Road Map to Handling Juvenile Delinquency

Shilpa S.

& Jafsi KP

2023



Ms. Jafsi KP has Professional registration of Saudi Commission for Health Specialties, Rivadh, Kingdom of Saudi Arabia, She completed her MSc in Community Health Nursing at Kerala University of Health Sciences, Thrissur, Kerala, India. She completed her Nursing graduation (BSc Nursing) at Rajiv Gandhi University of Health Sciences, Karnataka, India; she currently works as Nursing Quality Coordinator at Al-Nagaha Hospital, Riyadh, Saudi Arabia. After completing her dissertation. She has found that it is often the act of making an artful transaction with a delinquent or juvenile offender that can lead to their rehabilitation. She has been a proponent of social justice, particularly in the area of juvenile delinquency.



Ms. Shilpa. S has professional registration of Kerala Nurses and Midwives Council; she completed her MSc in Medical Surgical Nursing at Kerala University of Health Sciences, Thrissur, Kerala, India. She did her graduation in nursing in Calicut University, Kerala, India; she is currently working as an Assistant Professor in Department of Medical Surgical Nursing, Alshifa College of Nursing, Perinthalmanna. She also specialized in Applied Psychology. She had published 16 research papers in various international journals. She also has prominent interest in the field of research works. She has organized workshops and conferences, presented research papers in conferences at state, national and international levels. She wrote two books on neurology.



WWW.CRDEEPJOURNAL.ORG; EDITOR@CRDEEPJOURNAL.ORG +91-6395985863

978-81-957522-0-1

ROAD MAP TO HANDLING JUVENILE DELINQUENCY



AUTHORS:

Shilpa. S Jafsi KP

CRDEEP Publications

ISBN: 978-81-957522-0-1

Road Map to Handling Juvenile Delinquency:

Evaluate the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees

AUTHORS:

Shilpa S. & Jafsi K.P

CRDEEP Publications

Road Map to Handling Juvenile Delinquency: Evaluate the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees
No part of this book can be republished, reproduced or reprinted without prior permission of author or publisher.
Copyright @ CRDEEP Publication First Edition
20 23

ISBN: 978-81-957522-0-1

Typesetting and Printing at: CRDEEP Publications, Dehradun

PREFACE

This is book is designed to provide a broad introduction to juvenile delinquency. Under the challenges of various constraints, we are very grateful that we finally managed to complete this book in a considerable punctuality. Research over the past few decades on normal child development and on development of delinquent behavior has shown that individual, social, and community conditions as well as their interactions influence behavior. Many children reach adulthood without involvement in serious delinquent behavior, even in the face of multiple risks. Although risk factors may help identify which children are most in need of preventive interventions, they cannot identify which particular children will become serious or chronic offenders. It has long been known that most adult criminals were involved in delinquent behavior as children and adolescents. We consider this topic a highly interesting.

Shilpa S & Jafsi K.P

ACKNOWLEDGEMENTS

"Man's efforts are always crowned by God's grace and blessings. Words are inadequate to express heartfelt thanks to God almighty for abundant blessings and strength throughout to complete this book.

We would like to thank and gratefulness to our family and friends for their encouragements and moral supports which was our inner strength to complete this book successfully.

CONTENTS

Chapter No	Chapter name	Pages
1	Introduction	1-5
2	Review of Literature	6-11
3	Methodology	12-15
4	Analysis and Interpretation	16-22
5	Results	23-24
6	Discussion, Summary and Conclusion	25-27
7	References	28-29

CHAPTER 1

INTRODUCTION

It is our responsibility to ensure bright future for today's children so that tomorrow society will benefit.

-DanOfford

A child is born innocent and if nurtured with tender care and attention then he grows in a positive way. The physical, mental, moral and spiritual development of the children makes them capable of realizing his fullest potential. On the contrary harmful surroundings, negligence of basic needs, wrong company and other abuses may turn a child to a delinquent. With changing societal trends children now appear to possess strong likes and dislikes and also show expressions that indicate maturity at a very early age. These qualities also make children more vulnerable to the designs of the criminality such as abusers, peddlers and traffickers. Moreover the influence of the media on the psychosocial development of children is profound².

Today's children are tomorrow's responsible citizens of the world. There is a great deal on emphasis of children these days because of the recognition that a very substantial proportion of the world's population 35 to 45 percent constitutes the young children. The future of our country depends on the mental health of our young people. However one in five children have emotional and behavioural problems at some point of time in their lives regardless of their geographical region or socioeconomic status. Behaviour is simply verbal and nonverbal communication. It is the conduct, actions and words that children employ a signal with which they express their thoughts, feelings, needs and impulses. It is judged as to whether it meets social, cultural development and age appropriate standards. Behaviour can be positive or negative, impulsive or planned, predictable or unpredictable, consistent or inconsistent and it can elicit wide range of positive or negative responses from others³.

Delinquency is a kind of abnormality when an individual deviates from the course of normal social life. His behaviour is called delinquent⁴. Juvenile delinquency is an important public health problem that contributes to the morbidity and mortality of adolescents as well as places a significant economic burden on society. The problem of juvenile delinquency is becoming more complicated and universal crime prevention programmes are either unequipped to deal with the present realities or do not exist. Many developing countries have done little or nothing to deal with these problems and international programmes are obviously insufficient⁵.

Family factors which may have an influence on offending include the level of parental supervision, the way parents discipline a child, parental conflict or separation, criminal parents or siblings, parental abuse or neglect, and the quality of the parent-child relationship, Children brought up by lone parents are more likely to start offending than those who live with two natural parents, however once the attachment a child feels towards their parent and the level of parental supervision are taken into account. Children in single parent families are no more likely to offend than others. Conflict between a child's parents is also much more closely linked to offend than being raised by a lone parent. If a child has low parental supervision they are much more likely to offend. Many studies have found a strong correlation between a lack of supervision and offending, it appears to be the most important family influence on offending. A lack of supervision is connected to poor relationships between children and parents, as children who are often in conflict with their parents may be less willing to discuss their activities with them. Children with a weak attachment to their parents are more likely to offend.

Act of delinquency may include the acts such as running away from home without the permission of parents, habitual behaviour beyond the control of parents, spending time idly beyond limits, use of vulgar languages, wandering about rail roads, streets market places, visiting gambling centre, sexual offences, shop-lifting and stealing etc. Juveniles may do such activities singly or through a gang⁷.

The disorder and destruction due to deviant behaviour a worldwide phenomenon is assuming alarming proportions in social organizations and is awakening call to those who are either in its grip or are likely to get struck. Children who are at risk of becoming delinquent often live in difficult circumstances including parental alcoholism, poverty, breakdown of the family, overcrowding, abusive conditions in the home or the death of parents⁸.

School delinquency and student behaviors ranging from non attendance and misconduct to crimes that occur on campus or in proximity to school-has been a crucial topic of discussion in high schools across the country. In fact, schools are the primary setting in which much of adolescent delinquency occurs and the most promising setting for the prevention of delinquency.

Behavioural problems in children and adolescents have considerably increased during the last few years ¹⁰. School places a crucial and a formative role in the spheres of cognitive, language, emotional, social and moral development of children ¹¹. So hope you that trained teachers who have positive attitude and practical knowledge concerning individual needs and problems can prevent and manage emotional and behavioral problems of school children.

The Indian statistics shows that the crimes conducted by children i.e. juvenile delinquent cases in 1997 were 7909 and its observed that there is marked increase in the crime records by children as much as 22,865 in 2007¹². This tremendous increase in the rate from 1997 to 2007 alerts for timely intervention to guide the children and prevent crimes by children. The crimes committed by minors were 1.7 percent of total crime in the country in 2005. It is increased to 1.9 and 2.0 percent in 2006 and 2007 respectively, according to the "Crime in 2007" report of the National Crime Record Bureau (NCRB), a total of 34,527 juveniles were apprehended during 2007 out of which 32,671 were Boys and 1,856 were girls¹³.

Over 33,000 juveniles, mostly between 16 to 18 years of age have been arrested for crimes like rape and murder across Indian states in 2011, the highest in last decade. According to a Home Ministry data, the total of 33,387 juveniles apprehended in 2011, 21,657 were in the 16-18 years of age group, 11,019 were in 12-16 years of age group and 1,211 between 7-12 years of age group .Whereas, 32,145 such youngsters below 18 years of age were held in 2006, 34,527 in 2007, 34,507 in 2008, 33,642 in 2009 and 30,303 during 2010. The data also shows increasing cases of rape by juveniles. As many as 1,419 such cases were recorded in 2011 as compared to 399 cases in 2001. It is pertinent to mention that a juvenile and five others were arrested by Delhi Police for Brutally raping and assaulting a 23 year old girl in the national capital on December 16, 2012. The victim later succumbed to her injuries².

The cases of murder by juveniles have also shown a surge in last ten years. As many as 531 youngsters below the age of 18 were apprehended for murder in 2001 as against 888 arrests between January and December 2011. According to the data, 6,770 juveniles were arrested in Maharashtra, 5,794 in Madhya Pradesh, 2,692 in Chhattisgarh, 2,542 in Rajasthan and 2,510 in Gujarat among others in 2011. In the same year, a total of 2,474 adolescents were arrested in Andhra Pradesh, 2,083 in Tamil Nadu, 1,204 in Uttar Pradesh and 1,126 in Bihar. Among the total number of juveniles arrested in 2011 under different sections of IPC and Special and Local Laws (SLL), 6,122 were illiterate, 12,803 were primary pass outs, 10,519 were above primary and below matriculation qualified and 4,443 were metric and higher secondary qualified. A total of 27,577 juveniles, who were held for criminal acts were living with parents, 4,386 were living with guardians and 1,924 were homeless, giving details of their family background. Therefore it is imperative to understand the concept of juvenile delinquency and delineate the conditions giving rise to high rates of crimes and conflicts with law².

Prevention before the event rather than intervention after the crime has occurred is clearly the preferred way. "Prevention is better than cure" is the slogan which is most widely accepted in all aspects of problems. Delinquency is the disorder which can be prevented by guiding and supervising the adolescents in a right way.

Need and significance of the study

Schools are in an unique position to identify maladjustment early in the lives of children and to differentiate between growing pains and the beginnings of a deep-seated emotional disturbance. Schools have great potential as a locus for crime prevention. They provide regular access to students throughout the developmental years and perhaps the only consistent access to large numbers of the most crime prone young children in the early school years they are staffed with individuals paid to help youth develop as healthy, happy, productive citizens and the community usually supports schools efforts to socialize youth. Many of the precursors of delinquent behavior are school-related and therefore likely to be amenable to change through school-based intervention¹⁴.

