

The Need for Behavioural Rehabilitation in Prisons among Youth

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ABSTRACT

Crime problem has resulted in material costs to the mental health and criminal justice system. In India, thousands of people enter the prison and juvenile homes each year, and very limited numbers are periodically released. There is a very limited opportunity to offer a corrective experience is completely lost in our system which looks at a time is a process of punishment and has the attitude that nothing works. That is certainly not the case. The present crime system serves as a ground to convert small-time offenders into permanent offenders. This also helps them in be a part of this crime world where limited opportunity is there for self-correction. The biggest failure of this system is limited opportunities for change in attitude and behavior in our society. There is a need to understand the present system of prison setting and rehabilitation systems.

Keywords: *Youths, Rehabilitation, Punishment, Prison etc.*

Youth violence deeply harms not only its victims but also their families, friends, and communities. There are close links between youth violence and other forms of violence. Violent young people frequently commit a range of crimes and display other social and psychological problems. The age of youth varies as per the definition given in the concerned Acts and Sections but the age of youth has been defined to be 15 to 29 years as per Juvenile Justice Act, 2000 and National Youth police, 2004. Violence among youths includes murder, different types of physical violence, verbal violence, and emotional abuse; neglect, dacoity, rape and exploitation, such as through pornography etc. The following paper covers abuse, killing, statutory rape, pornography, sexting, and other crimes among youths. Human aggression can be manifested towards self or others, can be direct or indirect, physical or emotional, active or passive, and verbal or non-verbal (Chandrashekar et al., 2007). It may even take the form of slavery such as forcing co-prisoners to perform activities that degrade them. Violence and aggression raise concerns about its serious impact on the correctional system, the safety of others, an economic and public health issue. Violence in prison settings

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is endemic but at times it takes epidemic forms if proper mechanisms are not in place. Correctional facilities have a responsibility to take "reasonable measures" to preserve and protect inmate safety (Wolff & Shi, 2009). The problem of aggression in correctional institutions should be recognised and effective preventive measures need to be put in place against violent behaviours (Merecz-Kot & Cebrzynska, 2008). Rates for youth homicide, though, vary considerably by region and by country, and female rates are almost everywhere much lower than male rates (WHO, 2002). According to Moffitt, Caspi, Rutter, and Silva (2001) and Dhir (2003), these youths are likely to experience a series of difficult behaviours in early age and its consequences: criminal and aggressive behaviour, homelessness, bullying, substance use early death, truancy etc. The violence that involves antisocial and disruptive behaviour and reflects impaired functioning in multiple domains in a youth's life. Violent behaviour represents a fairly common pattern of impulsive and antisocial behavior entailing enormous cost to afflicted individuals, their victims, and society. Number of factors including a wide variety of both dispositional such as, temperamental vulnerabilities and cognitive deficits involved with such problem. Family and environment plays a major role on developing violent behavior among youths. It does not focus on a single risk factor but blames multiple risk factors to explain the development of violent behaviour (Dodge & Pettit 2003; Frick, 2006). Correctional officers are often the only staff available 24 hours a day; thus, they form the front line of defence in preventing suicides and other violent behaviour (World Health Organization, 2007).

There is an urgent need to explore the reasons behind the offending behaviours that lead to people getting into prisons or rectify homes so that the best remedy can be offered. A person may become violent because of his/her difficulty in controlling anger. Anger management techniques will help such an individual in the long run. People who get into frequent fights with the family may benefit from family therapy. Hence, there is a need to identify the characteristics which can predispose the prisoner to commit a crime or reoffend. This is also called identifying an individual with risky behaviour. Risky behaviour is any behaviour that places a person at increased probability of suffering from a particular condition compared to others in the normal population and it increases the possibility of negative consequences.

