychopathology Scale - Short Form (APS-SF) was administered in a structured interview format, and the sociodemographic, family and criminal data questionnaire was filled in by the justice professional after consulting the adolescent's file. Forty-six percent of all subjects had previous delinquent behavior. About 32% of the boys had committed violent offenses and 88% acted with peers. Also, the persistence of the delinquent behavior (50% of the offenders), coupled with the increase in the severity of the crimes committed (38% of the sample), suggests that these adolescents were at risk for serious and chronic delinquency at the time of the intervention. About 32% of the participants reported posttraumatic stress disorder symptoms, 20% had suicide ideation, and a lower percentage reported other internalizing problems. Institutionalization, maltreatment and conduct problems in childhood, and family risk factors (parental conflict, absence of a father figure, lack of parental control and family substance addiction) were related with the report of internalizing problems. Moreover, the increase in the severity of criminal offenses and living in a correctional facility were associated with higher levels of posttraumatic stress, interpersonal problems, anxiety and depression. This study draws attention to the importance of assessing indicators of psychopathology and of psychosocial risk in intervention programs with young offenders, but also to the need of family focused interventions in order to help prevent recidivism.

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1. Introduction

The results of several criminological studies have consistently identified a set of individual variables that characterize the overall delinquent behavior pattern. These variables are the prevalence of males over females, the trend for the onset of criminal activity to be situated around 14 years of age, and the propensity for the peak of delinquent activity to lie around 17 to 18 years of age (Farrington & Loeber, 2001; Lipsey & Derzon, 1998; Moffit, 1993). These variables are, however, insufficient to explain the development of the delinquent pathway in adolescence. Other individual risk factors have been associated with the development of antisocial behavior in adolescence, such as substance abuse (Slade et al., 2008), lack of educational investment and school failure (Farrington, Jolliffe, Loeber, Stouthamer-Loeber, & Kalb, 2001; Loeber et al., 2001), as well as disruptive conduct with onset in early childhood (Farrington & West, 1990).

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At the family level, data from the Cambridge Study in Delinquent Development (Farrington & West, 1990) and from the Pittsburgh Youth Study (Farrington et al., 2001; Loeber et al., 2001) are considered as useful predictors of antisocial behavior in adolescence and early adulthood: the failure of parental supervision, parental conflict and divorce, the presence of a parental antisocial figure in the household, the mother's age at birth of the child, and living in a large family with a low socioeconomic level. Moreover, Flouri and Buchanan (2003) have found that the nonexistence of a father figure in the household was related to worse outcomes in psychosocial adaptation in boys. Also, recent investigations have indicated family factors, such as parental substance addiction, maternal mental problems, failure of parental control or supervision, parental conflicts, domestic violence, and antisocial peers as risk variables that act cumulatively in the onset and persistence of the child's delinquent pathway (Church et al., 2012; Huskey & Tomczak, 2013). Furthermore, continued abuse and neglect during childhood have been indicated as significant predictors of persistent antisocial behavior during adolescence (Barnoski, 2004).

Thus, the information gathered in the last two decades allows researchers to state that juvenile delinquency is a multifactorial phenomenon, led by the reciprocal dynamic interrelationships of the youth's

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individual features and of the characteristics of their key social systems (family, peer relationships, school environment, and the wider community) (Agnew, 2003; Bender & Losel, 1997; Church et al., 2012).

One main focus of criminological studies is to identify which factors may act as predictors of the persistence or desistance of the delinquent pathway through the use of various criteria: such as the number and the nature of the offenses, psychopathic traits (Price, Salekin, Klinger, & Barker, 2013), low self-control (Hoge, Andrews, & Leschied, 1996), exposure to violence (Huculak, McLennan, & Bordin, 2011; Jain & Cohen, 2013), substance abuse (Jackson, Mrug, Cook, Beidleman, & Cropsey, 2011), delinquent peers, and academic problems (Church et al., 2012; LeBlanc, 1998).

For this purpose, Moffit's (1993) distinction between adolescentlimited and persistent antisocial behavior contributes to the understanding of the etiological factors for delinquency, but also it helps to predict the adolescent's future delinquent path, particularly for adolescent males. The author developed a developmental taxonomy to explain persistent delinquency and adolescence-limited offending. In the case of offenders with adolescence-limited criminal activity, the causal factors would be proximal and specific to the period of adolescence, thus expressing a discontinuity in their lives (Moffit, 1993). Characterized as not presenting a serious history of antisocial behavior, these individuals would show little propensity for engaging in a delinquent path in adulthood. Thus, as Moffit (1993) explained, adolescence-limited offenders would be experiencing a temporary maturity gap that would encourage them to express a mimetic antisocial behavior as part of a normal process of adjustment. These adolescents would be protected from becoming persistent offenders due to their individual resources (i.e., appropriate social skills, average or higher cognitive abilities, and good academic performance).

In contrast, for a small group of adolescents the criminal offenses would be part of a pathway marked by chronic or life-course-persistent antisocial behavior. An analysis of the causal factors early in their childhoods ought to explain such a continuity of criminal offenses (Lahey & Waldman, 2003). According to Moffitt's theory mentioned earlier, these children would present a biological vulnerability (i.e., subtle neuropsychological deficits) that would interact cumulatively with a current criminogenic environment, resulting in a stable and persistent pattern of criminal offenses that would persist in adulthood.

