VALUE ADDED COURSE

1. Name of the programme & (Code)

Juvenile Delinquency (**FMT- VAC 11**)

2. Duration & Period

30 hrs & January 2022 to June 2022

3. Information Brochure and Course Content of Value Added Courses

Enclosed as Annexure- I

4. List of students enrolled

Enclosed as Annexure- II

5. Assessment procedures:

Multiple choice questions- *Enclosed as Annexure- III*

6. Certificate model

Enclosed as Annexure- IV

7. No. of times offered during the same year:

1

8. Year of discontinuation: 2022

9. Summary report of each program year-wise

Value Added Course- January 2022 to June 2022					
Sl. No	**Course Code**	**Course Name**	**Resource Persons**	**Target Students**	**Strength & Year**
1	FMT-11	Juvenile Delinquency	Dr. S.N.Rathod	2nd MBBS	20 (January 22 – June 22)

10. Course Feed Back

Enclosed as Annexure- V

RESOURCE PERSON **COORDINATOR**

Juvenile Delinquency

PARTICIPANT HAND BOOK

BIHER SLIMS

COURSE DETAILS

Particulars	Description
Course Title	Juvenile Delinquency
Course Code	FMT VAC 11
Objective	1. Parenting and Delinquency 2. School Effects on Delinquency and School-Based Prevention 3. Neighborhoods and Delinquent Behavior 4. Prenatal and Early Childhood Prevention of Antisocial Behavior 5. School Prevention Programs 6. Institutionalization and Treatment 7. Gang Trends, Trajectories, and Solutions 8. Weapon Carrying and Use Among Juveniles
Further learning opportunities	Psychiatry ,Forensic aspects of Juvenile crimes
Key Competencies	On successful completion of the course the students should be able to manage and prevent Juvenile Delinquency by providing effective counselling, rehabilitation etc
Target Student	2nd yr MBBS Students
Duration	30hrs from Jan 2022 – June 2022
Theory Session	22hrs
Practical Session	8 hrs
Assessment Procedure	Multiple choice questions

1. **Parenting and delinquency:** Aspects of Parenting that Affect Delinquency: As mentioned earlier, the literature on parental influences on delinquency and related behaviors is vast. Fortunately, recent years have seen several efforts to organize the results of this literature either through general reviews or meta-analyses designed to summarize the statistical associations among parenting factors and delinquency. Combining the results of these

reviews provides a useful summary of what appear to be the most important parenting-related predictors of delinquency. The strongest and most consistent predictors include childrearing skills/ disciplinary practices, parenting style (neglect, permissiveness), parental rejection, monitoring/supervision/child disclosure, psychological control, maltreatment, parental stress, parent–child relationship quality, and parent antisocial behavior. It is difficult to judge which set of parenting factors is truly most important, however, because studies use different terms and measurement strategies for these concepts. Nonetheless, the factors that emerge from these meta-analyses provide a useful list for the discussion that follows. In addition, the association between family structure and delinquency is included in this discussion since a relatively large number of studies have addressed it. Other potential influences, such as parental age, mental health, socio-economic status (SES), and employment patterns are not reviewed since they have only modest effects on delinquency once other characteristics are considered. Studies suggest that when mothers and fathers are inconsistent, such as when only one parent disciplines as the other ignores or downplays infractions, the risk of delinquency is higher. Immediacy of discipline may also have ameliorative effects, with children more apt to recognize rules for which they are punished – and consequently follow them – when it occurs closer to the infraction. Moreover, when mild discipline is combined with reasoning, it seems to have a more beneficial effect. Yet, harsh forms of physical punishment are positively associated with delinquency . Although maltreatment is discussed in another chapter, some studies indicate that even a nominal amount of physical reprimand, such as spanking, increases the likelihood of delinquency and other maladaptive behaviour. However, this effect may be conditional; research suggests that when spanking is accompanied or followed up with demonstrations of parental affection, the risk of subsequent misbehaviors is attenuated.

Parenting style: The child and adolescent development literature includes a rich and substantial set of studies on parenting style. Although there had been studies of various aspects of parenting for many years, it was not until Diana Baumrind (1967) developed a parenting style typology that the research became consistent. Based on the amount of support and control provided by parents, Baumrind (1967) identified four parenting types: authoritative, authoritarian, indulgent, and neglectful. Authoritative parents offer their children high levels of affectionate support and control by supervising activities and maintaining a consistent and mild disciplinary style. They are demanding and provide clear rules and direction, but also are responsive, warm, and offer regular praise. Authoritarian parents are high on control but low on support. They closely supervise their children's activities, but offer little praise and warmth. Indulgent parents are highly supportive, but they do not provide much direction or discipline and engage in relatively low levels of supervision. Finally, neglectful parents offer little support and do not provide direction,

rules, or monitoring. As discussed later, an advantage of the parenting style approach is that it combines two important aspects of parenting, rather than attempting to isolate one concept as more important than another. Studies indicate that indulgent and neglectful parenting places adolescents at the highest risk of delinquency. although meta-analyses suggest that neglect is a stronger predictor than indulgence or permissiveness, and it leads to more serious long-term involvement in delinquency. On the contrary, authoritative parenting is associated with a relatively low risk of delinquency. Interestingly, having even one authoritative parent may be sufficient to attenuate the risk of delinquency.

Parental rejection: Although parental rejection is similar to a neglectful parenting style, there are differences. Whereas neglect typically represents indifference towards one's child, parental rejection is demonstrated not only by a lack of love or affection, but also an absence of support and overt displays of hostility. Being overly critical of an adolescent, showing resentment, and consistently dismissing his or her views are also indicators of parental rejection. Given the research on parenting style, it is not surprising that parental rejection is positively associated with delinquency. Moreover, parental rejection can be especially acute if it occurs at an early age. For example, one study determined that maternal rejection at one year of age was associated with an increased risk of violent behavior at age 18. Parent–child relationship quality Among the hundreds of studies of parenting and adolescent misbehaviors, no topic has garnered as much attention as the emotional relationship between parents and children. The literature has often used the term parent–child attachment to describe this concept. The meta-analyses discussed earlier included more than 50 studies that examined particular qualities of attachment such as parental support, affection, positive communication, and praise. Moreover, as discussed earlier, affection and praise are two of the characteristics that Baumrind (1967) used to define the four parenting styles. Research has determined that adolescents who have stronger affectionate relations with their parents and experience parental warmth and praise are less likely to be involved in delinquent activities. They are also less likely to be stigmatized by a delinquent label or become involved with delinquent peers. Moreover, indicators of poor parent–child relations, such as conflict and arguments, predict greater involvement in delinquency. There is contradictory evidence, though, concerning whether other aspects of parenting, such as monitoring and disciplinary style, attenuate or otherwise account for the effects of parent–child attachment on delinquency. This may point to the need to consider distinct cross- classifications of parent–child attachments and parental monitoring in order to determine more precisely how parents affect adolescent behaviors . This has been a goal of the research on parenting styles discussed earlier.

2. **School Effects on Delinquency and School-Based Prevention:** Classroom-level influences
Two classroom factors consistently associated with delinquency are a high amount of punishment and low amount of praise given by teachers in class. In one study, positive classroom interactions significantly predicted less violent offending, but not property offending. A stronger academic focus in the classroom significantly predicted less property offending, but not violent offending. Similarly, in schools with a greater perceived number of teachers with positive teaching behavior, there was significantly less disruptive behavior and intentional damage of property. In contrast, in schools with a greater number of strict teachers there was significantly more disruptive behavior, violent victimization, and intentional damage of property. In schools with a greater number of teachers reporting discipline problems, there was a significant increase in disruptive behavior, pre-meditated physical violence and intentional damage to property. Several classroom-based interventions have been found to reduce problem behaviors, but to a greater extent for boys than girls, and to a greater extent when outcome measures are based on teacher ratings as opposed to peer or parent ratings of problem behaviors. In general, school violence rates were more strongly associated with aspects of the school's social rather than the physical environment. Lower rates of school violence were associated with five factors: (1) positive relationships with teachers; (2) student awareness of school rules and perceptions of fairness; (3) student perceptions of "ownership" of their school (stronger predictor than academic values and ability); (4) positive classroom and school environments focused on student comprehension; and (5) lower perceived physical deterioration and presence of school safety interventions aimed at improving the school physical environment.

Community influences: Although higher levels of crime, poverty, and unemployment in the community surrounding a school are often associated with higher levels of school victimization, the exact causal mechanisms are not entirely clear. Research has uncovered complex links between poverty and crime, and between social disorganization and violence.Community characteristics related to violence include concentrated poverty; high residential mobility and population turnover; family disruption; high density in housing and population; weak local social organization, such as low density of friends and acquaintances; few social resources; weak intergenerational ties in families and communities; weak control of street-corner groups; low participation in community events and activities; and opportunities associated with violence. Although such relationships are complex, it can safely be said that community influences combine with poverty and with one another to influence crime rates.

