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PRESENTS:
PREVALENCE OF BEHAVIORAL AND EMOTIONAL PROBLEMS AMONG JUVENILE GIRLS INCARCERATED AT KIRIGITI AND DAGORETTI REHABILITATION SCHOOLS IN KENYA
ABSTRACT

- The purpose of this study was to establish the prevalence of behavioral and emotional problems among Juvenile girls incarcerated in the two rehabilitation centers, at Kirigiti and Dagoretti schools (formally approved schools).
- The study showed an overlap between delinquency and psychiatric disorder.
- The study had a sample of 78 adolescents in the two rehabilitation centers.
- The researcher established a high prevalence of behavioral and emotional problems among girls incarcerated in the two schools.
THE PREVALENCE OF BEHAVIORAL AND EMOTIONAL PROBLEMS

The prevalence of behavioral and emotional problems that were studied by researcher were:

- Depression
- Anxiety
- Conduct disorder
- PTSD
- ADHD
DEPRESSION

- The prevalence of depression was established in the two schools. Depression is a common mental disorder that presents with depressed mood, loss of interest, feeling of low self worthy, low energy and poor concentration.
- It usually occurs as a result of adverse life events (Barley, 2007). Depression usually starts in childhood, with likely recurrence.
- It affects women more often than men, (UNICEF 2011).

- Depression has been recognized as a common problem for many years, it is a world wide psychological disorder (Pearson & Plackett, 2000).
- It affects individual of all ages. Recent research indicates that depression is increasing among teenagers and more so those who are incarcerated (OJo, 2012).
The second prevalence that was surveyed by the researcher is anxiety.

Individual with anxiety disorder experience excessive fear or worry, causing them to avoid situations that might precipitate the anxiety or to develop compulsive rituals that lessen the anxiety (Jongsma, 2006) everyone feel anxious in response to specific events. According to (Lafortune, 2010)

Individuals with anxiety disorder have excessive and unrealistic feelings that interfere with their relationships, school, work and other social events.

The major symptoms of anxiety are; intense and prolonged feelings of fear and distress that occur out of proportion to the actual threat or danger (Reza, 2010).
The third behavioral and emotional prevalence that was observed was conduct disorder.

Conduct disorder is a behavioral and emotional disorder that occurs in children and teenagers.

A child with disorder may display a pattern of disruptions and violent behavioral and have problem following rules (Cohen, 1988).

It is likely for children to have behavior related problems at sometime during their development.

The behaviour is considered to be conduct disorder when it is long lasting and when if violates the right of others, goes against accepted norms of behavior and disrupt the child or family everyday life.
PTSD

- The fourth prevalence that was established was Post traumatic stress disorder (PTSD).
- PTSD is a mental health condition that’s triggered by traumatic event experienced or witnessed by the victim.
- The general symptoms of PTSD include flashbacks, nightmares, and severe anxiety and unavailing thoughts about the events (Reza 2010).
- Post-traumatic stress disorder may start with one month after traumatic event.
- To be diagnosed with PTSD, an adult must have re-experiencing avoidance, arousal, and reactivity symptoms.
- Children and teens have extreme reaction to trauma, but their symptoms may not be the same as adults.
- In younger children less than six years the symptoms may include; bed wetting, forgetting, acting out and clinging with parents.
ADHD

- The last prevalence which was established was Attention Deficit Hyperactivity Disorder (ADHD).
- ADHD is a disorder that make it difficult for a person to control impulsive behaviour.
- People with ADHD are generally restless, constantly active, interrupt others, and they are generally active (Steinberg, 2013).
- Symptoms of ADHD begin in childhood it can continue through adolescence and adulthood.
- Even though hyperactivity tend to decrease as children become teens, problem with inattention, disorganized, poor impulse control continue through teen years and into adulthood.
JUVENILE GIRLS INCARCERATED IN REHABILITATION CENTRES IN KENYA.

