

Psychological problems among Iraqi juvenile delinquents

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ABSTRACT— The psychological problems among the juvenile delinquents are common and had serious effect on their life style and behaviors. So, the juveniles are more vulnerable to psychological problems. The study aimed to identify and detect the psychological problems among juveniles delinquent who brought to Al-Najaf Juveniles Delinquent Court and severity on them. Descriptive study (cross-sectional) conducted in Al-Najaf Juveniles Delinquent Court and the non-probability sample included about 54 juveniles delinquent who is judgment by Probation Officer in specific duration and place. The study used brief symptoms inventory 53 items scale and questionnaire about their demographics characteristics that related to the study. The study finds majority of juveniles had some psychological problems like paranoid and psychoticism had the highest rated among them about (59.3%) and followed by phobic, depression and anxiety approximately by (50%) of them; then Hostility Somatization, Obsession compulsion about (40%) and finally the additional domains by (18.5%). While the all juveniles reported were not used illegal drugs. The study concluded that majority of them were healthy as physically and not used the alcoholic and drugs, as well as, some of them had a symptoms of psychological problems and needs to investigate and confirm by psychiatric specialist in the mental health unit. The study recommended to make the psychotherapy as a part of procedures of justice system laws and activate the psychiatric unit and early detection of psychiatric symptoms among children and youth in program of primary health care system.

KEYWORDS: Psychological problems, juvenile, delinquency, juvenile delinquents, juvenile court

1. INTRODUCTION

The word of juvenile is same as the word young or anyone physically undeveloped or immature and it is used in medicine and injustice system [1]. Juvenile is the age stage of the youth between infancy to adulthood [2].

The juvenile justice system (probation, detention, confinement, corrections facilities for youth, and.... etc.) has faced many challenges and tasks for juvenile by providing assessment for health physically and mentally and introduced treatment and caring services for them according the laws of juvenile justice system [3] because of the justice system is basically designed to preventative and rehabilitative approach to juvenile and should be emphasizing the rights and needs of children rather than punishment them [4]. Also, there is elevated in number of juvenile delinquency in world generally and in Iraq especially [5].

Now, most studies suggests that relationship between juvenile delinquent and their mental health problems such as conduct disorder, or other behavioral disorders involvement in crime and substance abuse, low intelligence and educational achievement [3].

This study aimed to identify and detect the psychological problems among the juvenile delinquents who brought to the juvenile court in Al-Najaf City and measures their severity include global severity index (GSI), positive symptoms total (PST) and positive symptom distress index (PSDI) among them [6], [7].

2. Methods

2.1 Study design

Descriptive study (cross-sectional)

2.2 Setting

The study carried out in Al-Najaf juveniles court. Al-Najaf governorate is one of middle Iraqi provinces. Al-Najaf juveniles court is a specialist court in juvenile judges and youth crimes that brought from 6 general court distribution in this governorate, so Al-Najaf juveniles court is covered approximately 1.25 million people who lived in it and when they had a legal issues that related to juveniles delinquency. This court was received 165 cases in 2020 and only 45 cases were judged by observing behaviors with social worker follow up according to it documentations may because the COVID-19 endemic. The duration of study conducted from 1st march to end August 2021. The researchers explain for all participants the aimed of study and why they need them to participate in it during the interview with them. Data collected by adopted translated Arabic version questionnaire during the interview.

2.3 Participants

Sample of study was a non- probability sample included 54 juveniles who brought and accepted to participate in the study and they judged by observing behaviors with social worker follow up for specific duration from 6 months to 2 years in maximum and the participants should be followed according to appointment of observing behaviors at least one month and other cases were excluded. The researchers were selected this category of Juveniles because the other judgments are referred to the boys or young man rehabilitation schools that found only in Capital of Iraq (Baghdad) and difficult reach to them.

2.4 Variables

The variables of study included nine psychological problems are somatization, obsession compulsion, interpersonal, depression, anxiety, hostility, phobic, paranoid, psychoticism and personal data of juveniles like age, gender, education,...etc.