School-Based Prevention Programs School-based delinquency prevention broadly refers to strategies that take place in a school building, or under the authority of school personnel, designed to reduce or prevent the occurrence of problem behaviour. One meta-analysis integrated results from 165 experimental or quasi- experimental studies of school-based prevention interventions. Outcomes of interest were alcohol and drug use, dropout and non-attendance, delinquency, and other conduct problems. Strategies were partitioned into environmentally and individually focused, and then categorized by the presence of 11 treatment components or activities. Interventions with an environmental focus may alter the organizational structure of the school, increase the safety of the school building, improve teacher classroom management, or adjust the disciplinary practices used by administrators. Individually focused strategies consist mostly of psychosocial programs that utilize individual counseling, behavior modification, skills-based learning, and the like. School-based prevention strategies were generally effective for reducing alcohol and drug use, dropout and non-attendance, and other conduct problems. For delinquency, mean effect sizes across all program types were positive but had a 95% confidence interval that included zero. Three out of four environmental approaches were found to be effective for reducing delinquency: school and discipline management (0.16); classroom or instructional management (0.19); and reorganization of grades or classes (0.34). Establishing norms or expectations for behavior was the only environmentally focused intervention strategy that did not achieve a statistically significant effect size. Conversely, only one of the seven individually focused interventions had a significant and positive effect on reducing delinquency. This was an instructional approach to self-control or social competency with cognitive– behavioral or behavioral instructional methods (0.10). Without the cognitive–behavioral component, self-control and competency instruction had a null to negative effect size. Another way to categorize school-based delinquency prevention efforts is in terms of their reach and focus (Greenberg, 2010). In a series of meta-analyses, Wilson & Lipsey (2005, 2007) grouped interventions into the following formats (i.e., reach): universal; selected/indicated; comprehensive/multimodal programs; and special schools or classes. These groupings were based on a general format as well as treatment modality within each format (i.e., focus). Universal programs are delivered to an entire classroom of students, or an entire population of a school. Such programs often aim to improve resilience, coping and other social skills. Schools may be selected to deliver a particular program if it is located in a high-risk neighborhood, for example; but students receive programming simply by virtue of attending a particular classroom or school. Receipt of services is not based upon individual risk level or problem behavior. Universal strategies are the most commonly used in practice, and are often relatively inexpensive to implement. Universal interventions can have a variety of foci, including teachers' classroom management skills and communal school organization. Curricula that teach students new skills have received the most empirical attention. These

programs often focus upon improving the ability to interact with others and on developing self-control and healthy values to resist delinquent behavior in the future. A majority of skills-based programs fall under the term “social and emotional learning”. In their first meta-analysis, Wilson and Lipsey (2005) reported an overall mean effect size of 0.18 for universal interventions in schools (n = 61). In their most recent update (Wilson & Lipsey, 2007), 16 new programs were added (n = 77). The weighted mean effect size for universal programs increased to 0.21 . Common treatment modalities include cognitively-oriented programs, social skills programs, behavioral strategies, and counseling or talk therapy (Wilson & Lipsey, 2005). The most common modality was cognitively-oriented approaches, which also had the largest mean effect size (0.33). Social skills programs were a close second, with an overall mean effect size of 0.30. The mean effect size for counseling was 0.16, but only one program was included in this category, making this conclusion tentative (Wilson & Lipsey, 2005). Behavioral programs could not be examined using objective measures; but had an overall mean effect size of 0.16 using student and teacher self-report measures. Younger students in kindergarten and elementary school, and students of low socio-economic status (regardless of grade level), benefited the most from universal strategies. Despite treatment modality, studies with no implementation problems produced higher effect sizes than those with implementation issues . Deciding on an appropriate universal strategy should depend upon school grade as well as risk level, the authors recommend, with cognitively-oriented approaches the most optimal for high-risk students, and social skills programs generally effective across risk levels. Similarly, Hahn and colleagues (2007) found strong evidence that all intervention strategies in this format (e.g., informational, cognitive/affective, social skills building) consistently produced some reduction in violent behavior among school-aged children. Program effects were consistent at all grade levels. Hahn et al. (2007) confirmed that universal interventions can be effective at reducing various forms of violent behavior among high-risk school environments defined by low socio-economic status and high crime rates, as well as within schools that present none of these characteristics. There was no association between program effectiveness and either frequency, duration, or total exposure (Hahn et al., 2007). One example of an effective universal intervention is the Good Behavior Game (GBG), assessed as a “promising” program by Blueprints for Healthy Youth Development (2013). This intervention is delivered to all children in a particular classroom despite individual risk level. While the GBG can be administered to low- risk populations of early elementary school children, the strongest results have been found for children demonstrating early high-risk behavior. Primarily utilizing behavioral modification techniques, GBG is a classroom management strategy designed to improve classroom behavior while also preventing future criminality among elementary school-aged children. Teachers are taught ways to define tasks, set rules, and appropriately discipline students. Groups or “teams” of individually responsible students

receive checkmarks for bad behavior on the board throughout the game. By the end of the exercise, teams that have not exceeded a set number of checkmarks are rewarded, while those in the other category receive no rewards. Students are encouraged to continuously monitor their own behavior, be accountable to their group, and conform to pro-social expectations. The GBG has consistently demonstrated beneficial effects for children on both a short-term and long-term basis. Students participating in the GBG were less aggressive and shy at the end of Grade 1 compared with control groups; and males at the highest levels of aggression in Grade 1 decreased their levels of aggression by Grade 6 (Blueprints for Healthy Youth Development, 2013). In spite of overall positive effects, universal interventions have some limitations. First, they are often low-dosage. Programs may not deliver enough services for high- risk students who may require a higher dosage (Greenberg, 2010). Second, universal programs necessitate the participation of an entire school system. Given budget constraints and the pressures placed on school districts to improve academic performance, it may be difficult to convince an entire school district to implement a program with a non-academic focus. Selected/indicated programs are delivered to particular groups of students who have been selected for participation because they exhibit characteristics that place them at an elevated risk for future delinquent behavior (Greenberg, 2010). Nearly all of the selected/indicated programs included in the Wilson and Lipsey (2005) meta-analysis were “pull-out” programs delivered to students outside of the primary classroom in either small groups or one-on-one. While the terms selected and indicated are often used interchangeably to describe strategies under the “targeted interventions” umbrella, these are distinct approaches. Students can be chosen because they have already begun exhibiting high levels of aggression, depression or other evidence of maladjustment (indicated programs); or because of an experience that puts them at a higher risk for problem behavior in the future (selected programs). Selected and indicated interventions, like universal programs, can often be characterized as social and emotional learning. Special schools or classes are delivered in schools or classrooms outside of the mainstream school environment. An academic curriculum is provided in addition to programming that targets social skills and/or aggressive behavior (Wilson & Lipsey, 2005). Typically such programs serve youth with serious behavioral or academic difficulties that resulted in their placement. In their first meta-analysis, Wilson and Lipsey (2005) examined 37 programs within this format. The weighted mean post-test effect size was 0.07, and did not reach statistical significance. In 2007, the mean aggressive/disruptive behavior effect size for programs in this category was 0.11, with a p-value less than 0.10 (Wilson & Lipsey, 2007). Moderators of effect size included method of group assignment, level of risk of students, and (once again) quality of program implementation. Comprehensive/multimodal programs refer to the inclusion of multiple treatment elements and formats within the same intervention (Wilson and Lipsey, 2005, 2007). Most comprehensive programs utilized three or more formats or

modalities simultaneously, while universal and selected/indicated generally used one only, and at most two or three. These strategies utilize classroom-based and pull-out components. . In addition to student-focused learning, these programs may also incorporate parent training, family involvement, capacity building among administrators, or teacher training. Comprehensive/multimodal programs were found to be surprisingly ineffective, with a non-significant mean effect size of 0.06 across 17 different programs. While some comprehensive programs were more or less effective than others in the group, a majority did demonstrate effect sizes greater than zero . In an updated 2007 analysis, 21 programs were included in this category (Wilson & Lipsey, 2007). The overall mean effect size decreased to 0.05 and was not statistically significant. The authors advised that identifying which program components contributed to the success of some approaches over others would be of great benefit to practitioners. Many agree that any school-based prevention strategy that is delivered in isolation of other developmental services is unlikely to have a substantial effect on delinquent behavior. When programs are partitioned into categories for analysis, rarely are effect sizes large for single program components, even if they are statistically significant for a given category. In practice, multiple interventions are often implemented in the same school building and it becomes difficult to parse out which program components produce effective results.