The majority of studies and programmes dealing with juvenile delinquency during adolescents. According to juvenile data crimes registered by the police more than 80% of all violent incidents in males are between the age group of 16-18 years. Surveys shown that boys are more likely than girls to become victims ¹⁵. The prevalence rate of behavioural problem is 17% to 27% in US school children and in India the prevalence rate is 30% to 50%. According to documents on activities child guidance centre (2011)37.18% of the children were found engaged in lying, stealing, and jealousy and 28.78% children were restless and disobedience ¹⁶. Schools are seen as the principal agency not only for socialization but also for social correction.

The State of the Urban Youth India 2012 report "Juvenile crime in urban areas in India rose by 40% between 2001-10. They are generally single earning members, having a family size between five and seven

members, holding skilled or semi skilled jobs, school drop out of juvenile¹⁷. A study in Maharashtra has revealed that the majority of the juveniles in conflict with law are between 16 and 18 years. The predominant offence charge was related to 'theft', followed by 'assault'. Lack of education is an important factor with over 55% juvenile criminals being illiterate or with limited to primary education¹⁸.

In Kerala the following facilities have been established for the treatment of adjudicated children and adolescents six juvenile homes, 14 observation homes, one certified juvenile home and two special homes. The crime in India (2010), there were 826 recognizable crimes of juvenile delinquency in Kerala; 256 involved early adolescents in the 12- 16 years of age and 544 were committed by adolescents 16- 18 years of age (2010). Additionally, there were only 22 cases of delinquency involving girls who were arrested. Under the Juvenile Justice Act of 2000 institutionalization is the last resort. Those who are in lock up facilities are to be deinstitutionalized and admitted to regular schools. Thus the rehabilitative aspect is emphasized in this Juvenile Justice Act of 2000. 19

The school is one of the most organized and powerful systems in the society, which presents opportunity to work through it and to influence the health and well being of children. The school comes next to home in the community in ordering the behaviour of children. There should be a healthy teacher pupil relationship. The school teacher can play an important part by detecting early signs of maladjustment. Schools should serve as resource and referral centers for the provision of medical, counselling and other services to young persons, particularly those with special needs and suffering from abuse, neglect, victimization and exploitation. School systems should attempt to meet and promote the highest professional and educational standards with respect to curriculum, teaching, learning methods, approaches and the recruitment and training of qualified teachers. Regular monitoring, assessment of performance by the appropriate professional organizations and authorities should be ensured. School systems should plan, develop and implement extracurricular activities of interest to young persons in co-operation with community groups²⁰.

A grave problem such as juvenile delinquency can't be solved by means of legislation and government efforts alone. As far as India is concerned in many of the states children acts have not been effectively enforced. Some of these Acts themselves have effects. Government as well as private agencies must work hand in hand with all sincerity and seriousness to find on effective remedy for the problem of juvenile delinquency. The public attitude towards Juvenile delinquents must also change. A juvenile delinquent is a product of unwholesome environment congenial for the development of his faculties in conformity with social expectations²¹.

A study was conducted to find out the importance of giving education to teachers to prevent delinquency in children and to manage it. Data were collected using convenience sampling of 550 detained adolescents (14-18 years) to explore the association between adolescents perception of teacher connectedness and a range of health risk behaviours. The association between teacher connectedness and adolescents health risk behaviours prior to detainment suggests that school-based interventions that enhance the school environment, particularly teachers skills and training to enhance and maximize the effectiveness of their student interactions, may be one strategy for reducing health risk behaviours and their associated adverse health outcomes among youth at high risk.

Factors related to school delinquency is necessary to understand by the school teachers in order to prevent the juvenile delinquency. Why some students engage in school delinquency while others exhibit few problem behaviors in middle and high school. What makes some students become involved in delinquent behavior? Such questions should be clear enough in the mid of teachers. Hence the knowledge regarding juvenile delinquency is felt essential among school teachers.

The importance of a teacher becomes vital in safeguarding and promoting the mental health of children and early identification of deviations from normal. Hence the trained teachers can manage and prevent behavioral problems of school children to a certain extent if they get adequate and sufficient knowledge regarding behavioral problems of school children²³.

Considering all the facts described above, the researcher felt that there is a strong need to bring awareness among teacher training students. Teachers are a group probably in daily contact with more children than any other adult in the community. Consequently they are in key position to pick out and help those children whose problems show possible movements into delinquency. To perform this task adequately the teachers should be familiar with the delinquency. So the investigator has selected the present population should aware of juvenile delinquency in order to prevent the same.

Statement of the problem

A study to evaluate the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees in selected institutes at Malappuram District.

Objectives

- 1. Assess the pre test and post test knowledge of teacher trainees regarding juvenile delinquency in the experimental and control group
- Assess the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees.
- 3. Determine the association between pre-test knowledge score and selected demographic variables.

Operational definitions

- Effectiveness: refers to gain in knowledge brought about by administration of planned teaching programme on juvenile delinquency as measured in terms of significant improvement in post-test knowledge score among students of selected teacher training institutes.
- Planned Teaching Programme: refers to systematically developed group teaching programme for teacher trainees regarding juvenile delinquency for 45 mts which includes meaning, causes, risk factors, characteristics, role of a teacher in identification and prevention using appropriate audio visual aids.
- Knowledge: refers to responses of the teacher trainees to the knowledge questionnaire regarding juvenile delinquency.
- Juvenile Delinquency: refers to the anti-social behavioural problems of children below 18 years of age like antisocial behaviour such as stealing, gambling, lying, destructive behaviour such as destroying something for fun, fighting and substance abuse such as drug addiction, eating pan masala, alcoholism and smoking.
- Teacher trainees: refers to an individual studying for teacher training course in a recognized educational institution on a regular basis.

Hypotheses

 H_1 : There is a significant difference between mean pre-test and mean post

test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental group.

 H_2 : There is a significant difference between mean post-test knowledge

scores of teacher trainees regarding juvenile delinquency in the experimental and control group.

H₃ : There is a significant association between pre-test knowledge scores of

teacher trainees regarding juvenile delinquency and selected demographic variables .

Assumptions

- Teacher trainees have some knowledge regarding juvenile delinquency
- Planned teaching programme is an effective teaching strategy for providing information.

Conceptual frame work:

Good research usually integrates research findings into an orderly, coherent system. Such integration typically involves linking new research and existing knowledge through a thorough review of prior research on a topic and by identifying or developing an appropriate conceptual framework. A conceptual frame work is used in research to outline possible courses of action or to present a preferred approach to an idea or thought. It serves

as aspiring boards for the generation of research hypothesis and can provide an important concept for scientific research. The conceptual frame work facilitates communication and provides systematic approach to nursing research education and administration.²⁴

The present study is aimed at evaluating the effect of planned teaching programme on knowledge of teacher trainees regarding juvenile delinquency. The conceptual frame work chosen for the study is based on general system theory. It is one of the widely used models to explain about assessment of knowledge of an individual. This theory is proposed by Ludwig Von Bertalanaffy in 1986²⁴.

Functioning of the systems

- Input
- Through put
- Out put
- Feedback

Input: Is the information, energy or matter that enters the system. In this study it refers to an assessment of pre test knowledge score of teacher trainees regarding juvenile delinquency by administrating structured questionnaire and administration of planned teaching programme regarding juvenile delinquency.

Through put: is the process used by the system to convert raw materials or energy from environment in to the products that are usable by either the system or by environment like thinking, planning, constructing, sorting, processing, sharing information etc. In this study it refers to teacher trainees understands the content in order to meet the general and specific objectives of the planned teaching programme.

Output: is the end result or product of the system. Outputs vary widely, depending upon the type and purpose of the system. In this study it refers to an assessment of post test knowledge score of teacher trainees regarding juvenile delinquency.

Feedback: the final part of feedback is communicating the results which provides for either strengthening or modifying the input process. In the present study feedback is not included.

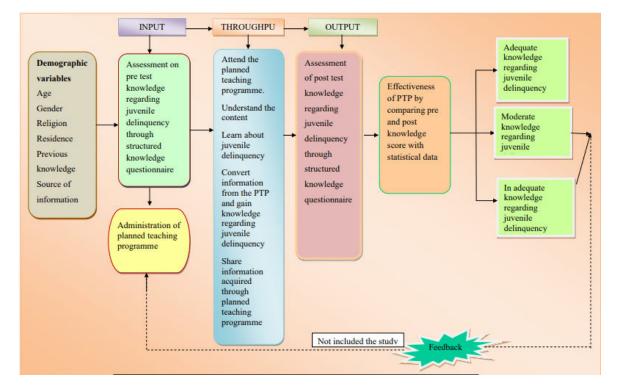


Figure 1: Conceptual frame work on Ludwig Von Bertalanaffy's General system theory 1986

CHAPTER-2

REVIEW OF LITERATURE

Review of literature is a key step in research process. Literature review helps to lay the foundation for a study and can also inspire new research ideas. It also plays a role at the end of the study, when researchers are trying to make sense of their findings.

The researcher arranged the literature relevant to this study in a logical sequence under the following headings:

- > Studies related to factors on juvenile delinquency
- > Studies related to knowledge of school teachers regarding juvenile delinquency
- > Studies related to effectiveness of school interventions in reducing juvenile delinquency.
- > Studies related to effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among school teachers

Studies related to factors on juvenile delinquency

An empirical study was conducted to investigate the impact of various factors on juvenile delinquency among young people. There were three hypothesis which includes family income, tendency to spirituality, religion and educational background of families among these people. The study distributes 400 questionnaires among young people aged 19-26 years who were involved with some sort of crime and analyzes their feedbacks. The results shows that the relationship between family income and juvenile delinquency was calculated as chi square= 5.57, p-value =0.02 with df =1. The relationship between religion as well as spirituality and juvenile delinquency shows that chi square =7.13,p-value=0.008 with df=1 and the relationship between families educational background and juvenile delinquency shows that chi square= 0.012 p-value=0.09 with df=1. The results of the study indicated that family income and their religious backgrounds were important on juvenile delinquency. It also suggested that a better family condition could help to reduce juvenile delinquency and people could guide their children through better consultations ²⁶.

