

Psychotherapy for Juvenile Delinquents and Differences in the Geographical- Region

Kadim Lovakumari

PhD Scholar (Full time), Department of Psychology, Andhra University, Visakhapatnam

ABSTRACT: The present study aims to investigate the decrease for the juvenile delinquent problem through psychotherapy. Psychotherapy signifies to eliminate or control of troubling symptoms of juvenile delinquents so the patient can function better. The Visakhapatnam city has taken as the study area, and a sample of 100 respondents covered (50 males 50 females, ages 11 to 18years) from juvenile homes. The data collected by Achenbach's youth self-report questionnaire (2001): used to measure used to treat a wide variety of mental disorders and emotional difficulties. Data obtained processed with SPSS software to find out the results. Psychotherapy can also help build a sense of well-being and healing, coping with daily life, the impact of trauma, physical illness, like the death of a loved one, and specific mental disorders, like depression or anxiety and eating disorders. Psychiatrists, psychologists and other mental health professionals can provide psychotherapy.

Keywords

Psychotherapy, Emotional problems, Depression, Thought problems, Mood, feelings and behaviour

Objectives

1. I assessment the emotional behaviour among males and females.
2. Propose gender differences in juvenile delinquents.
3. I investigate fixation treatment utilizing continues schedule learn training of psychotherapy.

Methodology

The goals of psychotherapy treatment and arrangements for how often and how long to meet tour planned jointly by the juvenile delinquents and us, most sessions take 45-50 minutes long. Psychotherapy can be short-term, dealing with immediate issues, or long-term, dealing with longstanding and complex problems. We tested whether decrease juvenile delinquent behaviour identified with better pre-treatment and post-treatment learns training through psychotherapy. After psychotherapy treatment to help change their problematic behaviours like depression or anxiety and eating disorders as well as build a sense of well-being and healing difficulties in coping with daily life. Juvenile delinquents can overcome personal problems or attain personal growth. Adolescents can use psychotherapy conducted in an individual and group setting. Confidentiality creates an essential requirement for psychotherapy.

Results

The geographical regions of juvenile delinquents got higher percent 37.2 belong to the region of Krishna district than the region of Visakhapatnam district. The results about juvenile delinquents have significantly higher among the region of Krishna district than in the case of Visakhapatnam district region group.

Juvenile delinquent behaviour before pre-treatment therapy, in that way, depression, anxiety, and thought problems take higher of a juvenile delinquent, after post-training six dimensions of emotional, anxiety and depression problems effect lower. The significance began found in dimensions of emotional and behavioural problems, namely anxious/depressed, thought problems, attention problems, aggression behaviour, withdrawn/depressed and antisocial personality problems; in the experimental group.

The present study shows that most juvenile delinquents who receive psychotherapy experience symptom relief and appear better able to function in their daily lives. Psychotherapy has made shown to improve emotional and behaviours linked with positive changes in the brain and body. The benefits also include fewer sick days, less disability, fewer medical problems, and more stability.

Procedure and treatment programme

I conducted the individual, group and family psychotherapy treatment, I talked to the juvenile delinquents and taking anywhere from a few weeks to two months ten sessions and per session has one hour to see the results. Psychotherapy can take delivery in several different ways. In some cases, our treatment may incorporate two or more forms, such as meeting individually with me. I did follow by the occasional group session where we can practice new skills.

I conducted group therapy; involves four people and me. I offer everyone the opportunity to give and receive group support in coping with their particular issues; I take the chance to observe how participants interact in group settings. It means a less expensive alternative to individual therapy.

I conducted individual therapy; this modality involves one-on-one work between the patient and me. It allows the patient to have the full attention of me. Still, it remains limited in that it does not allow me an opportunity to observe the patient within social or family relationships.

Family therapy; this approach implies most useful when it signifies necessary to work on dynamic within the family group. Family therapy can make especially helpful for juvenile delinquents.

I involve talking can help them discuss feelings they have about themselves and other people, particularly family and those close to juvenile delinquents, Sometimes used music, drama, art. In some cases, the family prepare to offer joint therapy sessions together. Individual sessions last about fifty minutes, but group sessions often take one and half hour.

Conclusion

These outcomes demonstrate that decreasing juvenile delinquent behaviour and enhancing schedule learn activity can help avoidance and treatment for juvenile delinquents.

Introduction

Psychotherapy originated with the practice of psychoanalysis, the talking remedy revealed by Sigmund Freud (1856-1939), Soon theorists such as Alfred Adler (1870-1937) and Carl Jung (1875-1961) started to introduce new concepts about psychological functioning and change. Psychotherapy signifies a treatment that involves a relationship between a therapist and patient. It can hold used to treat a wide variety of emotional difficulties and mental disorders.