3. **Neighborhoods and Delinquent Behavior:** The influence of neighborhoods on delinquency has been an enduring part of American criminology. Nonetheless, there is no single unifying theory of neighborhood effects. Instead, multiple perspectives exist. Competing perspectives highlight diverse mechanisms operating at the neighborhood level to produce delinquency, including three processes that will be the focus of this review: (1) weak institutional control, (2) general strain, and (3) cultural prescription. We first review the origins of theory supporting these three neighborhood-level mechanisms, we describe important contemporary revisions to these original theoretical statements, and we take stock of each theoretical perspective by providing an overview of empirical support from recent literature. In short, the first part of the chapter focuses on what we currently know regarding neighborhood's role in delinquency. Then we shift focus and describe several unresolved issues with respect to neighborhood-level influence, thus presenting an agenda for future research on the neighborhood– delinquency relationship.

   Strain theory: Another possible explanation for the concentration of delinquency within disadvantaged communities is the experience of strain – or the frustration felt as a result of an inability to achieve traditional measures of success. As already mentioned, Shaw and McKay (1942) argued that residents of disadvantaged neighborhoods were susceptible to experiencing poverty-related strain. It was posited by Shaw and McKay that residents of

such neighborhoods would turn to crime due to the lack of opportunities to achieve legitimate success. Therefore, differences in crime rates across neighborhoods could be due to the abundance of individuals experiencing strain within disadvantaged communities. Though incorporated into Shaw and McKay's explanation of delinquency, strain theory actually began with the work of Robert Merton (1938), who argued that the "American dream" of achieving financial success is valued more greatly than are the means used to succeed. Because some segments of the population are unable to meet this goal legitimately, individuals begin to place even less value on the legitimate means of obtaining success. This can result in delinquency; individuals respond by rejecting traditional means of success in favor of illegitimate opportunities that are more readily available to them, such as crime. This idea was later extended in strain-subculture models, put forth by scholars such as Albert Cohen (1955) and Richard Cloward and Lloyd Ohlin (1960) to explain delinquency in the context of juvenile gangs. According to Cohen, working- and lower-class boys had difficulty achieving success in the traditional (i.e., middle- class) sense, thus resulting in problems of adjustment and status frustration. Cohen suggested that there was a collective response to the status frustration experienced by disadvantaged boys. The strained youth rejected middle-class values and established a subculture with goals and values that were the antithesis of middle- class culture, thus creating gangs of boys that favored deviant values. Cloward and Ohlin (1960) also indicated that strained working- and lower-class youth turned to subcultures for the alleviation of status frustration. However, Cloward and Ohlin (1960) noted the presence of distinct types of subcultures. They observed that some gangs provided members with alternative (illegal) means to financial success (i.e., criminal gangs). Others gangs emphasized violence as a means of status enhancement (i.e., conflict gangs), and still others downplayed the search for status altogether and emphasized societal withdrawal through drug use (i.e., retreatist gangs). According to Cloward and Ohlin, strained youths' access to criminal, conflict, or retreatist gangs depended on neighborhood organization. Long-standing, interwoven networks of adult and juvenile criminals within some disadvantaged neighborhoods supported the existence of criminal gangs that could provide illegitimate opportunities for financial success to frustrated juveniles.

Neighborhood effects: developmental or situational? Currently, there is debate in all three major theoretical traditions reviewed herein as to whether neighborhood influences on delinquency – including disorganization- related, strain-related, or subcultural influences – are developmental or situational in nature. We explore this debate for each perspective, beginning with the social disorganization tradition. A developmental social disorganization theory would predict that weak neighborhood systemic control or weak collective efficacy influences the behavior of youth in an enduring way, such that it affects their involvement in delinquency in any location, including places outside the confines of the community. On the other hand, a situational social disorganization theory would predict that weak systemic

control (or weak collective efficacy) only affects rates of delinquent events that occur within the community, regardless of whether the events are committed by neighborhood residents or by youth from other areas. If neighborhoods exhibit developmental effects, this suggests that neighborhoods influence their residents' underlying motivations to offend. For instance, weak community-based control inhibits successful socialization of youth, thereby creating individuals with weak social bonds and an inclination towards criminality. In contrast, if neighborhoods exhibit situational effects, this suggests that some neighborhoods provide opportunistic settings for the successful commission of delinquency. For example, weak community-based control inhibits adequate supervision of youth and "management" of public space.

4. **Prenatal and Early Childhood Prevention of Antisocial Behavior:**

Early-starting conduct problems (CP) that begin in childhood and persist throughout adolescence and adulthood, in the form of antisocial behavior, result in a substantial amount of harm to individual victims and to society. According to the US Department of Justice, in 2011 a violent crime occurred approximately every 26.2 seconds while a property crime occurred every 3.5 seconds (US Department of Justice Federal Bureau of Investigation, 2012). In addition to the serious consequences such behavior has on others, people who commit antisocial acts are often significantly impaired in psychological, social, and occupational domains. In fact, although it is estimated that approximately 1% of females and 3% of males in the population meet criteria for the clinical diagnosis of antisocial personality disorder, the prevalence of this disorder in clinical settings has been shown to be as high as 30%, with estimates even higher in substance- abusing and forensic populations (American Psychiatric Association, 2000). Moreover, research has shown that roughly 5% of individuals exhibit extreme persistent antisocial behavior that accounts for more than half of crimes committed. It is known that individuals who engage in antisocial behavior as adults tend to be repeat offenders who have a long-standing history beginning with persistent CP in early childhood (Moffitt, 1993). Thus, efforts to intervene and prevent such chronic antisocial behavior have increasingly turned toward earlier ages.

Social learning theory: Many parent-focused intervention programs are grounded in the principles of social learning theory . Social learning theory posits that parent modeling plays a pivotal role in the development of child problem-solving and regulatory strategies. Patterson (1982) elaborated on the application of social learning principles to the development of CP in early childhood, suggesting that parents' use of harsh and aggressive behavior management techniques unwittingly reinforces child disruptive behavior, teaching children to use such conflict resolution strategies to deal with interpersonal difficulties with siblings in the home, and subsequently with both peers and adults

outside of the home. Patterson also noted that by parents non-contingently reinforcing children's prosocial behavior, their attention to child disruptive behavior, albeit negative, was responsible for supporting children's use of disruptive behavior. Thus, at the heart of many theoretically based intervention programs is a focus on parent management strategies. Consistent with rapid developments in children's physical mobility and lack of cognitive appreciation for the consequences of their behavior (Shaw & Bell, 1993), social learning approaches have been initiated for children as young as age 2. They focus on reducing negative parenting techniques such as hostility, harsh punishment, and coercion, and promoting positive parenting techniques such as sensitivity, positive reinforcement, and consistent limit-setting.

Adolescence is a critical developmental phase for the onset and recognition of psychiatric disorders including psychoactive substance use disorders (PSUDs). The co-occurrence of PSUDs with other psychiatric disorders has been termed a "dual diagnosis" (DD), and the patients so diagnosed have been defined as "dually diagnosed" (DUDI). The prevalence of DD is high, and the recently increased recognition of the concept of comorbid * disorders has important clinical, public health, and research implications. From the clinical perspective, subgroups of DUDI individuals may respond differentially to specific therapeutic approaches. Regarding public health interests, subgroups of adolescents with comorbid disorders may be at a higher risk of contracting or manifesting additional disorders and of increased severity of the course of each one of the index disorders. The implications for research on DD are that more homogeneous subgroups within a given diagnostic category can be studied to broaden the knowledge about this diagnostic entity. This chapter reviews the methodological and nosological issues in diagnosing and understanding the nature of DD, the epidemiology of DD, and the specific relationship between a variety of psychiatric disorders and PSUDs of adolescents and their families. Finally, special reference is made to future clinical and research implications concerning prevention and treatment of DD. The literature on comorbidity in adults is used as a departure point in some sections due to the sparsity of data on adolescents.