2.5 Data source/measurement

The questionnaire included two parts; first part related to the demographics characteristics of juveniles like age, gender, level of education, job, marital status, types of delinquents, income,...etc.; while the second part to detect the psychological problems and severity among the juvenile delinquents, so the researchers used brief symptoms inventory 53 items scale (BSI-53) to measure it and global indices to detect the severity of this problems are global severity index (GSI), positive symptoms total (PST) and positive symptom distress index (PSDI) among them [6], [7]. The validity of scale was established from 13th experts specialist in psychiatric disorders was reviewing the questionnaire and writes their notices. The reliability of this scale was tested by Cronbach's Alpha coefficient test was equally in current study to 0.87 compared with study of [6] equally to 0.93.

2.6 Bias

To reduce the bias is depended on the criteria of sample and give all participants who agreed with these criteria is an equal chance to participate in the study.

2.7 Study size

The sample size of study was calculated by the table of Krejcir & Morgan (1972) according the size of all juveniles delinquent were agreed with a criteria of sample and the number of juveniles during the duration of study conducted are 64 plaintiffs introduced the petition against them to the court and judgments by observing behaviors.

2.8 Quantitative variables

BSI-53 items domains are had ninth domains and one additional domain each one had items to express about their feelings toward certain psychological problems symptoms according to Likert scale-five rated extended from Never to Always (1-5). As well, the three global important indices scores: global severity index GSI, positive symptoms total PST and last is positive symptom distress index PSDI. These indices are very important to explanation and understanding the scale.

2.9 Statistical methods

The researcher used Microsoft excel (2013) to arranged the data and SPSS package v.23 to analysis data, but the statistical tools that used to achieved it were include frequency, percentage, mean, SD, Cronbach's-Alpha-coefficient test, standard deviation and the score of BSI-53 items 9th domains as well, GSI, PST and PSDI. These indices are analysis by the formula for each indices as follow are global severity index (GSI: this index is calculated by summation the all values for each domains in the BSI-53 items and divided by the number of domains (all domains when the each domains are not had missed more than one items in them), positive symptoms total (PST: this index is count of all items are not rated by zero responses in scale or count the number of this items rather than the value of these items) and positive symptom distress index (PSDI: this index is calculated by summation the value of each items are not rated by zero responses in scale and divided by their number. This index detects the level of distress of participants) among them [7].

2.9.1 Ethical Consideration

All humans are have rights and deserve respect in all communities and the laws in all countries guaranties them, so these considerations achieved by the study gets the official permission to conduct it from ethical committee in College of and Al-Najaf juvenile court. After that, the researcher gets verbal permission from juveniles delinquent to invite them to participate voluntarily in the study.

3. Results

3.1 Participants

The sample of study includes 54 juveniles delinquents who lived in AL-Najaf Governorate and they have judges in Al-Najaf juvenile court and they are follow-up with social worker in same court, but they had other judgments are excluded according to the criteria of study; also, the judgments arising by observing behaviors against juveniles according to their types of delinquency the sample includes 50 male and 4 females who had delinquents and accepted to participated in study. There is no missing data because the researchers fill the copy of questionnaire during the interview with them.

3.2 Descriptive data

The more than half of participants were aged equal & more than 18 years old (51.9%; 17.1 ± 1.94) with had intermediate school graduated as a level education (29.6%) and order of them among his siblings in rank first to third About (51.9%) of participants and most of them are residence in urban area about (70%). Table

The stolen is a more types of delinquents among juveniles (63%) and it occur before 6 month -1 year about (51%) of them. All participants reported their parents were their still a guardian and were not changed due to delinquents, as well as all them were reported not had any physical diseases diagnosed, but only (3.7%) of them reported had a psychiatric disorders. Table 2

3.3 Outcome data

Majority of juveniles had symptoms of some psychological problems were in “sometimes” rated as notice that in paranoid and psychoticism had the highest rated among other problems with ratio (59.3%) of participants and followed by Phobic, depression and anxiety approximately by (50%) of them; then hostility somatization, obsession compulsion about (40%) and finally the additional domains by (18.5%). While the never rated and always had the less respondents from them. Table 3

3.4 Main results

The additional domain of psychological problems items had highest mean (1.29 ± 0.88) and depression (1.29 ± 0.697) with less standard deviation. After that obsession compulsion (1.28 ± 0.57), then psychoticism (1.22 ± 0.51) and continuous to end by the somatization got the less mean (0.79 ± 0.5). The GSI-mean score was (1.113 ± 0.59), PST (33.25 ± 18.8) and PSDI (1.96 ± 0.47) were these scores the participants had mild degree of psychological problems among them. Table 4