A study was conducted to find out the causes of juvenile delinquency and its effect on society among coaching students. To explore the activities, behaviour and causes of delinquent children, 100 psychologists and doctors, 100 police officers, 100 society members/ neighbourhoods, 100 hostel caretakers and 100 parents were selected through purposive sampling technique. A checklist and questionnaire with some open ended questions were used to collect data. The study revealed that mostly delinquents were associated with the stealing, forged signatures, damaging property of schools and their coaching, bullying and mockery, torturing, using abusing language, exhibitionism, homo sexuality, making sexual suggestions, masturbation, obscene drawing and pictures, robbery, smuggling, drug trafficking, truancy etc. but very less number of students were found involved in committing suicide, prostitution, murder and rape. The study also revealed the reasons behind this juvenile delinquency which are family influences, films and television, school factors, peer group, geographical influences, scholastic attainment, physiological characteristics, personality characteristics, and genetic factors. As a conclusion it was found that parents' observation and supervision is necessary to control delinquent behaviours of juveniles and yoga, meditation, motivational seminar, conferences, individual and group counselling may be very effective preventive measures of juvenile delinquency²⁶.

A cross sectional study was conducted to investigate the role of family structure, parental monitoring and affiliation with delinquent peers in predicting juvenile delinquency. The sample consists of 96 adolescents, belongs to 14 to 18 years convicted of major crimes selected from Correction Service Centre. The control sample comprised of 87 non-delinquent, community participants. Parental monitoring was measured through a seven-item parental monitoring scale and the demographic questionnaire was used for assessing variables including adolescents age, education and socioeconomic status. To measure family structure, the adolescents categorized their families as intact (two-biological parents) or broken/disturbed families (single-parent etc.). The relationship between variables were analyzed using Chi-square test and Logistic regression. The participants mean and standard deviation (SD) of age were 16.82 and 1.04 years for delinquents and 16.52 and 1.22 for non-delinquents, respectively. Most of the participants (n= 78, 81.2%) were spending their first term in prison. Also a large proportion of the delinquents (78/96, 81.2%) and non delinquents (52/87, 54.1%) had vocational experiences. The reasons why the delinquents were confined to the juvenile corrective institutions included violent offenses such as fighting or threatening (16.7%), homicide and rape offenses (9.4%), property offenses such as theft and burglary (44.8%), alcohol and drug related offenses (16.7%), mixed type offenses

(5.2%) and other offenses (7.3%). This findings implies that the delinquent and non-delinquent adolescents were significantly different in scores of parental monitoring (P<.05) and affiliation with delinquent peers (p<.001). Logestic regression analysis was used to investigate the predictive role of family structure, parental monitoring and affiliation with delinquent peers for delinquency. The results showed that the family structure and affiliation with delinquent peers, among predictor variables, could significantly predict delinquency occurrence and it also reveals that The results of omnibus test is fit to predict juvenile delinquency variation (Chi Square= 64.86, P<0.001)²⁷.

A comparative study was conducted on Juvenile Delinquency among adolescence. The samples of this study were adolescents and it also limited to youth with no prior arrests and limited to youth between 7 and 16 years of age. The matched sample is 47% African American, 34% Hispanic, 17% White and 2% Asian. On average, children were 8.5 years old at the time of their first placement. Fifty-four percent of the sample were male and 33% of samples were females. As the sample is matched, 50% are associated with at least one group home placement. On average children stayed in care for 52 months. With regard to delinquency, 1,142 (14%) of the 8,226 adolescents in placement had at least one arrest subsequent to their first placement episode. with prior studies and the overall risk of delinquency in the general population, males in the child welfare system are more likely to engage in delinquency as compared with females in the child welfare system (16% vs. 11%). African Americans had the highest risk of delinquency (16%) as compared with Hispanics (14%), whites (9%) and Asians (9%). There was a difference in risk associated with reason for placement: neglect (11%), physical abuse (16%), sexual abuse (10%), and emotional abuse (10%). The reasons for instability also appear to impact the likelihood of delinquency. The study revealed that males are more likely to engage in juvenile delinquency than females²⁸.

A study was conducted to explore on anticipating problem drinking risk from preschoolers antisocial behaviour, evidence for a common delinquency-related diathesis model. Objective of the study was first drinking (EFD) experiences predict later alcohol problems. Participants were 220 male children and their parents in a high risk for substance use disorder prospective study. Early first drinking was defined as having had a first drink by 12 to 14 years of age. Results of the study was first drinking was associated with delinquent behaviour more than aggression. Early drinkers were more delinquent at most ages-with a direct effect of preschool predisposition on adolescent behaviour only within the EFD group. Early first drinking was disproportionately likely among individuals with high levels of delinquent behaviour at both 3 to 5 and 12 to 14 years of age²⁹.

A study was conducted to find out the factors of juvenile delinquency. The data was collected from 300 juvenile male offenders. Subjects were belonging between 11 to 18 years old. The findings are Boys are more vulnerable than girls to develop attention-deficit and hyperactivity disorder, learning disabilities, delayed communication skills development or even higher levels of callous-unemotional traits, factors associated with a heightened risk for developing delinquent and disruptive behaviors. The factors with higher impact on delinquency were substance use followed by classmates and school satisfaction. Substance use present a positive impact and classmates and school satisfaction a negative impact which allows us to say that the more frequent is substance use and the more negative are the relations in the school context the more frequent will be the delinquent behaviors³⁰.

A quasi experimental study was conducted to evaluate the effectiveness of behavioral modification therapy in coping with adjustmental problems among juvenile delinquents. A total of 50 juvenile delinquents were selected for the study, who met the inclusion criteria and the total time exposed was 8 to 112 hours. On day one the level of adjustmental problems was assessed using modified James Watson and Richard ongoing assessment of juvenile delinquents. On the last day, the evaluation was done by using the same tool. The first objective revealed that among 50 individuals 42(84%) had moderate level of adjustmental problems and 8(16%) had severe level of adjustmental problems on the assessment day. The second objective exposed that after giving behavioral modification therapy the overall mean was 25.98 with standard deviation of 1.37 on the evaluation day. The third objective revealed that there was a significant correlation between the behavioral modification therapies and the demographic variables such as age, type of family, marital status of parents, and the place of residence. On pretest out of 50 samples 08 individuals exhibited severe adjustmental problems and 42 individuals exhibited moderate adjustmental problems. It was found that 47 individuals exhibited mild adjustmental problems and 03 individuals exhibited moderate adjustmental problems which shows that the behavioral modification therapy was effective in reducing adjustmental problems among juvenile delinquents³¹.

A study was conducted to determine the long-term effectiveness of school based intervention program. The Data was collected by Fifteen-year follow-up of a nonrandomized, matched-group cohort of 1539 low-income children. The Chicago Child-Parent Center (CPC) Program (n=989) children provides

comprehensive education, family and health services and includes half-day preschool at 3 to 4 years of age halfor full-day kindergarten, and school-age services in linked elementary schools at 6 to 9 years of age. The comparison group (n = 550) consist of children who participated in alternative early childhood programs (fullday kindergarten): 374 in the preschool comparison group from 5 randomly selected schools plus 2 others that provided full-day kindergarten and additional instructional resources and 176 who attended full-day kindergartens in 6 CPCs without preschool participation. Relative to the preschool comparison group and adjusted for several covariates, children who participated in the preschool intervention for 1 or 2 years had a higher rate of high school completion (49.7 % vs 38.5%; P = .01); more years of completed education (10.6 vs 10.2; P = .03); and lower rates of juvenile arrest (16.9% vs 25.1%; P = .003), violent arrests (9.0% vs 15.3%; P = .002) and school dropout (46.7% vs 55.0%; P = .047). The effects of preschool participation on educational attainment were greater for boys than girls, especially in reducing school dropout rates (P = .03). Relative to less extensive participation, children with extended program participation from preschool through second or third grade also experienced lower rates of grade retention (21.9% vs 32.3%; P = .001) and special education (13.5% vs 20.7%; P = .004). The study concluded that participation in an established early childhood intervention for low-income children was associated with better educational and social outcomes up to 20 years of age. These findings are among the strongest evidence that established programs administered through public schools can promote children's long-term success³².

A study was conducted to determine the prevalence and patterns of co morbidity of disorders among Western Australian mainstream primary school and secondary school aged students. Data as collected by using the Australian Child and Adolescent Screening Inventory which consists of 136 items covering 21 disorders were administered under standardised conditions. Results show that 48% of participants self-reported at least one disorder. Males had greater prevalence rate than that of females, 54% two or more disorders, with mixed receptive-expressive learning disorder being the most co morbid. Significant differences were found according to Gender, Age, and Socioeconomic status³³.

A comparative study was conducted to investigate the gender-specific prevalence of emotional and behavioural problems in children and adolescents in out-of-home childcare with patients in child and adolescent psychiatric institutions in residential child care institutions Oslo, Norway. Data was collected using standardized questionnaires. The Result showed that boys in residential child care had emotional and behavioural problem levels comparable to boys in child and adolescent psychiatric institutions. Girls in residential childcare did not reach problem levels as high as those found in girls in psychiatric institutions. The study concluded that institutionalized childcare clients had a high prevalence of behavioural and emotional problems³⁴.

A study was conducted to find out the prevalence of behavioural problems among 957 school children using Rutter B scale.141 children (14.6%) scored more than 9 points and were included in the second part of the study. An equal number of children in both gender scored less than 9 points served as controls. Both the groups were called for an interview with a child psychiatrist along with their parents. Based on screening instrument results and parental interview, 45.6% of the children were estimated to have behavioral problems, of which 36.5% had significant problems. The study concluded that close co-operation between school teachers, parents and health care providers are essential to ensure healthy development of children 35.

Studies related to knowledge of school teachers regarding juvenile delinquency

An explorative study was conducted to assess the knowledge of children's exposure to family risk factors among teachers. Data was collected from 756 children using the family risk factor checklist. It indicated that teachers had accurate knowledge of children's exposure to factors such as adverse life events and family socioeconomic status, which predicted children's mental health problems at 1 year follow-up. For children at high teacher-rated risk, odds ratios ranged from 3.04 to 7.46 after adjusting for prior mental health problems. Teachers had poor knowledge of internal family functioning such as conflict, parenting practices or parental drug abuse. The findings suggested that asking teachers to report children's exposure to particular family risk factors is a feasible method for identifying children for selective interventions but improved family-school communication may further enhance this process ³⁶.