It is often unclear whether a patient's symptoms are a consequence of substance abuse per se or are indicative of a comorbid psychiatric disorder. Moreover, in such patients, the sequelae of psychoactive substance intoxication or withdrawal or both are often difficult to distinguish from the signs and symptoms of concurrent psychiatric disorder . It is important to reemphasize that dual diagnosis is a term limited to the relations hip between disorders and is not applicable to symptoms associated with PSUDs, which are considered to be manifestations of the severity of PSUDs. Rather than accepting reports of DD at face value, one must maintain increased awareness based on an understanding of conceptual and diagnostic models in the practical context delineated above to limit

potential pitfalls in a relatively sparsely researched domain. The diagnostic process of co morbid disorders and the reliability and stability of DD are factors of great importance that as yet have been reported only in research conducted with DUDI adults. Regarding the diagnostic process, information derived from multiple informants is believed to facilitate the process and to enhance the specificity of prevalence estimates of disorders. Also, in the case of DD, a "best estimate" procedure may be helpful in enhancing the accuracy of the diagnostic process. Such a procedure is especially likely to be helpful when data from direct interview either are missing or may be inaccurate if the subject withholds or provides false information. A "best estimate" diagnosis is one made by a clinician on the basis of diagnostic information from a direct interview conducted by another clinician plus information from medical records and from reports of family members. It has been reported that current mood disorders and psychotic disorders were less reliably diagnosed in a group with current PSUDs compared to two control groups, one with past PSUDs and the other without a history of PSUD . However, the results were adequately reliable to aid in classification. It was also concluded that delaying diagnosis until at least 1-2 weeks after cessation of drug use is likely to improve classification results. A study of the stability of psychiatrie comorbidity in alcoholic men after 1 year revealed that the symptoms are stable over time and therefore constitute a potential target for treatment .

5. School Prevention Programs

The school has come to be seen as a prime actor in the development and prevention of delinquent/criminal behavior. This ascendance to prominence is reflected in research focusing on the correlates and causes of behavior, government and private reports linking schools and education to delinquency, and the advent of prevention programs intimately tied to schools and education. The ability to use school problems and concerns to predict possible problems later in life places school personnel in the midst of prevention. Schools are also prime locations for implementing prevention programs. Many interventions often deal with pre-delinquent youths and youths having problems in school. Prevention programs may not always seem to be aimed at delinquency. The interventions are geared toward the specific problematic factors found in the schools. The present chapter will attempt to develop the role of schools as an agent of prevention through a three-step process. The focus is on primary and secondary schools. First, the chapter outlines the level of delinquent behavior in schools. Second, it is necessary to discuss the theoretical support for the role schools play in delinquency. Third, the specific aspects of the educational process that are important for discussing delinquency must be examined. Finally, the chapter will examine programs that have been established to intervene in the harmful aspects of school, with special attention paid to prevention programs demonstrating an impact on subsequent delinquency and in-school misbehavior.

Delinquent Behavior in Schools: Discussion of school prevention programs entails two related but distinct domains of delinquency and crime. The first is general crime and

delinquency committed by individuals in society. Data on both crime and delinquency is available from official records (e.g. the UCR), self-report surveys, and victimization surveys (e.g. the NCVS). Official and victimization data are routinely reported in the media. The UCR reveals more than 10 million index crimes committed in 2010 (Federal Bureau of Investigation, 2011), while the NCVS shows almost 19 million victimizations (Truman, 2011). Beyond the levels of crime and delinquency in society, school prevention programs can address delinquency committed within the school setting. Misbehavior also has an impact on others in the school, either directly as the target of an offense or indirectly through vicarious victimization. The US Departments of Justice and Education routinely collect data on crime and victimization in schools. In 2009–10 schools experienced almost 1.9 million crime incidents (a rate of 39.6 per 1,000 students), from 85.5% of schools (Robers, Zhang, Truman, & Snyder, 2012). Of these, 1.2 million (a rate of 25) were violent crime incidents. In light of media accounts of violent acts in schools (especially homicides), it is important to note that a good deal of in-school violence appears as threats and minor acts, including pushing and shoving, rather than serious violence. Indeed, homicides are rare at school (even with tragedies like Columbine and Sandy Hook), with only 15 during the 2008–9 school year while 7.7% of students reported being threatened or injured with a weapon at school (Robers et al., 2012). Students are not the only individuals victimized at schools. Teachers and staff are also victimized. During the 2007–8 school year, almost 290,000 teachers (7.5%) reported being threatened with injury by a student during school. Another 154,000 teachers (4.0%) were actually the victim of physical attack by a student at school (Robers et al., 2012). Bullying A major topic of concern for many youths, parents and schools is the problem of bullying. The issue of bullying has received a great deal of attention over the past decade. This is partly due to the events at Columbine and other schools, where part of the blame/explanation for the behavior is attributed to past bullying. While most bullying does not lead to such levels of retaliatory violence, it clearly has an impact on the victim. Bullying behavior can be classified into four types: verbal, physical, social and cyberbullying. Too often it is assumed that bullying is primarily verbal, such as teasing and name-calling. It is important to note that many forms of bullying involve physical confrontations that are actually criminal. Included here are hitting, shoving and punching. Starting rumors about someone or ostracizing him/her from participating in events are examples of social bullying. The final major form, cyberbullying, involves the use of the internet and other technologies to attack the victim. This can occur through posts on social media (such as MySpace and Facebook), texts, sexting, and unwanted internet contacts. Information on the extent of bullying generally comes from survey data. According to the 2009 NCVS, 28% of students report being the victim of at least one form of bullying at school. The most common form of reported bullying is being made fun of, insulted or being called names (19% of respondents). Roughly one out of six are the subject of rumors and almost 10% are physically bullied. Cyberbullying, which is not restricted to the school setting, is reported by 6% of the students.

Prevention Programs: A wide range of activities, programs, and educational strategies have emerged to address delinquency and crime both in and outside of schools. Prevention programs can focus on addressing general delinquency concerns, both in and out of the school setting. Other programs tend to target problems that appear mainly in the school

itself. In many cases, the prevention efforts, regardless of the specific problem or location being addressed, have the potential to impact misbehavior in settings beyond the intended target location of problem. Prevention actions and programs can be loosely grouped into the following categories: early developmental prevention, physical security, police/guards in schools, elementary and high school programs, alternative schools, and other efforts. Many other suggested educational changes, such as the provision of relevant instruction and the use of flexible groupings that allow movement in and out of ability levels, have been proposed. Unfortunately, many of these have received only cursory attention and there is little research on their impact on crime/delinquency. This indicates that the impact of such changes on education in general, and delinquency in particular, is still unknown. Early developmental prevention Developmental prevention seeks to address crime and delinquency by identifying and eliminating factors that cause and promote misbehavior. Basically, there is a belief that individuals are conditioned through past experiences and forced to act in certain ways. Various developmental prevention programs seek to prepare young children, youths, and their families for success in school and beyond. Parent training Concern over the preparation and ability of parents to provide an appropriate environment for children is a major thrust in developmental prevention. These programs range from those targeting expectant mothers to those working with families of young children, to those addressing families with school-age children. Three recognized programs are examined below. These are the Elmira Prenatal/Early Infancy project, the Syracuse Family Development program, and the Incredible Years project. The Elmira Prenatal/Early Infancy program targets the earliest stage of a child's development, specifically when the child is still in the womb. The centerpiece of the program is home visitation by nurses beginning during pregnancy and lasting through to the child's second birthday. The target subjects are young, poor, first-time, and often unmarried mothers. Mothers were visited an average of 9 times during pregnancy and 23 times after birth. The visiting nurses focus on three areas: health and health-related activities of the mother and child; learning how to provide appropriate care to the child; and social and personal skills development for the mothers. In addition, the nurses provide referrals and access to other assistance, and the project provides transportation for the mothers to access assistance. Evaluation of the program revealed a number of positive outcomes. First, maternal abuse and neglect were significantly reduced. Second, in a 15-year follow-up, the children reported significantly less running away, arrests, and substance abuse. Third, there were also fewer arrests of the program mothers. The success of the project has led to its replication in other sites. The Syracuse Family Development Research Project has many similar characteristics to the nurse home visitation program. Begun in 1969, the intervention targeted pregnant, young, single African-American mothers and worked with the families from birth to age 8. The project included home visitation by child development trainers, parent training in health, nutrition, and child-rearing, and individualized day-care for the children The key element of the project was weekly visits to the subjects' homes. Children participating in the project have done better academically, demonstrate better self-control, and have fewer arrests than control youths. Another program targeting parental training that has proven effective is the Incredible Years program. Whereas the above programs selected expectant mothers, the Incredible Years initially identified families for intervention that had youths displaying early conduct problems from age 4 to 8. The program includes strong parent and child training