In conformity with this criminal-developmental framework, a study by Born, Chevalier, and Humblet (1997) with a sample of 363 juvenile offenders in custody showed that institutionalization during childhood due to family maltreatment and a family background of antisocial behavior predicted recidivism. Furthermore, Loeber and Farrington (2001) identified a record of persistent disruptive behavior in childhood as predictive of serious, violent and/or chronic delinquent behavior. Similar results were found in other longitudinal studies (e.g., Janson & Stattin, 2003; Moffit, Caspi, Belsky, & Silva, 1996). Other prognostic indicators for delinquency in adulthood are deviant behavior in adolescence (e.g., substance abuse, behavioral problems), and poor school motivation, suggesting that these variables may have common underlying factors, such as deficits in parent-child relations and psychopathological problems (Blaauw, Kerkhof, & Vermunt, 2011; Church et al., 2012). Thus, serious and violent juvenile offending has been associated with adverse health, education, vocational, and interpersonal consequences seen into adulthood (Tarolla, Wagner, Rabinowitz, & Tubman, 2002).

Moreover, mental health problems in this group are linked with major morbidity and with premature mortality (Rutter, Giller, & Hagell, 1998). The results of the National Inquiry into the Human Rights of People with Mental Illness conducted in Australia (Burdekin, 1993) indicated a prevalence of mental problems in 30% to 50% of adolescents under custody of the Justice System, seven times higher than the level reported in the general population.

Also, Bickel and Campbell (2002) found a prevalence of psychopathological disorders five times higher than the general population disorder rate, using the Adolescent Psychopathology Scale, in a sample of fifty adolescents of both genders held in correctional facilities; about 46% of the participants suffered from a depression and/or anxiety disorder, and 36% reported posttraumatic stress disorder, which the authors attributed to family abuse and neglect during childhood. Furthermore, a systematic review of the literature by Vermeiren (2003) of research conducted with delinquent adolescents indicated an incidence of both internalized and externalized disorders, higher than the incidence rate of adolescents from the general population. Likewise, a study conducted by Robertson, Dill, Husain, and Undesser (2004) with 482 adolescents in detention, using the Adolescent Psychopathology Scale, found that about half of respondents had conduct disorder, 36% had substance abuse, 20% had major depression, and that about 7% had generalized anxiety disorder. A high prevalence of psychopathology was also found in large samples of incarcerated adults (e.g., Blaauw et al., 2011; Carvalho et al., 2013), which is suggestive of continuity over time of psychopathological disorders in delinquents. However, as Vermeiren (2003), investigations are more often designed to assess general patterns of behavior problems than specific psychopathological disorders and their co-occurrence.

Furthermore, a better knowledge about the interrelationships between deviant behaviors, psychopathological problems and contextual risk factors may not only enhance the knowledge about the risk factors, but, also, highlight the individual and social resources available to the adolescents in conflict with the law. Studies contributing to the understanding of the variables associated with psychosocial adaptation are recommended because it may contribute to the development of early intervention programs that involve the enhancement of both these adolescents' individual assets and the resources available in the family and in the community (UNICEF, 2012), and consequently, to make possible for professionals to promote rehabilitation and reintegration into society.

In recent years, a number of studies have focused on psychopathological traits, particularly psychopathy, as a way to differentiate adolescent-limited versus long-term or persistent offenders (e.g., Fritz, Wiklund, Koposov, Klinteberg, & Ruchkin, 2008; McCuish, Corrado, Lussier, & Hart, 2014; Pechorro et al., 2013; Rubio, Krieger, Finney, & Coker, 2014). However, the study of internalizing disorders is extremely relevant in juvenile delinquents, due to the higher proneness to emotional distress and suicide behaviors (ideation and attempt) of this specific group, when compared to general population samples (Bickel & Campbell, 2002; Gunter, Chibnall, Antoniak, Philibert, & Hollenbeck, 2011; Huskey & Tomczak, 2013). With this aim, several studies have identified comorbidity between posttraumatic stress disorder, anxiety disorders, antisocial behavior, alcohol abuse, and academic underachievement in community samples (e.g., Lemos, Faísca, & Valadas, 2011; Linning & Kearney, 2004).

In accordance with Rutter et al. (1998), the study of comorbidity may help to highlight causal mechanisms underlying the antisocial behavior, because, although several antisocial individuals may not suffer from any psychiatric disorder, internalizing disorders, such as depression and elevated suicidal risk, have been found in juvenile delinquents.

Our study was guided by four main objectives: 1) to investigate the presence of a set of risk factors relating childhood life events and other psychosocial factors that may be associated with criminal indicators (such as age of onset, type and diversity of offenses); 2) to analyze the prevalence of internalizing psychopathological disorders in a sample of adolescent offenders and according to the courts' measure; 3) to examine the prevalence of internalizing psychopathology according to the delinquent behavior, and; 4) to assess the relation between reported internalizing psychopathology and individual and contextual variables indicated in the literature as increasing the risk, or, inversely, having a protective or buffering effect from engaging in a delinquent pathway (e.g., family structure, family antisocial behavior, parental control, parental conflict, school dropout, etc.).

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