A study was conducted among 126 elementary school teachers by interviewing them in respect to their concepts of school failure and antisociality. According to their opinions antisociality finds its expression especially in the following behaviour: delinquent or destructive actions against others or the state, deliberate disturbance of social peace, order in a society and criminality. The teachers are aware of the over representation of children from fringe groups and low social classes among antisocial or educationally failing pupils, they do however, not realistically recognize the respective causal relations. By this study researcher concluded that teachers have some knowledge regarding juvenile delinquency.³⁷

Another study was conducted to examine the knowledge of trainee-teachers regarding the definition, incidence, correlates and management of bully or victim problems among school children. Researcher selected 200 trainee teachers from the selected teacher training institution. Findings provided a first examination of the knowledge of trainee-teachers regarding the definition, incidence, correlates, and management of bully/victim problems among school children. Study concluded that in the quest to reduce the impact of bully/victim problems in children, attention should be directed towards the inclusion of this topic in teacher training programmes³⁸.

A study was conducted in Wayne state university. It aimed to examine their perceptions and practices of teachers regarding school bullying prevention activities. The random sampling technique was adopted to select 359 out of 700 i.e. 52.4% teachers were responded. 86.3% teachers had serious talks with both the bully and victim. Less than one-third set aside classroom time to discuss bullying i.e. 31.7% or 31.2% students involved in creating classroom rules against bullying activities. The finding suggests that pre professional and continuing education is needed to identify the victims of bullying and to improve teachers knowledge about effective classroom based bullying prevention activities. Teachers perceived post-bullying activities as the most effective means of reducing bullying problems followed by improved student supervision and by environmental bullying prevention activities³⁹.

Studies related to effectiveness of school interventions in reducing juvenile delinquency

A Study was conducted on juvenile delinquency. Among 123 high-risk African American children. Two participants were from low socioeconomic status and had low IQ scores (between 70 and 85, the range for borderline mental impairment) with no organic deficiencies (i.e., biologically based mental impairment) and were at high risk of failing school. 58 of these 3- and 4-year-old children were assigned to the program group, and 65 children were assigned to a control group. Social responsibility variables include delinquency, marital status, and pregnancy. Scholastic success is determined by a number of factors including graduation rate, grade point average, and postsecondary education whereas socioeconomic status is measured in terms of employment, earnings, and welfare assistance. Cost-benefit is included as an additional outcome because of the long-term savings to society as a result of program success. The result shows that juvenile delinquency was significantly lower for the High/Scope Perry Preschool program group as compared with the control group, including fewer arrests and fewer juvenile court petitions. It also implies 15% of the program group was receiving public assistance, versus 32 percent of the control group⁴⁰.

A two-year follow-up randomized intervention group-control group study was conducted on fortyseven elementary schools among three thousand eight hundred and sixteen children were 9 to 12 years of age. During the first study year, an antibullying school program was implemented in the schools in the intervention group. A questionnaire was used to measure bullying behavior, depression, psychosomatic complaints, delinquent behavior, satisfaction with school life and peer relationships was filled out by the students at 3 times to obtain the following data: a baseline measurement, a first-effect measurement was obtained at the end of the first year, a second-effect measurement was obtained at the end of the second year. By checking the results researcher came to know that the number of bullied children decreased by 25% in the intervention group compared with the control group (relative risk, 0.75; 95% confidence interval, 0.57-0.98). The intervention group also showed a decline in the scale scores of victimization (-1.06 vs 0.28; P< .01) and active bullying behaviours (-0.47 vs 0.12, P< .05). Self-reported peer relationships also improved in the intervention schools (0.48 vs 0.11; P< .05) and there was a trend for a decrease in reported depression in the intervention schools (-0.33 vs -0.10; P< .10). Schools had lowered their anti bullying activities during the second study year. This study concluded that an anti bullying school policy can reduce bullying behavior. To keep bullying at a consistently low level, schools must continue anti bullying measures every year. Continued counselling may help schools in their efforts to establish anti bullying policy

A study was conducted in the elementary school with 598 participants. The main objective is to examine the long-term effects of an universal intervention in elementary schools for promoting positive functioning in school, work and community and preventing mental health problems, risky sexual behaviour, substance misuse and crime at ages 24 and 27 years. The result consists of specific effects included significantly better educational and economic attainment, mental health, and sexual health by 27 years (P < .05). Hypothesized effects on substance use and crime were not found at 24 or 27 years. The study concluded that a universal intervention for urban elementary schoolchildren which focused on classroom management and instruction, children's social competence, and parenting practices, positively affected the mental health, sexual health, educational and economic achievement⁴².

A quasi experimental study was conducted to assess the effectiveness of behavioural modification therapy in coping with adjustmental problems among juvenile delinquents in home and special school. A total of

50 delinquents were selected. On the first day, the level of adjustmental problem was assessed using modified James Watson and Richard ongoing assessment tool of juvenile delinquents. On the last day, the evaluation was done using the same tool. The first objective revealed that among 50 individuals 42(84%) had moderate level of adjustmental problems and 8(16%) had severe level of adjustmental problems on the assessment day. The second objective exposed that after giving behavioural modification therapy the overall mean was 25.98 with standard deviation of 1.37 on the evaluation day. The third objective revealed that there was a significant correlation between the behavioural modification therapies and the demographic variables such as age, type of family, marital status of parents and residence, which shows that the behavioural modification therapy was effective in reducing the level of adjustmental problems among juvenile delinquents⁴³.

A study was conducted to evaluate the effect of an anti-bullying intervention programme. The interventions were implemented by the teachers who attended one year training course, in 48 school Grades 4, 5, and 6 from 16 schools, There were 1,220 children participated in which in 600 girls and 620 boys. The evaluation of the study was based on the degree of implementation of the programme and assessing the programme effects after 12 months of intervention. The report was prepared based on data collected using questionnaire during the study from student about the frequencies of bullies and victims, the extent of observed and experienced bullying student's attitudes related to bullying and their participant role behaviours. Data was also collected from teachers about the concrete actions taken in order to compare the actual content of the intervention. As a result positive impact of the intervention programme was found. The intervention effects were found more often in schools with a high degree of implementation of the programme⁴⁴.

A case study experiment conducted in New Jersey to assess the bullying perceptions of peers in employing a socially preventive bullying intervention. Data were collected using an anonymous online survey in five diverse public middle schools. Rates of change in bullying measures were highest from around 17% to 35% for the school with the highest message recall by students after a one and half year intervention. The study results suggested that a socially preventive intervention may be a promising strategy to reduce bullying among secondary school populations⁴⁵.

A study was conducted on Forty-seven elementary schools in the Netherlands among three thousand eight hundred sixteen children aged 9 to 12 years for two years to evaluate the effect of an antibullying school intervention in elementary schools. By checking the results researchers came to know that the number of bullied children decreased by 25% in the intervention group compared with the control group (relative risk, 0.75; 95% confidence interval, 0.57-0.98). The intervention group also showed a decline in the scale scores of victimization (-1.06 vs 0.28; P< .01) and active bullying behaviours (-0.47 vs 0.12, P< .05). Self-reported peer relationships also improved in the intervention schools (0.48 vs 0.11; P< .05) and there was a trend for a decrease in reported depression in the intervention schools (-0.33 vs -0.10; P< .10). Schools had lowered their antibullying activities during the second study year .The study concluded that an antibullying school policy can reduce bullying behavior 46 .

Studies related to effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among school teachers.

A pre experimental study was conducted to evaluate the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among primary school teachers .Sample consists of 50 primary school teachers, Over all knowledge score revealed that, in pre test 54% of the respondent possessed inadequate knowledge and remaining 46% respondents possessed moderate knowledge, whereas in post test 12% of the respondents possessed moderate knowledge and 88% possessed adequate knowledge. Mean Post test percentage is 84, standard deviation score 5.53 was higher than mean pre test percentage score. The statistical paired t test implies that the difference in the pre test and post test value is found to be statistically highly significant at 5% level with a paired t value of 71. This shows that statistical enhancement in knowledge score indicating the positive impact of planned teaching programme. The current study indicates that primary school teachers had little knowledge regarding juvenile delinquency before the intervention. After the intervention primary school teachers gained knowledge regarding juvenile delinquency⁴⁷.

An experimental study was conducted to assess the effectiveness of structured teaching programme on common behavioural problems of children among primary school teachers. The study design was one group pre test post test and evaluative approach was adopted. The study was conducted among 60 primary school teachers conveniently selected from five primary schools of Vadodara. Non-probability convenience sampling technique was used to select the samples for this study. The tool used for the study was self reportive structured interview questionnaire. The first section consists of six items related to the demographic variables of the primary school teachers and second section consists of thirty items regarding knowledge of primary school teachers regarding

the knowledge on selected common behavioural problems of children. The reliability was established using split half method. The knowledge of primary school teachers regarding selected common behavioural problems of children were assessed before and after the administration of structured teaching programme using frequency, mean, standard deviation and inferential statistics used to analyze Paired't' test and ANOVA. The results of the study shows that in pre test primary school teachers were having average 49.40% knowledge regarding selected common behavioural problems of children and mean score was 14.82±3.372 and in post test average 75.83% knowledge regarding selected common behavioural problems of children and mean score was 22.75±2.80.calculated t value is 33.23 which are more than the tabulated value of 2.00 at 0.05 level of significance. This study concluded that structured teaching program is effective tool to improve the knowledge of primary school teachers regarding Selected Common Behavioural Problems of Children 48.

A quasi experimental study was conducted to evaluate the effectiveness of structured teaching programme on knowledge regarding prevention of juvenile delinquency among primary school teachers in selected schools. Data was collected from 100 primary school teachers. The samples selected on the basis of simple random sampling technique and self administered knowledge questionnaire was used to assess the knowledge of primary school teachers regarding juvenile delinquency. On day one pre test was given to the samples on the same day structured teaching programme was administered. On the eight day post test was given to samples to evaluate the effectiveness of structured teaching programme. The study revealed that structured teaching program was an effective tool to improve the knowledge of primary school teachers regarding prevention of juvenile delinquency.

A quasi experimental study was conducted to assess the effectiveness of information booklet on knowledge of primary school teachers to identify the attention deficit disorder in schools. The data collected from 50 primary school teachers using non probability convenient sampling technique. The self structured questionnaire was prepared to assess the level of knowledge .The study revealed that majority of the teachers were in the age group of 28 to 38 years and also 68% of them were females. Majority 34% of them had teaching experience more than six years. The findings suggested that on pre test 68% of teachers had average score and only 2% had good knowledge. After the intervention 64% teachers had good knowledge in the post test and 2% had poor knowledge. The mean score obtained by the samples in the post test was 16.24. The study reveals that the effective tool was improved the knowledge of primary school teachers regarding the identification of attention deficit disorder in schools⁵⁰.