components, as well as a teacher-training element for youths in school. Parents receive training in parenting skills, how to recognize and address their child's problem behaviors, how to set rules and use incentives, and other key components of child-rearing. The child component focuses on helping them recognize emotions, how to deal with anger, appropriate responses to problem situations, and educational skills. The teacher-training element deals with classroom management, providing skills to youths, handling problem youths and behaviors, and disciplinary practices. Evaluations reveal consistent positive results. Participating parents display more positive parenting skills and fewer coercive and punitive punishments. Children display fewer antisocial behaviors, better interpersonal skills, and better preparation for school. The strength of the program, its wide adoption and its consistent positive evaluations have led Substance Abuse and Mental Health Services Administration to list the Incredible Years on its National Registry of Evidence-based Programs and Practices. Preschool programs One suggestion for tackling school problems and antisocial behavior involves early preparation of children for school. Preschool programs are viewed as a means of establishing a level of competence that avoids early placement into differential ability tracks, building a positive attitude toward school, and providing basic social skills to youths who are not prepared to enter school. The expectation is that success in school will translate later to greater social success out of school, and lower delinquency and criminality. Perhaps the best-known preschool program is Head Start. Head Start is meant to provide youths with positive early experiences and, in turn, successful long-term academic careers. The extent to which Head Start has succeeded in achieving its goals is questionable. It has not been evaluated in terms of its effect on later delinquency or criminality. The most extensively studied preschool program is the Perry Preschool program. The program, begun in 1962, seeks to provide students with a positive introduction to education. This is accomplished by involving the children in the planning of activities, a low child:teacher ratio, enhanced reinforcement of student achievement, and frequent home visits with parents. the program sets in process a sequence of events that leads from program participation to higher academic performance, to enhanced educational commitment and scholastic achievement, to prosocial behavior.

Elementary and high school programs: School atmosphere Altering the general school environment is one suggestion for addressing misconduct in schools. Opening up participation in decision-making (to both students and staff) allows everyone to take ownership of both the solutions and the successes of controlling problems. Denise Gottfredson (1986) reported on the effectiveness of Project PATHE (Positive Action Through Holistic Education) in Charleston, South Carolina. This project took a broad-based approach to the school environment by bringing teachers, administrators, students, parents, and agencies together in making decisions about education and the school. Underlying this approach is the idea that the various parties must see a stake in education and believe that education is important. The parties will care more about education if they have some say in the educational process. Project PATHE isolated a variety of factors including school pride, career-oriented programs, student team learning, and individual services as targets for change. Pre- and post-program measures, as well as data from two non-equivalent comparison schools, were used in an evaluation of the program. The results offered mixed support. Experimental schools reported higher test scores and graduation rates than the

control schools. Attendance at school, however, did not seem to be affected by the program. Delinquency measures showed the greatest degree of disparity across and within schools. At the school level, there was some improvement in overall delinquency in the high school but no significant change for the middle schools. Changes in individual types of delinquency appeared in various schools. For example, drug use was reduced in one school but not in others. Some teachers reported lower levels of victimization in individual schools. 380 Steven P. Lab These results suggest that, while the program has no overall effect on the schools, improvements can be found in individual schools. The qualified success of Project PATHE may be due to alterations in the school system and study design after the onset of the project. Changes in the school administration, the closing and consolidating of some schools, and the inability of some programs to be adequately implemented during the study suggest that the project would produce better results in a more stable setting. Lab and Clark (1996) also investigated the idea of altering the school environment through cooperative decision-making. Evaluating 44 junior and senior high schools, the authors note that order and control in a school is engendered most effectively by bringing students, staff, and administrators together. The traditional methods of administratively imposing strict control and harsh discipline on students is not productive (Lab & Clark, 1996). Schools with lower victimization and problem behaviors are those that work to develop a “normative” approach to discipline and control. This means that schools in which there is more agreement on discipline and control measures experience fewer problems than schools in which there is little agreement. Schools should strive, therefore, to build consensus through inclusion in the decision-making process. The Charlotte School Safety Program attempted to address the issue of school safety by developing a cooperative problem-solving process that involved students, school staff, and police. The program emphasized changing the school environment using techniques similar to those found in community-oriented policing. Problem identification and problem solving were key elements of the intervention, and an attempt was made to integrate these activities into the normal classroom curriculum. It was important to change the attitudes of the students and to turn the student body into an agent for positive change in the school. The program was tested in the 11th Grade social studies classes of a single Charlotte high school during the 1994–95 school year. The problem-solving activities were addressed one to two days each week within small groups of 6 to 10 students. An evaluation of the Charlotte program indicated positive changes in the target school compared with a matched control school. The evaluation used surveys of students at both schools, interviews with school staff, observations within the school, and inspections of student problem-solving worksheets. The first evidence of success was the ability of the students to identify and agree on problems in the school, and their ability to suggest and implement changes in school procedures. Kenney and Watson (1998) also noted significant reductions in students’ fear of crime at school, reduced fighting, fewer threats against teachers, lower numbers of suspensions for violence, and fewer calls for police assistance. Teachers also reported fewer class disruptions and improved relations between students and faculty. The greatest concern with the evaluation was its reliance on a single school and work with only those students in 11th grade social studies. In general, the results of research on changing the school environment suggests the efforts bring about positive changes in the schools.

6. Institutionalization and Treatment

Treating mental health needs of juveniles The Office of Juvenile Justice and Delinquency Prevention (OJJDP) reports incidences of juvenile crime and characteristics in its annual Statistical Briefing Book. Consistently, of the two million youth arrested each year, between 1,300,000 and 1,400,000 of those arrested are found to have some mental health dysfunction. These data have been consistent from 2000–2012, and states have taken steps to deal with the mental health of the adjudicated juvenile delinquent. During the first decade of the twenty-first century more than 27 states have passed mental health legislation to deal with issues posed by juveniles within their systems. The system addresses the need for assessment and screening of juveniles who enter the justice system to determine their mental health status and treatment needs. North Dakota and Oregon expanded upon the initiatives of earlier statutes and policies by adding the assessment for drug and alcohol abuse among arrested youth. The following is a summary of the more critical actions taken by states, setting precedence for others to enact legislation and/or promulgate policy. Treating females in juvenile systems There has been a significant increase in females in the juvenile justice system. Females represent 15% of the population in the justice system and as much as 35% in some jurisdictions. Lawmakers have noticed the increase of females, and at least in few states statutes have been enacted requiring gender-specific programs for females targeted to their prevention, rehabilitation, and mental health needs. In 2011, the State of New Mexico legislature enacted a law requiring their Department of Children, Youth and Families to develop a plan that would specifically respond to the needs of its female clients. States have also begun to ensure that youth have proper aftercare services once their incarceration is complete, or when they return to their communities. After years of research and advocacy that cited aftercare programs and services as reducing recidivism, and a sound investment to prevent further involvement with the criminal justice systems, states have enacted legislation throughout the first decade of the twenty-first century to ensure aftercare services are relevant and available.

Effective and cost-efficient programs and services:

Cognitive–behavioral programs have been used in the juvenile justice system for more than five decades. No longer are programs for youth at risk chosen and implemented on a trial and error, see-if-it-works basis; nor are programs used because they are the latest fad found while attending a professional conference. Rather, juvenile justice programs have evolved into a science, and those chosen to be implemented in most cases are well researched, outcome-based, cost-effective and efficient. While it is always a risk to identify and showcase programs as models to be replicated, we have opted to describe several programs at this juncture because they have been evaluated, found to be effective interventions, are outcome-based with proven results, and are cost-effective. Cognitive self change: Cognitive self change is a cognitive– behavioral intervention that is based upon the principles of cognitive restructuring: those programs that attempt to change individuals'

patterns of thinking. The intervention is designed to be neutral and objective when dealing with clients as they explore their thoughts, feelings, beliefs and attitudes. According to Bush (personal communication), cognitive self change is now touted as a skill that has four steps: 1. Learn to observe objectively one's own thoughts, feelings, attitudes, and beliefs. 2. Learn to recognize the thinking (thoughts, feelings, attitudes, and beliefs) that leads one to do antisocial behaviors. 3. Find new thinking that does not lead one to do antisocial behavior, and that helps an individual to feel good about themselves when they use new thinking. 4. Practice the new learning until one is proficient at it. The group facilitator meets with clients two to three times a week and conducts group sessions to deal with issues that clients had during the previous week. Using a formal, structured technique, the Thinking Report, clients learn how to perform these four steps of cognitive self change, keeping it simple and non-judgmental.