This research focuses on the youths with behavioural problem, presents brief and different intervention strategies for managing each and concludes with a proposed set of recommended goals for creating a national strategy to develop behavioural rehabilitative and reformative programmes in prison settings. Some significant amount of empirical evidence shows that, cognitions operate to modify behaviour of aggressive youths in varied social situations. According to Huesmann and associates (2003) social behaviour is mostly controlled by cognitive 'scripts' learned during early developmental stages. Here cognitive scripts are a representation in memory of a detailed sequence of actions corresponding to a familiar event. While explaining the sequential steps through which scripts guide the behaviour, an individual possessing a stable cognitive representation of the script, enters a social interaction that contains elements evoking the script, and retrieves the script from memory. The role of the content of thought and the process of thinking in mediating behaviour is emphasized by

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the concept of the script (Tolan & Cohler, 1993). Youths who have violent behaviour, show distortions and deficiencies in cognitive processes, such as generating alternative solutions to interpersonal problems, identifying the means to obtain particular ends or consequences of one's actions.

Cognitive-behavior interventions (CBI) are those interventions which are used to modify cognitions with the aim of changing feelings and/or behaviour. The core assumption is that people feel and behave the way they do because of what they think. Consequently, CBI can be used to change dysfunctional thoughts, symptoms of emotional distress as well as and maladaptive behaviour like violent behaviour. Majorly cognitive-behavioral programs is trying to attempt and assist offenders in different tasks such as identify the problems that led them into conflict with society, select goals, generate new alternative prosocial solutions, and implement these solutions (Cullen and Gendreau, 2000).

Cognitive behaviour intervention help the youths for community re-entry with less chances of reoffending. CBI involves building attitudes and skills that are required to be morally responsible and to develop empathy along with allowing the offenders to develop insight for the welfare and safety of others (Little, 2000, 2001; Ross and Fabiano, 1985; Wanberg and Milkman, 1998).

This approach in prison setting employs the programs such as Aggression Replacement Training (ART), Criminal Conduct and Substance Abuse Treatment, Strategies for Self-Improvement and Change (SSC), Moral Reconciliation Therapy (MRT), Reasoning and Rehabilitation, Relapse Prevention Therapy (RPT) and Thinking for a Change (T4C) etc. that targets the maladaptive behaviour and finally leading to adaptive behaviour. Different outcomes are there. The outcome of these programs must include an approach that focuses on making the offender to understand his/her responsibility toward others and the community by laying an emphasis on empathy building, victim awareness, victim empathy, social conditioning especially in juvenile offenders and developing attitudes that show concern for the safety and welfare of others. It also includes helping offenders inculcate the belief that when a person engages in behavior that is harmful to others and society, they are violating their own sense of morality (Wanberg and Milkman, 2006).

In Forensic setting, there are a lot of studies based on the effectiveness on CBI which provides the evidence that it works in regulating and transforming the cognitive distortions into the adaptive behaviour by modifying the maladaptive ones. According to Pearson, Lipton, Cleland, and Yee (2002), they used a meta-analysis to study the effect of behavioural and cognitive behavioural programs on behavioural problem. They examined sixty nine studies from 1968 to 1998 that earlier used behavioural approaches or cognitive behavioural approaches to reduce recidivism, although they found that both types of interventions were more effective in reducing problem behaviour than their comparison groups. In a maximum number of programs that focused on cognitive behavioural social skills development and cognitive skills programme were the most effective in reducing youth behavioural problem.

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In India and other countries despite of the effectiveness of CBI in the prison setting and its sustainability within the correctional, observation home still certain risk factors are also associated on re-entry of offenders in the community. It will again create emotional, psychological, and family disruption in childhood and adolescence; involvement with an antisocial peer group as a youth and school problems or failure; alcohol and other drug use in childhood and adolescence. There are some more factors that make them vulnerable to accept changes such as motivational level and the changes, role models and reinforces in the society and expression of disapproval stands in stark contrast to the levels of interest, concern, and warmth previously offered by the society and many more. There is very limited research on the applications of therapy in a prison setting in India. In the presently available literature on therapeutic researches in India, it is very important for us to extend the services to above-mentioned institutions which will help prisoners for recidivism and community re-entry.

Implementing CBT in correctional settings also has its challenges. Although it addresses explicitly cognitions interfering behaviour, common correctional challenges to therapy such as lockdowns, group consequences for the behaviour of a few, and inmate on inmate pressure to conform to behaviours inconsistent with societal norms need to be specifically addressed by CBT providers.

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Conflict of Interest

There is no conflict of interest.

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