A descriptive survey was conducted to assess the knowledge of primary school teachers regarding prevention of behavioural problems among children. Self administered questionnaire was prepared to collect data from 50 primary school teachers using purposive sampling technique. The study revealed that majority of the samples were in the age group of 31-40 years, 68% of the samples were females, 82% of the samples were Hindu and 46% of the samples had 10 years experience in the field of teaching. The study also revealed that 78% of the samples had not come across any behavioural problems among children and 22% of them had knowledge on behavioural problems among children .The study suggests that teachers had less knowledge regarding prevention of behavioural problems of children 51.

A quasi experimental study was conducted to evaluate the effectiveness of planned teaching programme among school teachers regarding selected behavioural problems in children. Data was collected from 60 samples using non probability convenient sampling technique. Majority of the teachers were from the middle age group of 26-45 years and 88% of them were females.86% of the samples were married and 53% of the samples had designation as class teachers. The study revealed that 55% of them had previous knowledge and 45% of them had no previous knowledge about behavioural problems among children. After the planned teaching programme 93.3% of samples had good knowledge and p value 0.00 is less than 0.05.Hence it implies that the planned teaching programme was effective in improving the knowledge of teachers regarding behavioural problems of children⁵².

Summary

The researcher did a careful review of the previous studies related to the present study with a view to get insight into the theoretical background to gather ideas. The knowledge secured through the related literature helped the researcher to define the exact problem, develop tool, select the method and also in the correct interpretation of findings. And also reviews have given scientific support to the investigator's attempt to do the present study and since there is a real dearth of evidence from Indian studies and from the present geographical area, the study is highly relevant.

CHAPTER 3

METHODOLOGY

This chapter deals with the description of the research methodology adopted by the investigator to study and analyze the outcome of PTP administered to teacher trainees and steps which are undertaken for collecting and organizing data for investigation. It includes research approach, research design, research setting, population, sample and sampling technique, development and description of tool, procedure and technique of data collection, pilot study and a plan for statistical analysis.

Research approach

The research approach adopted was quantitative approach.

Research design

The research design used for this study is quasi experimental pre test post test control group design. In this study there are two groups of study subjects; a control group and an experimental group and also the researcher done manipulation in the form of planned teaching program which is provided only to the experimental group using appropriate audio visual aids.. Hence the design is a quasi experimental pre test post test control group design.

Symbolic representation of the study

E	01	X O2
C	О3	O4
E	-	Experimental group
C	-	Control group
O1	-	Pre test knowledge score of experimental group
O2	-	Post test knowledge score of experimental group
О3	-	Pre test knowledge score of control group
O4	-	Post test knowledge score of control group
X	-	Planned teaching program

Variables

Variables comprises of the following

Independent Variable: In this study the independent variable is planned teaching programme on juvenile delinquency

Dependent variable: In this study the dependent variable is knowledge of teacher trainees on juvenile delinquency

Demographic variable: Demographic variables of teacher trainees selected for this study were age, gender, religion, place of residence, previous knowledge and source of information

Setting of the study

The study was conducted by the researcher in two selected teacher training institutes of Malappuram District which were Jamiya Nadwiya teacher training institute Edavanna and Mankada Orpahanage teacher training institute, Mankada. Of the two, one was randomly selected to be the setting for experimental and the other for control group. The samples for control group were selected from Mankada Orphanage teacher training institute and the samples for experimental group was taken from Jamiya Nadwiya teacher training institute Edavanna .

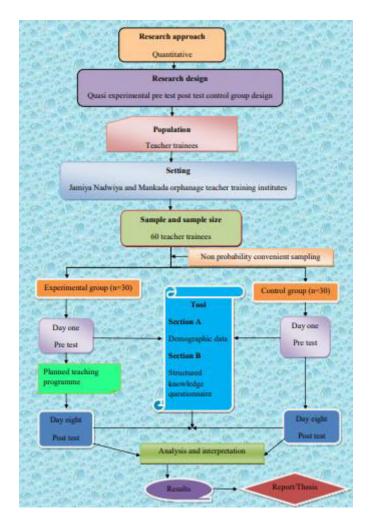


Figure 2: Schematic representation of research design

Population

In this study the population was teacher trainees

Sample and sampling technique

The sample size of the study was 60 teacher trainees of selected teacher training institutes of Malappuram District. Of which 30 teacher trainees were in the experimental group and 30 teacher trainees were in the control group. The sampling technique adopted for this study was non probability convenient sampling technique.

Inclusion Criteria

Teacher trainees who were:

- Studying in selected teacher training institutes
- Available at the time of data collection

Exclusion Criteria

• Who were not willing to participate

Tool

Development / selection of the tool

The tool was developed based on related review of literature (books, journals, reports, and articles, published and unpublished studies), guidance and consultation with subject experts . A structured knowledge questionnaire to assess the knowledge of teacher trainees regarding juvenile delinquency was developed and utilized for the study.

Description of the tool

The tool used in this study was structured knowledge questionnaire includes two sections. They are as follows:

Section A: Structured interview schedule on demographic data

Section B: Self administered structured knowledge questionnaire

Section A: Structured interview schedule on demographic variable

It consists of 6 items includes age, gender, religion, place of residence, previous knowledge and Source of information.

Section B: Self administered structured knowledge questionnaire

A structured knowledge questionnaire consists of 40 multiple choice questions with single correct answer. A score value of 1 was awarded to each correct response and for wrong response and unanswered zero was awarded. The maximum score on knowledge questionnaire was 40. The level of knowledge was categorized based on percentage of scores obtained.

The knowledge score was classified as below,

Scoring key

Scores	level of knowledge
0 - 15	Inadequate
16 - 30	Moderately adequate
31 and above	Adequate

Content validity of the tool

Content validity refers the degrees to which the items an instrument adequately represent in the universe of content for the concept being measured. To ensure content validity the tool was submitted. 6 experts in the field of Community Health Nursing, 1 from Mental Health Nursing, and 2 Paediatrician. At first criteria checklist was developed. The ratings were relevant, need modification, not relevant, suggestions if not relevant. Tool was modified as per the suggestion of experts and the final tool was constructed and pre tested. There were 45 items were developed. 100% agreement for 36 items, the 4 items were modified as per the suggestions given by experts,5 items were disagreed and deleted after the suggestions of experts and final tool was constructed.

Reliability of the tool

Reliability of research tool is defined as the extent to which the instrument yields the same results on repeated measures. The reliability of structured knowledge questionnaire was established by test retest method. It is a measure of internal consistency that is how closely related a set of items are as a group. The reliability score obtained was r=0.83 Hence the tool was found to be reliable for the study.

Pilot study

A pilot study is referred to a small scale preliminary tryout of the method to be used in an actually large study. Pilot study was done among in teacher training students in Fazfari teacher training institute and Sullamussalam teacher training institute Malappuram from 24th February 2015 to 3rd March 2015.Formal approval from institutional ethical committee and administrative sanction from authorities of selected teacher training institutions were obtained. The researcher selected six samples from Fazfari teacher training institute for the experimental group and six samples from Sullamussalam teacher training institute for the control group who fulfilled the inclusion criteria. The researcher used non-probability convenient sampling technique to select the samples. An informed consent was obtained from the samples after a brief self introduction of the researcher. A

pretest was conducted using structured knowledge questionnaire. The planned teaching program was implemented using appropriate AVaids for 45 minutes for the experimental group. On eighth day, post test was done for both experimental and control group using the same questionnaire. The pilot study revealed the appropriateness of methodology, comprehensibility of the tool and practicability of intervention. The data collected was found to be amenable to statistical analysis. Hence considering the feasibility and practicability of the study, there were no modification, the investigator proceeded with the main study.

Data collection process

The formal permission for data collection was obtained from Principal, Al- Shifa College of nursing, Principal of Jamia Nadwiya Edavanna teacher training institute and Mankada Orphanage teacher training institute. The researcher conducted the main study from 4th March to 24th March 2015. The sample of 60 teacher trainees were selected 30 samples for the control group and 30 samples for the experimental group were selected on the basis of inclusion criteria using non probability convenient sampling technique. An informed consent was obtained from the samples prior to the study. The researcher introduced herself and developed rapport with the samples. The researcher explained the purpose of the study and reassured that the data collected would be kept confidential. Pre test was conducted for both experimental and control group using structured knowledge questionnaire which took around 40 mts. On the same day planned teaching programme was given to the experimental group using AV aids for the duration of 45 mts. On the eight day the post test was done for both the groups using the same tool.

Plan for data analysis

The data obtained were analyzed on the basis of the objectives of the study using descriptive and inferential statistics. The plan of the data analysis was developed under the excellent direction of the experts in the field of nursing and statistics. The plan of data analysis was as follows.

Descriptive statistics

Frequency and percentage distribution were used to study the demographic variables such as age, gender, religion, place of residence, source of information and previous knowledge. Mean and standard deviation were used to determine the pre test and post test knowledge score.

Inferential statistics

Paired't' test and independent 't' test was used to find out the differences in the scores of knowledge between pre test and post test and to determine the effectiveness of structured teaching programme on knowledge regarding juvenile delinquency. Chi-square test was used to find out the association of knowledge with selected demographic variables. The findings of the study were presented in the form of tables and figures.

Ethical consideration

The study was approved by the institutional ethical committee. Administrative sanction for conducting study was obtained from Jamiya Nadwiya teacher training institute for selection of experimental group and Mankada Orphanage teacher training institutes for control group. Formal permission was obtained from the samples prior to the data collection. The samples were informed that participation was voluntary and they had freedom to withdraw from the study. Confidentiality was maintained. No ethical issues were aroused during the course of the study.

CHAPTER 4

ANALYSIS AND INTERPRETATION

Introduction

An analysis is a process of organizing and synthesizing data in such a way that research questions can be answered and hypothesis can be tested. This chapter deals with the tabulation, analysis and interpretation of data collected from 60 teacher trainees done with the help of SPSS package version 20. The level of significance is set at 0.05 in this study.

Objectives of the study:

- 1. Assess the pre test and post test knowledge of teacher trainees regarding juvenile delinquency in the experimental and control group
- 2. Assess the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees.
- 3. Determine the association between pre-test knowledge score and selected demographic variables.