Problem-solving: Dr Juliana Taymans (1991, 1998) Problem-solving is a cognitive– behavioral intervention providing youth with a potential mechanism to deal with conflict and stress. The curriculum teaches six skills of problem-solving so that a Institutionalization and Treatment 509 young person may better manage their emotional negative reactions to situations, and have a better chance to take pro-social thoughtful decisions rather than impulsive actions that lead to greater problems. Indeed, if done correctly, the youth often change their perception and attitudes toward stressful, negative situations from that of overwhelming and burdensome to manageable. The six skills of problem-solving include: 1. Stop and think (identify that you are in a problem situation). 2. State the problem (what is happening that is bothering me?). 3. Set a goal and gather information (what information can help me solve this problem, and what do I want?). 4. Think of choices and consequences (what is my best choice?). 5. Make a plan (decide what to do, how to do it, with whom and when). 6. Do and evaluate (put the plan into action and identify whether the plan worked). The program is 25 lessons and may be delivered two or more times per week. Co-facilitators are strongly advised to conduct group sessions with 8–10 youth in a class that can last 60 to 90 minutes. Aggression Replacement Training®: Dr Barry Glick Aggression Replacement Training® (ART®) is a multi-modal cognitive–behavioral intervention for aggressive and violent adolescents. Developed by Goldstein and Glick (1987), the third edition of the book (Glick and Gibbs, 2011) builds on more than four decades of practical implementation, research and program evaluation to refine the program without compromising the original theoretical and philosophical foundations upon which it was designed. ART® comprises three components; each in its own right is a well-established, well-evaluated intervention. The three components include: ● Social skills training (the behavioral component) – teaching pro-social skills using a four-step procedure: modeling, role-playing, performance feedback, and transfer training. ● Anger control training (the affective component) – teaching youth to manage their angry impulses by learning a set of concepts that include: triggers, cues, anger reducers, reminders, thinking ahead (long-term consequences), using a learned social skill to break the angry behavior cycle, and self-evaluation. ● Moral reasoning (the cognitive component) – using Kohlberg's Theory and process of Moral Development, youth enter into a group discussion of a moral problem situation for which there is no right or wrong answer. Through discussion, youth are provided to take perspectives other than their own, and through directed debate with others who are no more than one moral stage of development higher than they, learn to view their world in a more fair and equitable manner.

7. Gang Trends, Trajectories, and Solutions It is a curious thing that teenagers, juvenile services staff, and law enforcement are adept in recognizing gangs, yet criminologists are rarely in agreement on criteria for defining them. For one thing, developing a gang definition that captures the younger gangs, yet excludes law-violating youth groups and adult criminal organizations that are not considered youth gangs is challenging. To complicate matters, multiple terms are used interchangeably in describing gangs – youth gang, street gang, criminal street gang, and drug gang – and whether or not each of these terms refers to a common problem in practical applications is not always clear. Moreover, there is considerable variation in youth gangs. "No two gangs are alike, and they change constantly in membership, structure, and behavior; new gangs are formed and old ones fade away or merge with others". Defining gangs is also confounded by numerous misunderstandings about them, largely because they are at once shrouded in myths (some of which they create themselves in folklore), media exaggerations, popular misconceptions, and international intrigue often associated with them. Youth gang is the preferred term for drawing attention to the younger gangs, from the latter years of childhood through late adolescence or young adulthood (18–24 years of age). Moore (1998) suggests that three characteristics distinguish the American youth street gang from other youth groups: self-definition, street socialization, and the potential to become quasi-institutionalized in a specific local community. Self-definition implies not only that group members define themselves as a gang, but that the group has a social structure and group-determined norms that are not controlled by adults in any way. Street socialization means that unsupervised young people are socialized by each other (and by older peers in some cases) far more effectively than by conventional socializing agents such as families and schools. In regard to quasi-institutionalization, gangs develop the capacity for self- maintenance, meaning that they recruit continuously, with places in the gang for younger members, and that they extend respect and solidarity toward older members. The following is a practical definition that incorporates research-supported criteria for classifying a group as a youth gang : ● Five or more members. ● Members share an identity, often linked to a name and other symbols. ● Members view themselves as a gang and are recognized by others as a gang. ● The group has some permanence and a degree of organization. ● The group is involved in an elevated level of delinquent or criminal activity. Many legal definitions of a gang specify only three or more members. A higher standard of five members is consistent with extensive research on delinquent groups which finds that typical sizes of these groups range from two to four members, and that the number of active participants tends to diminish in late childhood and early adolescence to triads and dyads in middle and late adolescence. In a multi-city sample of surveyed middle-school students, just 13% of respondents claiming to be active gang members said their gang had five or fewer members. Hence a standard of five members should winnow out most very small friendship groups or cliques that typically are involved only in general delinquency. The requirement of a name helps distinguish actual gangs from the many other law-violating youth groups. Bjerregaard (2002) insists that this is the most potent criterion for defining gangs. Her position is buttressed by nationwide US student survey data showing that having a name is a main indicator of gang presence – one that 8 out of 10 US students use – along with spending time with other members of the gang (Howell & Lynch, 2000). Viewing their group as a gang and being recognized by others as such provides individualized distinction to gang participation; that is, individual status in the gang that is set apart from everyday social cliques, in and out of which adolescents constantly drift. Hence, initiation into a gang carries with it personal commitment to the gang and opposition to conventional rules for behavior. If gang recognition is not incorporated in the definition, over-classification of youth as gang members is likely. There is little

research basis for a specified period of gang existence to meet the “permanence” criterion. In the aforementioned multi-city sample of surveyed middle-school students, 25% of the youth said the gang to which they belonged had been in existence for 1 year or less, with all others specifying a longer period.

The prevalence of juvenile delinquency increases in late childhood, peaks in middle to late adolescence, and then precipitously decreases during the transition from middle adolescence to early adulthood. This is known as the age–crime curve. Gang participation follows a similar age-linked trajectory. Joining is a gradual process. Children who are involved in delinquency, violence, and drug use at an early age are at higher risk for gang membership than other youngsters More than a third of the child delinquents in Montreal and Rochester samples became involved in crimes of a more serious and violent nature during adolescence, including gang fights. A youth typically begins hanging out with gang members at age 11 or 12, and joins the gang between ages 12 and 15. This process normally takes six months to a year or two from the time of initial association. Gang association, however, does not presume gang joining. Two studies show that many youth who reported never having been in a gang said they had engaged in certain behaviors that suggested gang involvement: they had flashed gang signs, worn gang colors on purpose, hung out with gang members, consumed alcohol or drugs with gang members, or had gang members as friends. The proportion of youth who are members of a gang at a particular point in time can vary from 3% upward in rural areas and in very large cities.

There is abundant evidence from a number of longitudinal studies that youth gangs facilitate or elicit sharply increased involvement in delinquency, violence, and drugs.In comparison with non-members, both short- term and stable gang members (multiyear participation) have significantly higher rates of self-reported crime, carrying a weapon, and being arrested. In particular, delinquency associated with gang membership is concentrated in two offense combinations: (1) serious violence and drug-selling; and (2) serious violence, drug- selling, and serious theft. At somewhat older ages, drug-dealing and illegal peer gun ownership replace gang membership as the primary determinants of illegal gun-carrying. In this circumstance, gang membership can catapult youth to lethal violence. Indeed, both homicide offenders and homicide victims often engage in drug dealing, and street conflicts coupled with gang membership further fuels victimization and retaliation. Most gang members desist from gang fighting by their early 20s, but some adolescents desist by age 17, while others take longer. Stability in gang membership has a greater impact on the life course than short-term gang membership. Longer-term gang members are considered to be “embedded” in the gang. This concept refers to frequency of contact with the gang, position in the gang, importance of the gang to the individual, proportion of friends in the gang, and frequency of gang-involved assaults. Studies are accumulating showing that desistance is delayed among embedded members. More embedded offenders are apt to remain active for a longer period of time. Indeed, in a sample of court-adjudicated youth (ages 14 to 17), gang members with low levels of embeddedness left the gang quickly, crossing a 50% percent threshold in six months after the baseline interview, whereas gang members with high levels of embeddedness did not show similar reductions for a year or more . Despite the typically short-lived period of gang membership, participation normally occurs during a stage in the development of youth that is critical in determining the course of their lives – at a time when building-blocks for successful transitions to adulthood are laid. The consequences of gang membership also cascade into the next generation, as seen in the children of the Seattle sample of gang members that first was studied as adolescents in

the 1990s (Hill et al., 1999). Parental adolescent gang membership was significantly related to later development in their children. When compared to a matched sample of non-gang peers, those who joined a gang in adolescence reported poorer outcomes in multiple areas of adult functioning, including higher rates of self-reported crime, receipt of illegal income, incarceration, drug abuse or dependence, poor general health, welfare receipt, and lower rates of high school graduation (Gilman, Hill, and Hawkins, 2014). Negative consequences of joining a gang cascade not only into the adult life of the individual but into the next generation as well, laying a foundation to repeat the cycle. In the original study, parental adolescent gang membership was significantly related to later developmental problems of subjects' children, from ages 1 to 15 (Hill, Gilman, & Hawkins, 2011). Effects on offspring were prominent in personal–social delays (at 1 to 5 years of age), child misbehavior and low bonding (at 2 to 8 years), and externalizing (conduct and social problems) and internalizing (affective, anxiety) behaviors (at 6–15 years).