4. Discussion

4.1 Key result

This topic is a first a first study on psychological problems among juveniles delinquents in Al-Najaf juvenile court especially. The main purpose of the study is to identify and detect the psychological problems among them and measures the severity of psychological problems that include global severity index (GSI), positive symptoms total (PST) and positive symptom distress index (PSDI) among them. So, the demographic characteristics according the respondents were similar with other studies those studied the same topic with little differences may be return to the time, place and nature of youth and their countries [8], [9]. Although, the age of juveniles must be under 18th years old in this study were see equal or more it may because the Iraqi juveniles law is depend on the age of juvenile during the committed of delinquent or during investigation [10].

4.2 Interpretation

Majority juveniles delinquent were a male (92.6%) and the residual ratio were a female, may be the male is more contacted with community than female considered the Iraqi society is traditional society and keep his habits and norms toward females [11]; also, all juveniles had a siblings and their order among siblings were first to third of them may because most Iraqi families dependent on the first three children in house work and marketing [11]. Majority of juveniles had symptoms of some psychological problems and rated “sometimes” and notice that in paranoid and psychoticism had the highest rated among other problems with ratio (59.3%) of participants and followed by phobic, depression and anxiety approximately, this information give us a good indicators about the juveniles nurturing and the possibility to rehabilitate and integrate them in their community according to the Iraqi juveniles law and when considered them as a victim for circumstances and other factors [12], but this result is contrasted with many studies when see most juveniles were used illegal drugs [8]. Also, most of juveniles delinquent who participated were had low level education about more than (60%) of them in Babylon [9] and give us a dangerous indicator because most studies are confirmed the strong positively linked between increased the number of delinquencies when their level education were low [13], but Iraq according to Ministry of Planning and

Development report (2013) is the youth rate of literacy under eighteen is (74%) [14] and residual ratio are illiterate may be unable to attend to the school because the economic difficulties and familial responsibilities [15].

So, BSI-53 is a mean scale to detect the psychological problems among the juveniles delinquent who participated in the study; this scale had ninth domains and one additional domain each one had items to express about their feelings toward certain psychological problems and the way of calculated the scale we get on the three global important indices scores are a global severity index GSI, PST and PSDI. These indices is very important to explanation and understanding the scale result [6], [7] and detect the juveniles had psychological problems symptoms or not. Also, about (40-60%) of juveniles rated sometimes for symptoms of somatization, obsession compulsion, depression, anxiety, phobic, paranoid and psychoticism disorder, but about the same ratios of them were feelings by this symptoms as rarely in interpersonal, hostility and additional. These results are meaning most of juveniles were suspected or expected had a psychological problems symptoms and were not diagnosed because most of Iraqi families considered the psychological problems are not real or may be shyness matter and can be caused stigma for them, as well as the awareness about psychiatric health were low [16] when they investigated the perceived stigma among families who had a child as a juvenile delinquent.

4.3 Limitations

This study was a descriptive study only and first study conducted on psychological problems among the juveniles delinquents. Also, the type of sample used is non-probability sample and restricted by certain criteria only.

4.4 Generalization

This study is loss the generality on other population or juveniles who are not had this criteria, but may give primary picture about symptoms of psychological problems among them.

5. Conclusion

The researcher concluded from the results of this study and discussion the majority of them were healthy as physically and not used the alcoholic and drugs, as well as, they were restrict by appointment of meeting with social worker. Also, the study concluded some of them had a symptoms of psychological problems and needs to investigate and confirm by psychiatric specialist in the mental health unit.

Recommendations: The study recommended to make the psychotherapy as a part of procedures of justice system laws as well as Office Personality to diagnose, treat and prevent delinquents in community; and activate the psychiatric unit and early detection of psychiatric symptoms among children and youth in program of primary health care system.

What is known about this topic

- This topic is a new in Al-Najaf juveniles delinquent court,
- The psychological problems among juveniles in this court are common, but it is undiagnosed by psychiatrist and,
- measures the severity of psychological problems on them.