The findings of the study are presented in the following sections

Section I: Distribution of demographic variables of samples

Section II : Assessment of knowledge of teacher trainees regarding juvenile delinquency.

Section III : Assessment of effectiveness of planned teaching program on knowledge regarding juvenile delinquency among teacher trainees.

Section IV : Association of pre-test knowledge score of teacher trainees with selected demographic variables.

Section I: Distribution of demographic variables of samples

This section deals with the analysis of demographic variables of samples in the experimental and control group.

Table 1: Frequency and Percentage distribution of teacher trainees based on their age and gender

(n=60)

Demographic variables	Experimental group		Control group	
	F	%	f	%
Age in years				
17- 19	17	56.07	22	73.03
20- 22	5	16.06	6	20
> 23	8	26.07	2	6.07
Gender				
Male	0	0.0	4	13.03
Female	30	100	26	86.07

Table 1 reveals that majority of samples in the experimental group 17~(56.07%) and control group 22~(73.03%) were in the age group of 16-18 years .Remaining five (16.07%) samples in the experimental group and six (20%) samples in the control group were in the age group of 19-21 years . Eight (26.07%) samples in the experimental group and two (6.07%) samples in the control group were in the age group of greater than 22 years. It also reveals that in the experimental group majority of samples 30~(100%) and in the control group 26~(86.07%) were females and remaining four (13.03%) were males.

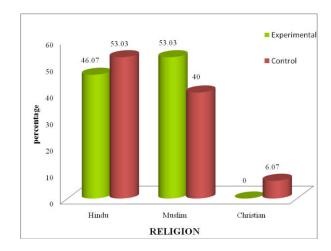


Figure 3: Percentage distribution of samples based on religion

Figure 3 shows out of 60 samples 16 (53.03%) in the experimental group were Muslim and 16 (53.03%) in the control group were Hindu. Remaining 14 (46.07%) in the experimental group were Hindu and 12 (40%) were Muslim. None of the samples were in the experimental group and two (6.07%) in the control group were Christian.

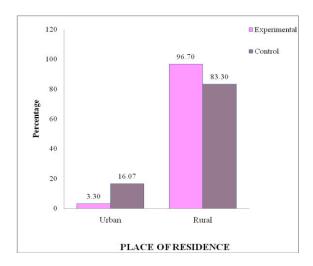


Figure 4: Percentage distribution of samples based on residence

Figure 4 depicts that out of 60 samples in the experimental group 29 (96.07%) and control group 25 (83.03%) were residing in rural area and remaining one (3.30%) of experimental group and five (16.70%) were residing in urban area.

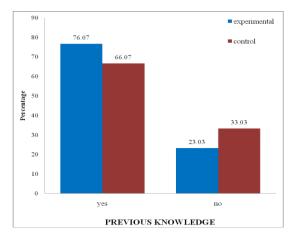


Figure 5: Percentage distribution of samples based on previous knowledge

Figure 5 shows that out of 60 samples majority 23 (76.07%) of experimental group and 20 (66.07%) of control group had previous knowledge regarding juvenile delinquency and remaining seven (23.03%) of experimental group and 10 (33.30%) of control group did not have any previous knowledge regarding juvenile delinquency.

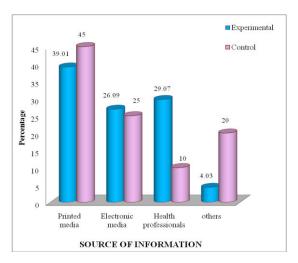


Figure 6: Percentage distribution of samples based on source of information

Figure 6 depicts that nine (39.01%) 0f samples in the experimental group and 11 (45%) of samples in the control group received information from printed media.

Section II: Assessment of knowledge of teacher trainees regarding juvenile delinquency

This section deals with the distribution of samples in the experimental and control group based on level of knowledge.

Table 2: Frequency and percentage distribution of samples in the experimental and control group based on pre test level of knowledge.(n=60)

Lavel of knowledge	Experim	ental group	Contr	ol group
Level of knowledge	\mathbf{f}	%	f	%
Inadequate	5	16.07	5	16.07
Moderately adequate	25	83.03	25	83.03
Adequate	0	0	0	0

Table 2 shows pre test knowledge score of experimental and control group. Among samples both experimental group and control group 25 (83.03%) samples had moderately adequate knowledge, five (16.07%) had inadequate and none of the samples had adequate knowledge.

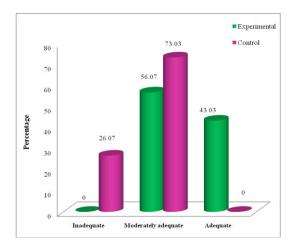


Figure 7: Distribution of samples in the experimental and control group based on post test knowledge.

Figure 7 depicts that in post test none of the study samples of experimental group and (26.07 %) of control group had inadequate knowledge on juvenile delinquency. It also shows that (43.03%) of experimental group and none of the control group had adequate knowledge.

Section III: Assessment of effectiveness of planned teaching program on knowledge of teacher trainees regarding juvenile delinquency.

In order to find out the differences in the knowledge scores between the experimental group and control group the data is analyzed using independent 't'test and the findings are presented below.

Table 3: Significance of difference in the mean pre test knowledge scores of experimental and control group (n=60)

Group	N	Mean	S.D	t value	P value	95% confidence interval for difference in mean
Experimental	30	18.73	3.30	0.17	0.00	(17.55- 19.91)
Control	30	18.57	4.21	0.17	0.09	(17.06-20.08)

Table 3 depicts that the mean pre test knowledge score (18.73 ± 3.30) of experimental group was not significantly different than control group (18.57 ± 4.21) and calculated paired t value (0.17) was statistically not significant at 0.05 level with a p value 0.09 (t $_{(58)}$ = 1.670, p>0.05, CI-17.55-19.91, 17.06-20.08). Hence this implies that the two groups were equivalent with respect to knowledge regarding juvenile delinquency before the intervention.

Table 4: Significance of difference in the mean post test knowledge scores of experimental and control group.

In order to assess the significance of difference between the post test knowledge scores of teacher trainees in the experimental and control group, the data is analyzed using independent sample 't' test and the findings are presented in the table. (n=60)

Group	N	Mean	S.D	t value	P value	95% confidence interval for difference in mean
Experimental Group	30	29.77	3.70	8.47	**0.0001	(28.45 - 31.09)
Control Group	30	19.67	5.38	0.47	***0.0001	(17.44-21.6)

^{**}Significance at 0.05 level

Table 4 depicts that the mean post test knowledge score (29.77 ± 3.70) of experimental group was significantly different than control group (19.67 ± 5.38) and calculated paired t value (8.47) was statistically significant at 0.05 level with a p value 0.0001. (t $_{(58)}$ =1.67 ,p<0.05,C.I 28.45- 31.09, 17.44- 21.6). Hence it is evident that planned teaching programme is effective in improving the knowledge of teacher trainees regarding juvenile delinquency.

Table 5: Significance of difference in the mean pre test and mean post test knowledge scores of experimental group

In order to assess the significance of difference in mean pre test and post test knowledge scores of teacher trainees the data is verified using paired t test and the findings were presented below. (n=30)

Test	Mean	S.D	Paired t value	P value	95% confidence interval for difference in mean
Pre test	18.73	3.30	12.15	**0.0001	(17.55- 19.91)
Post test	29.77	3.70	14.13		(28.45 - 31.09)

^{**}Significance at 0.05 level

Table5 depicts that the mean post test knowledge score (29.77 \pm 3.70) was significantly higher than their mean pre test knowledge score (18.73 \pm 3.30) of experimental group and calculated paired t value (12.15) was statistically highly significant at 0.05 level with a p value 0.0001. t $_{(29)=}2.05$, p<0.05, C.I (17.55-19.91,

28.45-31.09). Hence it is evident that the planned teaching programme is effective to improving the knowledge of teacher trainees regarding juvenile delinquency.

Table 6: Significance of difference in the mean pre test and mean post test knowledge scores of control group (n=30)

Test	Mean	S.D	Paired t value	P value	95% confidence interval for difference in mean
Pre test	18.57	4.21	0.76	0.46	(17.06 - 20.08)
Post test	19.67	5.38	0.76	0.46	(17.74 - 21.6)

Table 6 depicts that the mean post test knowledge score (19.97 \pm 5.38) was not significantly higher than mean pre test knowledge score (18.57 \pm 4.21) of control group ,and calculated paired t value (0.76) was statistically not significant at 0.05 level with a p value 0.46 ($t_{(29)}$ = 2.05,p>0.05, C.I 17.06- 20.08, 17.74-21.6).Hence it is evident that no significant difference in the mean pre test and post test knowledge score of control group.

Section IV: Association of pre test knowledge score of teacher trainees with selected demographic variables

This section deals with the association of pre test knowledge score of teacher trainees with selected demographic variables

Table 7: Association of knowledge score of samples with their age and gender (n=60)

Table 7 shows the association of pre test knowledge scores of samples with their age and gender. Regarding age the chi square value 0.38 with p value 0.08 was not significant at 0.05 level. This inferred that there was no significant association between knowledge regarding juvenile delinquency and their age. Regarding gender the chi square value 0.86 with a p value 0.36 was not significant at 0.05 level .This inferred that there was no significant association between knowledge regarding juvenile delinquency and gender.

Variables		Knowledge score	es			
	Inadequate	Moderately adequate	Adequate	chi square	d f	p value
Age in years		-				
16 - 18	7	32	0			
19 - 21	2	9	0	0.39	2	0.80
22 and above	1	9	0			
Gender						
Male	0	4	0	0.06	1	0.26
Female	10	46	0	0.86	1	0.36

Table 8: Association of knowledge score of teacher trainees with religion and the place of residence (n=60)

	ŀ	Knowledge scores	3			
Variables	Inadequate	Moderately adequate	Adequate	chi square	d f	p value
Religion						
Hindu	5	25	0			
Muslim	5	23	0	0.43	2	0.81
Christian	0	2	0			
Place of						
residence						
Urban	1	5	0	0	1	1
Rural	9	45	0	0	1	1

Table 8 shows that association of pre test knowledge scores of samples regarding juvenile delinquency with religion and place of residence. Regarding religion the chi square value 0.43 with a p value 0.81 was not significant at 0.05 level. Hence it inferred that there was no significant association between knowledge regarding juvenile delinquency and religion .Regarding place of residence of the samples, the chi square value 0

with a p value 1 was not significant at 0.05 level. Hence it inferred that there was no significant association between knowledge and place of residence of the samples.