Gang activity and its associated violence remains an important and significant component of the US crime problem. While it has been reasonably assumed that gang- related violence would follow the overall dramatic declines in violent crime nationally, gang violence rates have continued at exceptional levels over the past decade despite the remarkable overall crime drop. Gang activity and serious gang crime have remained highly concentrated in very large cities, with populations greater than 100,000 persons. Gang violence that is rather commonplace in these large cities seems largely unaffected by, if not independent from, other crime trends, with the possible exception of drug trafficking and firearm possession. Participation in gangs changes the life-course of most youth, particularly those who remain active for multiple years. Thus, preventing youth from joining gangs and promoting desistance from gangs is of paramount importance. Much like individuals' criminal careers, gangs typically have developmental histories, with periods of growth and decline. In a similar fashion, cities also have gang problem histories. Very large cities – in which one in four homicides is gang-related – consistently have serious gang problems. Officials in the largest of these cities have identified gang violence as the major type of youth violence that needs to be addressed. Few programs have proved particularly effective in altering any of the three gang trajectories described in this chapter. Findings from rigorously evaluated programs can be summarized as follows. Just one gang program has demonstrated effectiveness in preventing gang-joining, the GREAT program, although it is noteworthy that the Montreal Preventive Treatment Program also reduced gang-joining, even though it was not developed specifically for this purpose. Rather, it was designed to prevent delinquency among disruptive kindergartners. Several programs have shown evidence of dampening down the level of criminal activity of gang members, and one of these programs (the Comprehensive Gang Model) has demonstrated effectiveness in multiple sites and also holds potential for truncating gang members' careers. The evidence shows that the most successful gang crime reduction initiatives are community-wide, have broad community involvement in planning and delivery, are multi-agency, utilize an intervention team, and provide integrated outreach support and services. However, successfully promoting termination from gang involvement on a widespread basis remains an elusive goal. Most youths eventually terminate gang membership without the benefit of outside intervention. Very little success has been seen in efforts to truncate the trajectory of individual gangs, even with police suppression. The gangs typically re-emerge because they are homegrown: rooted in fractures in families, schools, social services, and communities. No evidence of significant alteration of the long-term trajectory of gang problem cities is available, though a few targeted gang suppression strategies – focused on high-rate violent

offenders – have shown noteworthy short-term violent crime reductions in some cities, communities, and neighborhoods. Whether or not these reductions can be maintained over long periods of time remains to be seen.

8. Weapon Carrying and Use Among Juveniles

Adolescent weapon carrying and use can be, and has been, explored in a number of manners. Below we discuss theories and research regarding youth's motivations for carrying weapons, the demographics of weapon carriers, and predictive, protective, and risk factors for juvenile weapon carrying. Through exploring the literature, we document areas in which scholars can expand with future research and potential implications for policy development. While scholars have brought a great deal of understanding to the topic of adolescent weapon carrying and use, we argue that more research is necessary to comprehend the behavior.

Motivation: The potential motivations for carrying weapons as an adolescent are plentiful. There are multiple points of view on why adolescents carry weapons, and it is our intent to discuss them in this chapter. While various researchers discuss correlates of weapon carrying as if they stand alone, this is likely an oversimplification of a complex social phenomenon that drives carrying and use by adolescents. Weapon carrying is multifaceted, changing with time, age, and other factors. So, it is not surprising that the motivations that adolescents give for carrying weapons vary on many social dimensions, such as use and sale of drugs, age, and their friends carrying weapons. This is important to keep in mind, as different camps initially presented the correlates discussed below as competing, and suggested distinct policy implications. We see the correlates as complementary rather than competing, and our suggestions for preventing weapon carrying and use are integrative. For example, there is a chicken-and-egg problem between obtaining weapons and committing crime with them that has important policy implications. Some researchers argue that weapons enable otherwise normal people to commit crime (weapons cause crime), while others suggest that criminals obtain weapons so that they can commit crime (weapons don't kill people, people do). Ironically, both arguments can be true, and neither side has substantiated their claims with research evaluating the temporal ordering of events. Before discussing specific hypotheses of adolescent weapon carrying and use motivation, it is important to note that, with few exceptions, severe limitations exist in the research for each position. These include a lack of variety in weapon types explored, failure to include measures that would account for the presence of multiple motivations, inability to demonstrate temporal ordering, and failure to consider the influence of gender and age on motivation. Until future research overcomes these limitations, many of the correlates discussed below fail to be more than shots in the dark. Fear and victimization Fear-and-victimization or "fear and loathing" (Wright, Rossi, & Daly, 1983) is one proposed motivation for adolescent weapon carrying, suggesting that adolescents carry weapons because of an emotional fear of crime, a perceived risk of crime, or previous victimization experiences (Cao, Cullen, & Link, 1997). This suggests that individuals carry weapons for defensive purposes, assuming that doing so will reduce their fear, perceived risk, and victimization. And, this conclusion may be correct. Many adolescents who initially fear victimization will ultimately reach for a weapon, which reduces their fear of victimization.But, while this conclusion appeases some, others find little to no support for the fear and victimization hypothesis . Scholars have posed multiple explanations for the ambiguity in results.

For example, it is difficult to establish causal order with the cross-sectional data used by many researchers. Furthermore, the causal ordering of these factors may differ by types of weapons: adolescents may believe guns have more protective efficacy than knives or other weapons. We cannot know if this is true because little if any research compares weapon type by efficacy of use. In addition, inclusion of control variables is inconsistent across studies. Even the meaning of fear and perceived risk may be more distinct than one might expect. People may be fearful not so much for themselves but for their loved ones, while at the same time perceiving high risk.

Just because an adolescent obtains a weapon in response to fearing crime, does not mean that same adolescent is not motivated to commit crime with it. Adolescents intent on committing crime or behaving deviantly can, and do, find weapons to do so. In fact, some of the adolescents report their primary reason for carrying weapon is criminal use. Weapons can facilitate doing crime in a number of ways. Victims are more likely to cooperate when weapons are used, they serve as protection from both victims and other deviants, and weapons serve as an ace in the hole, guaranteeing the adolescent a feeling of confidence. In response, other adolescents feel the need to arm themselves, and an arms race begins. However, just like fear-and-victimization, research on this topic frequently does not establish temporal ordering, making it difficult to determine whether weapon carrying leads to criminal activity or criminal activity motivates weapon carrying.

Fighting: Fighting is just a special case of what we discuss above. A weapon can facilitate fighting, or result from past victimization in anticipation of future victimization. Bringing a weapon to a fight can improve the odds of coming out ahead, regardless of physical strength. As we stated above, at a minimum, possession of a weapon during a fight serves as a backup plan for an adolescent. If one starts losing, the weapon can be pulled to regain the advantage. Moreover, the mere presence of a weapon sends a message that the carrier is not someone to trifle with. So, it is not surprising that adolescents who participate in physical fighting also tend to carry weapons, if not use them One study finds that the link between physical fighting and weapon carrying is stronger for males than for females. Despite knowing that a relationship exists between physical fighting and adolescent weapon carrying, no one has established whether physical fighting leads to weapon carrying, weapon carrying leads to fighting, or whether the two manifest simultaneously. Without knowing more about the causal ordering of these behaviors, it is nearly impossible to make empirically based policy decisions or understand the connection between the two behaviors. But, once again it is certainly possible, if not highly probable, that each is true.