Mental illness and emotional distress do not discriminate, that affect all ages, ethics group and socio-economic statuses. These disorders impaired how people feel, think and act psychological problems with how people function at work or school and affect their relationships with friends and family. Psychotherapy may take conducted in an individual, family, couples or group setting, and can ingest use by adults, children or adolescents. According to the American Psychological Association (APA), Psychotherapy can make defined as a collaborative treatment.

Types of psychotherapy; psychiatrist, psychologists and other mental health professionals' use various kinds of therapy; the choice of therapy type depends on the patient's particular illness and circumstances, and the patient's preference. Common types of therapy include cognitive behavioural therapy, which helps patients identify and change thinking and behaviour patterns that affect harmful or ineffective, replacing them with more accurate thoughts and functional behaviours. It often involves practising new skills in the "real world" Interpersonal therapy, which means used to help patients.

Interpersonal problems that remain difficult, like unsolved anxiety, differences in cultural roles, struggles with essential others, and issues make correlating to others.

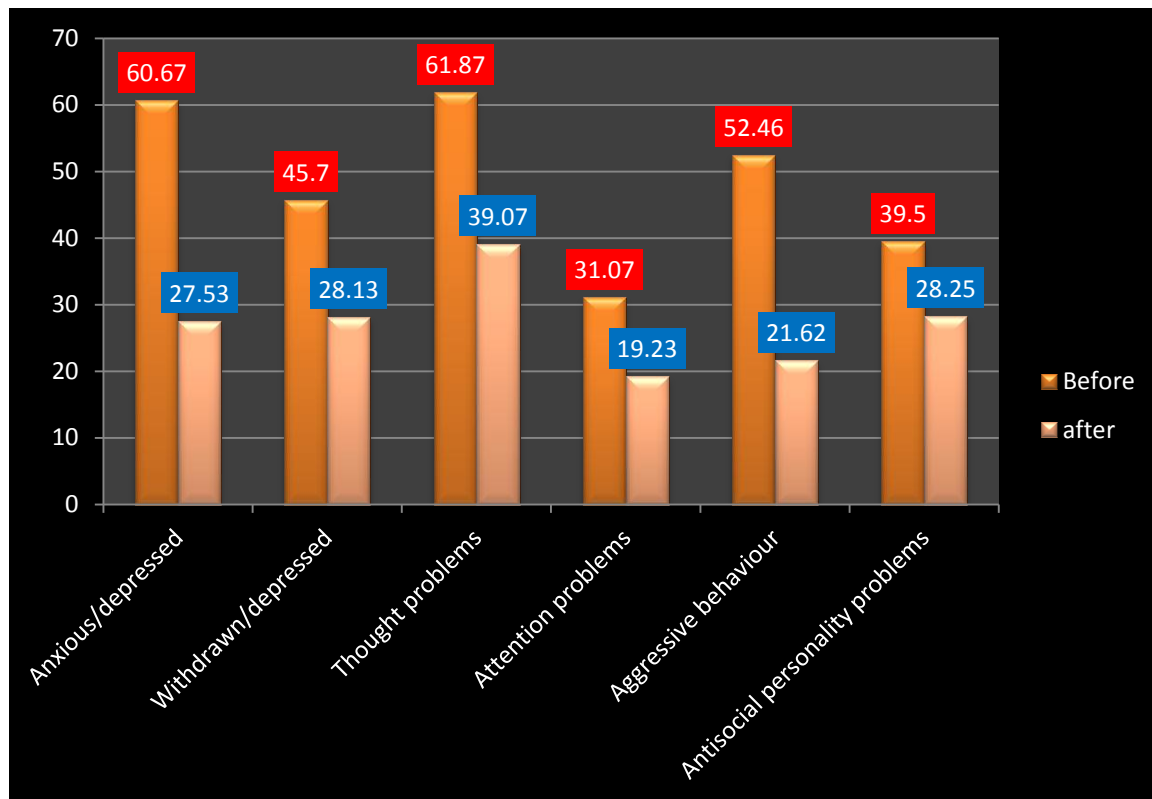
Psychodynamic therapy; which signifies based on the idea that childhood relationships and experience influence on the behaviour, mental well-being, psychological conflicts, and unproductive or inappropriate repetitive thoughts or feelings. That often happens outside of the person's awareness, manages the association with the therapist to operate at old patterns. So a person can more fully take charge of his or her life, psychoanalysis, which signifies a more intensive form of psychodynamic therapy. Sessions take conduct three or more times a week.

Regional difference

Juvenile delinquents have significantly higher among the region of Krishna district than in the case of Visakhapatnam district region group.