Table 9: Association of knowledge score of teacher trainees with previous knowledge and source of information (n=60)

Variables	K Inadequate	nowledge scores Moderately adequate	Adequate	chi square	d f	p value
Previous knowledge						
Yes	8	35	0	0.41	1	0.52
No	2	15	0			
Source of						
information						
Printed media	3	15	0	1.89	3	0.59
Electronic media	2	9	0			
Health professionals	1	8	0			
Others	2	3	0			

Table 9 shows that association of pre test knowledge scores of samples regarding juvenile delinquency with previous knowledge and source of information. Regarding previous knowledge the chi square value 0.41 with a p value 0.52 was not significant at 0.05 level. Hence it inferred that there was no significant association between knowledge regarding juvenile delinquency and previous knowledge. Regarding source of information the samples, the chi square value 1.89 with a p value 0.59 was not significant at 0.05 level. Hence it inferred that there was no significant association between knowledge and source of information the samples.

Hypothesis formulated for the study were

- H₁ There is a significant difference between mean pre-test and mean post test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental group.
- H₂: There is a significant difference between mean post-test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental and control group.
- H₃ There is a significant association between pre test knowledge scores of teacher trainees regarding juvenile delinquency and selected demographic variables.

Hypothesis testing

In order to evaluate the effectiveness of planned teaching programe in terms of knowledge, the following null hypotheses were formulated.

 H_{01} There is no significant difference between mean pre-test and mean post-test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental group.

The analysis revealed that the mean post test knowledge score (29.77) of teacher trainees in the experimental group is significantly greater than their mean pre test knowledge score (18.73) of experimental group $t_{(29)}=2.05$, p<0.05). Therefore the null hypothesis H_{01} is rejected and the research hypothesis H_{1} is accepted. Hence it is evident that the planned teaching programme is effective in improving the knowledge of teacher trainees regarding juvenile delinquency .

 H_{02} : There is no significant difference between the mean post-test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental and control group

The analysis revealed that the mean post test knowledge score of teacher trainees in the experimental group (29.77) is significantly greater than the mean post test knowledge score (19.67) of control group t(58)=1.67, p<0.05). Therefore the null hypothesis H_{02} rejected and the research hypothesis H_2 accepted. Hence it is evident that the planned teaching programme is effective in improving the knowledge of teacher trainees regarding juvenile delinquency .

 H_{o3} : There is no significant association between pre test knowledge scores of teacher trainees regarding juvenile delinquency and selected demographic variables

The results shows that there is no significant association between pretest knowledge scores and any of the demographic variables such as age, gender, religion, residence, previous knowledge and source of information. Hence the null hypothesis H_{03} is accepted and the research hypothesis H_3 is rejected.

CHAPTER 5

RESULTS

Objectives

- 1. Assess the pre test and post test knowledge of teacher trainees regarding juvenile delinquency in the experimental and control group
- 2. Assess the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees.
- 3. Determine the association between pre-test knowledge score and selected demographic variables.

Hypothesis

- 1. H_{1:} There is a significant difference between mean pre-test and mean post-test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental group.
- 2. H₂: There is a significant difference between mean post-test knowledge scores of teacher trainees regarding juvenile delinquency in the experimental and control group.
- 3. H₃: There is a significant association between pre test knowledge scores of teacher trainees regarding juvenile delinquency and selected demographic variables.

Results

The present study was intended to assess the effectiveness of PTP on knowledge regarding juvenile delinquency among teacher trainees for the above objectives, the results are presented in 4 sections:

Section I: Distribution of demographic characteristics of samples

Section II: Assessment of level of knowledge regarding juvenile delinquency among teacher trainees.

Section III: Assessment of effectiveness of planned teaching program on knowledge regarding juvenile delinquency among teacher trainees.

Section IV: Association of pre test knowledge scores of teacher trainees with selected demographic variables.

Section I: Distribution of demographic characteristics of samples

The characteristics of the study population were as follows:

- Majority of the samples in the experimental group 17 (56.70%) and control group 22 (73.3%) were in the age group of 16-18 years.
- Regarding gender 30 (100%) of samples in the experimental group were females and 26 (86.70%) of samples in the control group were females.
- Majority of samples in the experimental group 16 (53.30%) were Muslims and control group 16 (53.30%) were Hindus.
- Majority of samples in the experimental group 29 (96.70%) and control group 25 (83.30%) were residing in rural area.
- 23 (76.70%) of experimental group and 20 (66.70%) of control group had previous knowledge regarding juvenile delinquency.
- Most of the samples in the experimental 9 (39.01%) and control group 11 (45%) had knowledge regarding juvenile delinquency acquired through printed media.

Section II: Assessment of level of knowledge regarding juvenile delinquency among teacher trainees.

among samples both experimental group and control group 25 (83.03%) samples had moderately adequate knowledge, 5 (16.07%) had inadequate and none of the samples had adequate knowledge

Section III: Assessment of effectiveness of planned teaching program on knowledge regarding juvenile delinquency among teacher trainees.

The mean post test knowledge score (29.77) of teacher trainees in the experimental group is significantly greater than their mean pre test knowledge score (18.73), $t(_{29})=2.05$, p<0.05). The mean post test knowledge score of teacher trainees in the experimental group (29.77) is significantly greater than the mean post test knowledge score of control group (19.67), t(58)=1.67, p<0.05). Hence it is evident that the

planned teaching programme is effective in improving the knowledge regarding juvenile delinquency among teacher trainees.

Section IV: Association of pre test knowledge scores of teacher trainees with selected demographic variables

Study revealed that there was no significant association between pre test knowledge score and demographic variables like age, gender, religion, place of residence, previous knowledge and source of information.

CHAPTER 6

DISCUSSION, SUMMARY AND CONCLUSION

This chapter includes discussion, summary, conclusion, nursing implication, limitation and recommendation.

Discussion

The present study evaluated the effectiveness of planned teaching program on knowledge regarding juvenile delinquency and found that the planned teaching program was effective in improving the knowledge of teacher trainees.

Effectiveness of planned teaching programme on knowledge of teacher trainees regarding juvenile delinquency.

The present study findings revealed that the mean pre test and post test knowledge scores of experimental group were 18.73 and 29.77 respectively. The obtained t value is 12.15 and p value is 0.0001. So it is significant at 0.05 level. The mean pre test and post test knowledge scores of teacher trainees in the control group were 18.57 and 19.67 respectively. The obtained paired t value is 0.76 and p value is 0.46 and it is not significant. This shows that teacher trainees in the experimental group gained knowledge after the administration of planned teaching programme.

The present study was supported by the study conducted on effectiveness of structured teaching programme on knowledge regarding juvenile delinquency among primary school teachers. The objective of the study was to improve the knowledge of the teachers regarding juvenile delinquency. The result of the study shows on post test 12% of the respondents possessed moderate knowledge and 88% possessed adequate knowledge, post test mean percentage is 84, standard deviation score 5.53 was higher than pre test mean percentage score. The statistical paired t test implies that the difference in the pre test and post test value is found to be statistically highly significant at 5% level with a paired t test value of 71. It shows a statistical enhancement in knowledge score indicating the positive impact of planned teaching programme. The current study indicates that samples were having little knowledge of juvenile delinquency before the intervention. After the intervention they gained knowledge about juvenile delinquency.

Association between pretest knowledge scores of teacher trainees and with selected demographic variables

The demographic variables selected in this study were age, gender, religion, place of residence, previous knowledge and source of information. This study reveals that there is no significant association between pretest knowledge and selected demographic variables.

The findings matches with a quasi experimental study to evaluate the effectiveness of planned teaching programme among school teachers regarding selected behavioural problems in children. Data collected from 60 samples using non probability convenient sampling technique. Majority of the teachers were from the middle age group of 26-45 years and 88% of them were females.86 of the samples were married and 53% of the samples had designation as class teachers. The study revealed that 55% of the samples had previous knowledge and 45% of had no previous knowledge about behavioural problems among children. After the planned teaching programme 93.3% had good knowledge and p value 0.00 is less than 0.05. It shows that there is no association between the knowledge scores and demographic variables. So it also suggested that improvement were achieved by educating the primary school teachers regarding behavioural problems.

Summary

In the present study the researcher investigated the effectiveness of planned teaching programme on knowledge regarding juvenile delinquency among teacher trainees. The researcher found that there was a significant increase in the level of knowledge after planned teaching programme and none of the demographic variables had no association with present level of knowledge of teacher trainees.

Conclusion

The following conclusion were made based on the findings of the study

• None of the teacher trainees had adequate knowledge regarding juvenile delinquency before planned teaching programme both the experimental and control group.

- Planned teaching programme was an effective method to increase the knowledge of teacher trainees regarding juvenile delinquency.
- The level of knowledge of teacher trainees regarding juvenile delinquency was not influenced by age, gender, religion, place of residence, previous knowledge and source of information.

Nursing implications

The investigator has drawn the following implications from the study which is of vital concern to the field of nursing practice, nursing education, nursing administration and nursing research.

1. Nursing practice

- Nurses are the key persons, who play a major role in meeting the needs of the juvenile population
- Nurses as health care provider can create awareness among family members about the role of family in reducing the incidence of juvenile delinquency among children.
- Nurses can utilize the findings of the study to conduct an appropriate education programme to children
- Nurses can conduct home visit during prenatal and early childhood which helps to identify high risk families and to reduce serious anti social behavior.
- School health nurse can provide advance safe school environment by promotion, prevalence and reduction of school violence.
- School health nurses collaborate with school personnel and provide health care services.
- Nurses especially community health nurses can perform a major role in organizing mass education programme to the teacher trainees on early identification of the risk child.
- The findings of the study will help teacher trainees to enlighten the knowledge on the importance of reducing juvenile delinquency among school children.
- Encourage student nurses to participate actively on health awareness in the school health campaign.

2. Nursing education

- Nursing curriculum should give due emphasis on current new intervention for behavioural problems of children and it should be included in community health nursing and paediatric nursing.
- The responsible authorities at every level make effort to strengthen juvenile delinquency programme.
- The findings will help the nurse educators to update their knowledge and improve their teaching to public.
- In collaboration with regulatory bodies educational institution can arrange and conduct workshops on integral management and prevention of juvenile delinquency.
- Nursing curriculum should be broad enough to equip the student nurses to care for children with juvenile delinquency.