What this study adds

- The psychological symptoms among the juveniles delinquent are highly among them,
- This psychological symptoms are undiagnosed and,

- The severity of This psychological symptoms are moderately.

Competing interests

The authors declare no competing interest.

Authors' contributions

AANA, AAH conceptualized, designed and interpreted the data of the study. AAH provided guidance on literature search and data collection. AANA drafted the primary copy of the manuscript and data analysis/interpretation;. Both authors read and approved the final version of the manuscript.

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Tables and figures

List all tables and figures (if any) included in the manuscript, with their detailed legend: Example. Note that Tables should be included at the end of the manuscript, after the reference section.

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Table 2 : Information about the delinquents of juveniles

Table 3 : Distribution of juveniles delinquents according to domains of BSI -53

Table 4 : Distribution of juveniles delinquents according to mean of the domains of BSI -53

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Table 1: Demographic characteristics of a juvenile delinquents (N= 54)		
	Frequency	Percentage
Age		
Less than 13 yrs	6	11.1
13-17 yrs	20	37
Equal & more than 18 yrs	28	51.9
Gender		
Male	50	92.6
Female	4	7.4
Level of education		
Illiterate	11	20.4
Able to read only	8	14.8
Able to read and write	9	16.7
Primary school graduate	6	11.1
intermediate school graduate	16	29.6
Preparatory school graduate	4	7.4
Juvenile order among his siblings		
Frist	14	26
Second	10	18.5
Third	4	7.4
Fourth	6	11.1
Fifth	8	14.8
Sixth	6	11.1
Seventh	4	7.4
Other order	2	3.7
Residence		

Urban	38	70.4
Rural	16	29.6

Table 2: Information about the delinquents of juveniles (N= 54)		
	Frequency	Percentage
<i>Type of delinquent</i>		
Stolen	34	63
Fighting	8	14.8
Traffic offences	6	11.1
Sexual issues	4	7.4
Other	2	3.7
<i>The delinquent occurs before</i>		
less than 6 month	12	22.2
6 month -1 year	28	51.9
1 – 2 yrs	2	3.7
More than 2 yrs	12	22.2
<i>Has other previous delinquents</i>		
Yes	0	0
No	54	100
<i>Guardian on juvenile delinquent</i>		
Father	42	77.8
Mother	12	22.2
<i>Health problems diagnosed</i>		
Nor has any health problems diagnosed	52	96.3
Has psychiatric health problems	2	3.7
Has physical health problems	0	0
<i>Uses alcohol and drugs</i>		
Not used alcoholic and drugs	54	100
Used alcoholic and drugs	0	0

Table 3: Distribution of juveniles delinquents according to domains of BSI -53										
BSI -53	Never		Rarely		Sometimes		Often		always	
	F	%	F	%	F	%	F	%	F	%
Somatization	0	0	12	22.2	22	40.7	14	25.9	6	11.1
Obsession compulsion	0	0	6	11.1	22	40.7	20	37	6	11.1
Interpersonal	4	7.4	30	55.6	16	29.6	4	7.4	0	0
Depression	0	0	6	11.1	26	48.1	18	33.3	4	7.4
Anxiety	0	0	12	22.2	26	48.1	16	29.6	0	0
Hostility	6	11.1	24	44.4	18	33.3	6	11.1	0	0
Phobic	0	0	22	40.7	28	51.9	4	7.4	0	0
Paranoid	4	7.4	14	25.9	32	59.3	4	7.4	0	0
Psychoticism	2	3.7	10	18.5	32	59.3	10	18.5	0	0
Additional	4	7.4	34	63	10	18.5	2	3.7	4	7.4

Table 4: Distribution of juveniles delinquents according to mean of the domains of BSI -53		
BSI -53	Mean	SD
Somatization	0.79	0.503
Obsession compulsion	1.28	0.57
Interpersonal	1.22	0.69
Depression	1.29	0.697
Anxiety	0.99	0.45

Hostility	0.93	0.62
Phobic	1.02	0.44
Paranoid	1.1	0.54
Psychoticism	1.22	0.51
Additional	1.29	0.88
Global index scores		
GSI	1.113	0.59
PST	33.25	18.8
PSDI	1.96	0.47



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