- Rehabilitation schools are established under part of the Children’s Act 2001 (G.O.K, 2010).
- The Act states that it is the responsibility of the government of Kenya to establish schools for the care and protection of children.
- There are different categories of schools to cater for the children based on sex, age and purpose of placement.
- The first categories are rehabilitation schools. The main purpose of these rehabilitations school is to teach, train and rehabilitate children.
- Supervision of these schools is the responsibility of the director of children’s services. The rehabilitation schools are geared towards crime prevention they also impart offenders with life skills.
- The children’s service department currently runs the following ten rehabilitation schools; Nairobi, Getathuru, Wamumu, Othaya, Likoni, Kericho, Kakamega, Kabete, Kirigiti and Dagoretti.
- Kirigiti and Dagoretti schools are for girls only; the other eight admit boys only. Rehabilitation schools admit children who are between 10 to 18 years. As they wait to be convicted or released by the court, they are taken to children’s remand homes (Mugo et al., 2006).
STATEMENT OF PROBLEM

- In Kenya, crime rate is on the rise and most youth with criminal behaviour have been shown to have behavioural and emotional problems.
- The common behavioural and emotional problems among youth incarcerated in rehabilitation schools are conduct disorder, anxiety, and depression (Griffin, 2010).
- Follow up studies into adult life showed that behavioural and emotional problems in adolescents increased risk of adult criminality and personality disorder (Enzmann & Podan, 2011).
- The researcher addressed behavioural and emotional problems among Juvenile delinquents in rehabilitation schools which may a risk factor for criminality.
OBJECTIVES

➢ To determine the prevalence of depression, anxiety, conduct disorder, Post traumatic stress disorder (PTSD) and attention deficit hyperactivity disorder (ADHD) of adolescence girls incarcerated at Kirigiti and Dagoretti rehabilitation schools.
METHODOLOGY

- The study used descriptive survey research design. The researcher used Achenbach youth self-report 11-18 years ASEBA.
- The researcher established the prevalence of selected behavioral and emotional problems.
- Hence the study did not make predictions or determine cause and effects of selected behavioral and emotional problems.
- The entire population for this study consisted of two rehabilitation schools.
- The researcher purposively sampled the two girls’ rehabilitation schools.
DATA COLLECTION INSTRUMENTS

The following instruments were used to collect data from the sampled respondents.

• Socio-demographic profile questionnaire
• Achenbach Youth self-report 11-18
• Secondary data abstracted from admission files
1) Prevalence of affective problem depression (APD), anxiety disorder (AD), and conduct disorder (CD) were 56.7%, 50.5 and 45.1% respectively in the study population.

2) Prevalence of the attention deficit hyperactivity disorder (ADHD) and the post traumatic stress disorder (PTSD) was 37.2% and 34.2% respectively among the respondents.

3) There was a strong positive statistical association between single parent families and affective problem depression. Adolescents from single parent families were more likely to have affective problems depression as compared to those coming from both parent family.

4) Older adolescents (>16yrs) were less likely to have anxiety disorder as compared to those who were younger (<14yrs).

5) The results demonstrate that respondents’ affective problems depression and anxiety disorder were positively correlated. The study population with affective problem depression were more likely to have anxiety disorders.
CONCLUSION

- Further research can be conducted on the post-institutional phase of rehabilitation, such as recidivism. There is need to research on how to trace children after release from rehabilitation. Institution management should determine the rate of post institutional success or failure. Research on the effectiveness of exit strategies is also necessary particularly if reintegration of children into society is to succeed.

- A study can be conducted on preventive programme of juvenile delinquency at the community level. There is need for a wider survey promoting understanding of juvenile delinquency risk factors. If risk factors were comprehensively established, then it would be easy to structure preventive programme at the community level.
IMPLICATIONS

- The majority of the adolescents in this study came from dysfunctional families.
- In addition, the study also found their parents were low income earners.
- The main limitation noted in the institution of juvenile justice system included inadequately trained personnel and lack of professional counselors.
- From the outcomes of this study, it can be observed that there is need for more proactive involvement in the provision of mental and physical health of adolescents in rehabilitation schools.
RECOMMENDATIONS

- From the findings of this study, the following recommendations are proposed;
  - There is need for psychological testing service in rehabilitation schools to enhance proper and accurate assessment, diagnosis and treatment of behavioural problems among incarcerated adolescents.
  - Rehabilitation programme can be constantly evaluated to ensure effectiveness and the relevance. In order to enhance reforms, rehabilitation schools should be graded and classified to avoid the mixing of delinquents and non-delinquents.
  - The ministry of labour, and social protection through children department- to create psychoeducation- programs meant to educate incarcerated girls on life skills.
RECOMMENDATIONS

• Rehabilitation schools management to consider starting peer counseling clubs. Peers are deemed more credible sources of information because they have experienced similar struggles.

• Ministry of labour, and social protection to join hands with the ministry of education, to ameliorate understaffing of teachers in rehabilitation schools. Rehabilitation schools are grappling with severe shortage of teachers which is affecting rehabilitation programmes.