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VALUE ADDED COURSE

Juvenile Delinquency FMT VAC 11

4. List of Students Enrolled January 2022 – June- 2022

2nd Year MBBS Student		
Sl. No	**Name of the Student**	**Reg No**
1	VASIPALLI SUJITHA	U16MB391
2	VENKAT SRI RANGAN.P.B	U16MB392
3	VENKATACHALAPATHY .G	U16MB393
4	VIDHY ADHARAN.S	U16MB394
5	VIGNESH .D	U16MB395
6	VIGNESH .S	U16MB396
7	VIJAY .M	U16MB397
8	VINDUJA VIJAY	U16MB398
9	VIPIN SHARMA	U16MB399
10	VISALINI .S	U16MB400
11	SHACHI SHASTRI	U17MB371
12	SHATAVISHA MUKHERJEE	U17MB372
13	SHEDAM OMKAR MAHADEV	U17MB373
14	SHIVA VEERANNA HOUSR	U17MB374
15	SHIVAM ANMOL	U17MB375
16	SHIVANI BISWAL	U17MB376
17	SHREYA KUMARI	U17MB377
18	SHUBHAM KAMDE	U17MB378
19	SOTALA MANULIKHA CHOWDARI	U17MB379
20	SOUNDHARYA.K	U17MB380

SRI LAKSHMI NARAYANA INSTITUE OF HIGHER EDUCATON AND RESEARCH

Annexure - IV

JUVENILE DELINQUENCY

MULTIPLE CHOICE QUESTIONS

Course Code: FMT 11

I. ANSWER ALL THE QUESTIONS

1. Which of the following constitutes a type of juvenile delinquency?

a. Status offense

b. Civil offense

c. Criminal offense

d. a and c only

e. all of the above

2. A child below the age of _____, who commits a crime, is not held morally or criminally responsible for that act.

a. 5

b. 7

c. 10

d. 12

3. Unreported delinquent acts, also known as _____, are difficult to determine

a. The dark figure of crime

b. Escapees of crime

c. Smooth criminal acts

d. The criminal uncertainty

e. None of the above

4. The overwhelming majority of the juvenile crime victims exhibited which one of the following victimization risk factors?

a. Involvement in gang or group fights

b. Selling drugs

c. Carrying a weapon

d. All of the above

5. **A youth is considered a juvenile delinquent:**

a. As soon as they break the law

b. When they are apprehended by the police

c. When they are processed through the court and adjudicated.

d. All of the above

Sri Lakshmi Narayana Institute of Medical Sciences

Affiliated to Bharath Institute of Higher Education & Research

(Deemed to be University under section 3 of the UGC Act 1956)

CERTIFICATE OF MERIT

This is to certify that _____ has actively participated in the Value Added Course on Juvenile Delinquency held during January 2022 – June 2022 Organized by Sri Lakshmi Narayana Institute of Medical Sciences, Pondicherry- 605 502, India.

Dr.S.N.Rathod

RESOURCE PERSON

Dr. Jayalakshmi

COORDINATOR

Student Feedback Form

Course Name: **Juvenile Delinquency**

Subject Code: **FMT VAC 11**

Name of Student: _____ Roll No.: _____

We are constantly looking to improve our classes and deliver the best training to you. Your evaluations, comments and suggestions will help us to improve our performance

Sl. NO	Particulars	1	2	3	4	5
1	Objective of the course is clear					
2	Course contents met with your expectations					
3	Lecturer sequence was well planned					
4	Lectures were clear and easy to understand					
5	Teaching aids were effective					
6	Instructors encourage interaction and were helpful					
7	The level of the course					
8	Overall rating of the course	1	2	3	4	5

**** Rating: 5 – Outstanding; 4 - Excellent; 3 – Good; 2– Satisfactory; 1 - Not-Satisfactory***

Suggestions if any:

Sri Lakshmi Narayana Institute of Medical Sciences
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(Deemed to be University under section 3 of the UGC Act 1956)

Circular

3rd January 2022

Sub: Organising Value-added Course: Juvenile Delinquency

With reference to the above mentioned subject, it is to bring to your notice that Sri Lakshmi Narayana Institute of Medical Sciences, **Bharath Institute of Higher Education and Research**, is organizing **Juvenile Delinquency.** The course content and registration form is enclosed below."

The application must reach the institution along with all the necessary documents as mentioned. The hard copy of the application should be sent to the institution by registered/ speed post only so as to reach on or before January 17th 2022. Applications received after the mentioned date shall not be entertained under any circumstances.

Encl: Copy of Course content and Registration form.

Annexure 2 – Course Proposal

Course Title: Juvenile Delinquency

Course Objective: 1. Parenting and Delinquency

2. School Effects on Delinquency and School-Based Prevention
3. Neighborhoods and Delinquent Behavior
4. Prenatal and Early Childhood Prevention of Antisocial Behavior
5. School Prevention Programs
6. Institutionalization and Treatment
7. . Gang Trends, Trajectories, and Solutions
8. Weapon Carrying and Use Among Juveniles

Course Outcome: On successful completion of the course the students will be able prevent and manage Juvenile Delinquency

Course Audience: 2nd year MBBS student

Course Coordinator: Dr. Jayalakshmi

Course Faculties with Qualification and Designation:

1. Dr. S.Prasanth Kumaran MBBS, MD (Forensic Medicine),
Assistant Professor

Course Curriculum/Topics with schedule (Min of 30 hours)

S.No	Date	Topic	Time	Hours
1	14-01-22	Parenting and Delinquency	2 pm to 5 pm	3
2	28-01-22	School Effects on Delinquency and School-Based Prevention	2 pm to 5 pm	3
3	11-02-22	Neighborhoods and Delinquent Behavior	2 pm to 5 pm	3
4	25-02-22	Prenatal and Early Childhood Prevention of Antisocial Behavior	2 pm to 5 pm	3

5	08-03- 22	School Prevention Programs	2 pm to 5 pm	3
6	22-03- 22	School Prevention Programs	2 pm to 5 pm	3
7	13-4- 22	Institutionalization and Treatment	2 pm to 5 pm	3
8	27-4-22	Institutionalization and Treatment	2 pm to 5 pm	3
9	24-5-22	Gang Trends, Trajectories, and Solutions	2 pm to 5 pm	3
10	08-6-22	Weapon Carrying and Use Among Juveniles	2 pm to 5 pm	3
			Total Hours	30

REFERENCE BOOKS: (Minimum 2)

1. Juvenile Delinquency- a comprehensive guide to theory and practice
2. Handbook of Juvenile Delinquency

Annexure 3

Bharath Institute of Higher Education and Research

Sri Lakshmi Narayana Institute of Medical Sciences,

Participant list of Value added course: **Juvenile Delinquency on January 2022 – June 2022**

Sl.No	Reg.No	Name of the candidate	Signature
1.	U16MB391	VASIPALLI SUJITHA	

2.	U16MB392	VENKAT SRI RANGAN.P.B	
3.	U16MB393	VENKATACHALAPATHY .G	
4.	U16MB394	VIDHY ADHARAN.S	
5.	U16MB395	VIGNESH .D	
6.	U16MB396	VIGNESH .S	
7.	U16MB397	VIJAY .M	
8.	U16MB398	VINDUJA VIJAY	
9.	U16MB399	VIPIN SHARMA	
10.	U16MB400	VISALINI .S	
11.	U17MB371	SHACHI SHASTRI	
12.	U17MB372	SHATAVISHA MUKHERJEE	
13.	U17MB373	SHEDAM OMKAR MAHADEV	
14.	U17MB374	SHIVA VEERANNA HOUSR	
15.	U17MB375	SHIVAM ANMOL	
16.	U17MB376	SHIVANI BISWAL	
17.	U17MB377	SHREYA KUMARI	
18.	U17MB378	SHUBHAM KAMDE	
19.	U17MB379	SOTALA MANULIKHA CHOWDARI	
20.	U17MB380	SOUNDHARYA.K	

Annexure 4

Course/Training Feedback Form

Course: Juvenile Delinquency
Date: January 2022– June 2022
Name:
Reg NO.
Department: Forensic medicine and toxicology

Q 1: Please rate your overall satisfaction with the format of the course:

a. Excellent b. Very Good c. Satisfactory d. unsatisfactory

Q 2: Please rate course notes:

a. Excellent b. Very Good c. Satisfactory d. unsatisfactory

Q 3: The lecture sequence was well planned

a. Excellent b. Very Good c. Satisfactory d. unsatisfactory

Q 4: The lectures were clear and easy to understand

a. Excellent b. Very Good c. Satisfactory d. unsatisfactory

Q 5: Please rate the quality of pre-course administration and information:

a. Excellent b. Very Good c. Satisfactory d. unsatisfactory

Q 6: Any other suggestions:

Comments:

Thank you for taking the time to complete this survey, your comments are much appreciated.

OPTIONAL Section: Name _____
Signature _____ Date _____

Annexure 5

Date: 12-6-2022

From
Dr. S. N. Rathod
Forensic Medicine & Toxicology
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research,
Chennai.

Through Proper Channel

To
The Dean,
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research,
Chennai.

Sub: Completion of value-added course: Juvenile Delinquency

Dear Sir,

With reference to the subject mentioned above, the department has conducted the value-added course titled **Juvenile Delinquency** on January 2022– June 2022. We solicit your kind action to send certificates for the participants, that is attached with this letter. Also, I am attaching the photographs captured during the conduct of the course.

Kind Regards

Dr. Jayalakshmi

Dr. S.N. Rathod

Encl: Certificates

Photographs