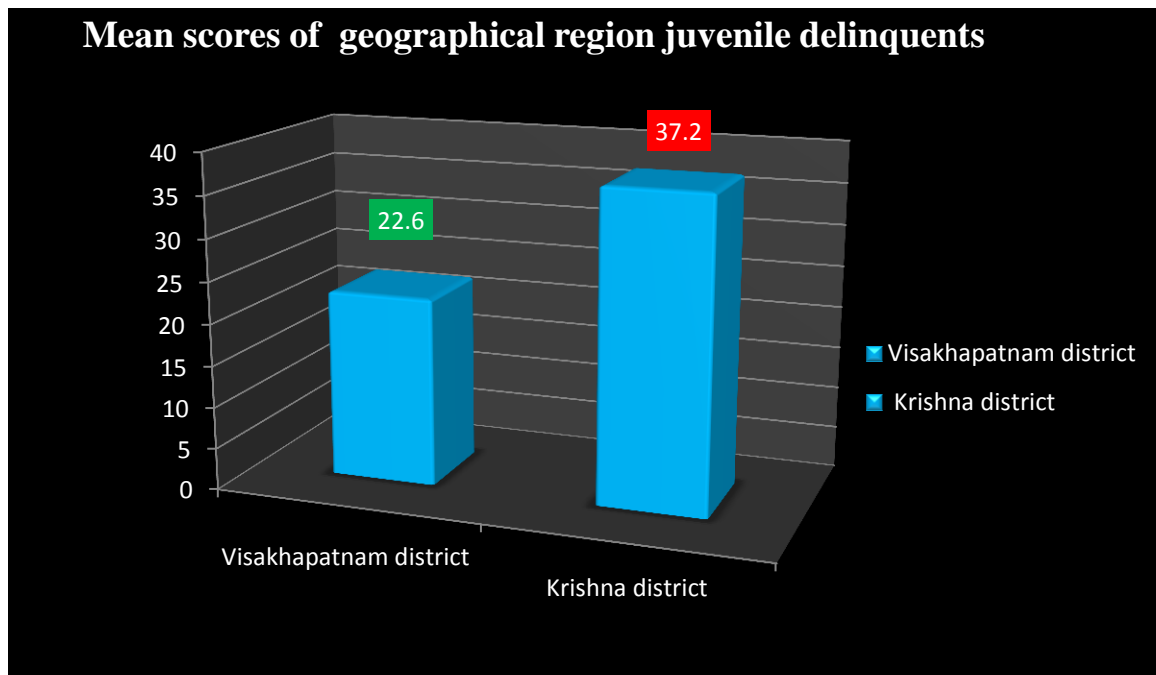
Data analysis and data interpretation

The data collected by Achenbach's youth self Report (2001) questionnaire, data obtained processed with SPSS software to find out the results. The study selected for the interview method useful for juvenile delinquents.



Graph: Comparison of Mean scores, before (pre-test) and after (post-test) six scales of the dimensions of emotional and behaviour problems in juvenile delinquents.

The examinations of six scale of the dimensions of emotional and behaviour problems in juvenile delinquent behaviour when interactive learn training activity through psychotherapy treatment. Yellow bar, higher six dimensions of emotional and behaviour problems in juvenile delinquent behaviour at pre-treatment. In that way, yellow bar thought problems, depression and anxiety problems implies higher at pre-treatment, pink bar, six dimensions of emotional and behaviour problems lower in juvenile delinquent behaviour at post-treatment. Significance implied found in dimensions of juvenile delinquent behaviour, namely anxious/depressed, thought problems, aggression behaviour, attention problems and antisocial personality problems; post-treatment in the experimental group. The significant difference prepared found in dimensions of emotional and behaviour problems after post-treatment. Average $p < 0.01$, error bars demonstrate significant deference.



It can be observed that the mean scores of the districts, namely, Krishna district of juvenile delinquents are higher in the region. While the lower mean scores on these districts of Visakhapatnam district-related region for the group of juvenile delinquents. Thus it can be concluded that mean on Krishna district appears to be higher. The juvenile delinquent groups conformed to that of the lower score Visakhapatnam districts of juvenile delinquent groups.

Research design

A quasi-experimental design was adopted to carry out this study.

Setting:

The study was conducted in residential homes affiliated to the Ministry of women and child development, Andhra Pradesh, namely juvenile homes, which signifies location at Visakhapatnam city.

Conclusion

The study demonstrated that juvenile delinquent behaviour varies by region, with higher rates in Krishna district compared to Visakhapatnam district. Pre-treatment and post-treatment learning activities aimed at decreasing juvenile delinquent behaviour and through psychotherapy treatment. Significance was found in dimensions of emotional behaviour of juvenile delinquents. Before pre-treatment therapy, in that way, depression, thought problems and anxiety problems were higher for a juvenile delinquent. After post-training, six dimensions of emotional and behavioural problems remained lower. Suggestions for further research include using longitudinal, randomized, and effectively controlled research designs and larger sample sizes to advance the understanding of the mechanisms of juvenile delinquent behaviour and psychotherapy treatment.

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