3. Nursing administration

- Nursing administrators have to plan and organize inservice training programme for nurses on juvenile delinquency
 - Nurse administrators can plan for policies and educational programmes for making the community aware about juvenile delinquency through camp and workshop.
- Necessary administrative support has to be provided to conduct workshop in school campus with appropriate Av aids, role play and puppet show.

4. Nursing research

- The findings of the present study are helpful for the nursing professionals and nursing students to conduct further studies.
- Studies can be undertaken to develop prgrammes that promotes the awareness regarding juvenile delinquency.
- The study motivates other investigators to conduct studies regarding the prevalence of juvenile delinquency and related factors.

Limitations

- The study was limited to only two institutes from where the trainees were selected hence the possibility for wider generalization was limited.
- A standardized tool was not available, hence the researcher constructed a tool for the purpose of the study
- An application of the study finding was limited due to small sample size.

• Non probability convenient sampling limits the generalizability with research findings.

Recommendations

- A similar study can be replicated in a large sample to generalize the study findings.
- Extensive research studies can be done to assess the prevalence of juvenile delinquency among children.
- A study can be done on the effectiveness of school interventions in the management of juvenile delinquency.
- A descriptive study can be done to identify the risk factors and causes of juvenile delinquency among children.
- An intervention study can be done on prevention of juvenile delinquency among school children.
- The study can be replicated in different settings.
- A comparative study can be done on occurrence of juvenile delinquency among urban and rural children.

REFERENCES

- 1. Available from [internet] http://www.communityed.c a/docs/booklists/beh avio ur_problems.pdf.
- 2. Kavitha Sahmey. Factors underlying juvenile delinquency and positive youth development programs. [internet]2013;[cited 2013,dec 20]; p 2.Available from : http://www.ethesis.nitrkl.ac.in /4634.
- 3. Braden berg N, Friedman R. The epidemiology of childhood psychiatric disorders: Prevalence findings from recent studies, Journal of American Academy of Child and Adolescent Psychiatry [internet] 1990 Jan [cited 2008 Oct 14]; 29 (76). Available from: http://www.ncib.nlm.nih.gov/sites/enter/pubmed.
- 4. Rakesh Sharma, Rakesh Raj. Creativity among delinquent children at secondary level in Meerut. Available from http://www. Ijsrp.org/research-paper-1012/ijsrp- p 1050.
- 5. Daphne Philip (P hd), Department of behavioral science, the political economy of school violence trainidad.11th edition 245-47.
- 6. Graham, J. & Bowling, B. Young People and Crime, Home Office Research Study No. 145, London: Home Office. 1995; P.35-46.
- 7. Preservative articles [internet] May 28,2012; Available from
- 8. : http/www.preservstive articles.com/.../what –is meaning-of juvenile delinquency
- 9. V. Joshi. Juvenile justice in India. [internet] 2013; Available from: shodhganga.inflibnet.ac.in/bitstream/10603/7809/9109chapter%.202.
- 10. Reiter, Madeline. School Achievement and Juvenile Delinquency: Available from:http://www.eric.ed.gov
- 11. Gali.W. Stuart: principles and practice of psychiatric nursing, 9th edition, Mosby Elsevier publishers, p 667-679
- 12. R. Weissbourd. School climate and moral, social development.[internet] 2013 Feb 8. Available from: http//www. School climate.org/publications/documents/sc-brief-moral-social.
- 13. Report on bureau of police research and development New Delhi. Available from http://www.bprd.nic.in
- 14. Report on National Crime Record Bureau. Available from: http//two. cicles.net/ 2008 dec22/crime_juveniles_rise_india.
- 15. P.O. Omaji. School and Juvenile crime prevention. Australian publication, 1976, p256.
- National Crime Record Bureau. Available from: http// www.ncrb.nic.in.edH2 013/compendium%202013.
- 17. Research bulletin .National institute of public cooperation and child development New Delhi. Vol xv,issue 2,April 2011.
- 18. Dilazbog daily news and analysis. Available from : http://www.dnandia.com/authors/dilnaz-boga.page 2
- 19. Report on juvenile crimes in India.[internet] April 20,2013; Available from: http//www. www.dnaindia.com > News > India.
- 20. Juvenile Justice Act .Department of social welfare. Available from:http// www.old. keralagovt .in/deptsocialwelfare/jj.htm.
- 21. Erich shaps. Centre for collaborative class room. The role of school environments in promoting academic success. [internet] Available from: https://www.collaborativeclassroom.org/research-articles-and-papers.
- 22. Cristian Crisan. Juvenile delinquency an antisocial phenomenon. Available from : http://www.juridicaljournal..univagora.
- 23. Voisin DR, Salazar LF, Crosby R, Diclemente RJ, Yarber WL, Staples-Horne M. Teacher connectedness and health-related outcomes among detained adolescents. J Adolesc Health. 2005 Oct; 37(4):337. [Internet]. Available from: http://www.ncbi.nlm.nih.gov/pubmed/16182147.
- 24. Ludwig Von Bertalanaffy-General system theory [internet] may 24 2004[cited on April 2 2013] available from: http://www.nwlink.com/donclark/history-isd/bertal anffy.html.
- 25. Mohamed Reza Irvani, Samaneh Salimi. A social work study on family issues influencing juvenile delinquency. Management science letters 3 (2013) p: 2085-2088. [Internet] available from:www.GrowingScience.com/msl.
- 26. Nidhi prajavadhi. A case study on Juvenile delinquency among coaching students. European Academic Research Vol. II. Issue 10/January 2015.[internet] available from: www.euacademic.org.
- 27. Sajad Alboukordi, Ali Mohammed Nazari. Predictive factors for juvenile delinquency the role of family structure, International journal of criminology and sociological theory, Vol. 5, No.1, June 2012, p.770-777.
- 28. Available from : http// www.wikipedia.org/wiki/Juvenile_delinquency
- 29. Mayzer R, Fitzgerald HE, Zucker RA. Anticipating problem drinking risk from preschoolers' antisocial behavior: evidence for a common delinquency-related diathesis model. J Am Acad Child Adolesc Psychiatry. 2009 Aug; V (8), P820-7. 30. Available from: http://www.iactp.org/
- 30. Kishanth Olive, Sheeba. A study on effectiveness of behavioural modification therapy . International Journal of Nursing education Vol 6.No.2014, p 36-42.

- 31. Arthur J. Reynolds. A study on long term effects of an early childhood intervention educational achievement and juvenile arrest. The journal of American medical Association. May 9,2001, Vol 285, No. 18
- 32. Krupa Hire Math, Saraswati Hunshal and V. Gaonkar: Behavioral Problems among Early Adolescents, Department of Human Development, College of Rural Home Science, University of Agricultural Sciences, Dharwad 580 005, India (Received: February, 2008).
- 33. Kjelsberg E, Nygren P: The prevalence of emotional and behavioural problems in institutionalized childcare clients, Centre for Research and Education in Forensic Psychiatry, Ulleval Univ Hospital Gaustad, NO-0320 Oslo, Norway. ellen.kjelsberg@kompetanse-senteret.n.
- 34. Gupta I ."Prevalence of behavioral problems in school going children". Ludhiana, India. Indian pediatric 2001 Apr. 68(4): 323
- 35. Sarah B.D and J.M. Nicholson. Teachers' knowledge of children's exposure to family risk factors: accuracy and usefulness. Journal of School Psychology [Internet] Jan 2005 [cited on 15 Nov 2009]; 43(1): 23-38. Available from: http://www.eric.ed.gov.
- 36. Funke EH, Heinold V. Antisociality and school failure as judged by elementary school teachers. Int J Rehabil Res. 1979; 2(2):193-214. [internet]. Available from: URL: http://www.ncbi.nlm.nih.gov/pubmed/8151504
- 37. Cummins Pauline, Mc Guckin Conor, Lewis Christopher Alan. Trainee teacher's knowledge and attitudes to bully/victim problems in school. Northern Ireland Branch Annual Conference. Ireland. Apr 2009.
- 38. J.A. Dake. J.H. Price. S.K. Telljohann. Teacher perceptions and practices regarding school bullying prevention. 2010 Mar; 25(1):73-84.
- 39. Williamson, Juvenile Delinquency Prevention, British medical journal, 2000, 21(6):27
- 40. Fekkes M, Pijpers FI, Verloove-Vanhorick SP. Effects of antibullying school Programme on bullying and health complaints. Archives of paediatrics & adolescent medicine.2006 Jun; 160(6):638-44. [Internet]. Available from: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/819/CN-00556819/frame.html
- 41. Hawkins JD, Kosterman R, Catalano RF, Hill KG, Abbott RD.Effects of social development intervention in childhood 15 years later. Arch Pediatr Adolesc Med. 2008 Dec; 162(12):1133-41. [Internet]. Available from: http://www.ncbi.nlm.nih.gov/pubmed/19047540
- 42. Hawkins, J.D. and T. Lam (1983). Teacher Practices, Social Development, and Delinquency, Prevention of Delinquent Behaviour. Beverly Hills, Ca: Sage Publications, pg.241-274. [Online]. Available from: URL: http://www.cdcr.ca.gov/Reports Research/bib desc.html
- 43. C. Salmivalli, A. Kaukiainen. Anti-bullying intervention: implementation and outcome. Turku, Finland. 2008 Aug; 46(4):431-53
- 44. Perkins H. Wesley, Craig David W., Perkins Jessica M. Using social norms to reduce bullying: a research intervention among adolescents in five middle schools. April 2011.
- 45. Fekkes M, Pijpers FI, Verloove-Vanhorick SP.Effects of antibullying school Programme on bullying and health complaints. Archives of paediatrics & adolescent medicine.2006 Jun; 160(6):638-44. [Internet]. Available from: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/819/CN-00556819/frame.html
- 46. Nightingale nursing times. Journal publications, vol 12 (April 2014) p: 19-20
- 47. Sandeep Garg, Arpan Pandya. Effectiveness of structured teaching programme on selected behavioural problems of children, IOSR. Journal of Nursing and Health Science Vol 3, [Nov-Dec.2014] available from:www.iosrjournals.org.
- 48. Nightingale nursing times. Journal publications ,vol 9 (Jan 2014) p: 13-15. www.nursingtimes.net/publication-index/
- 49. Nightingale nursing times. Journal publications ,vol 7 (Nov 2013) p: 15-16. www.nursingtimes.net/publication-index/
- 50. Nightingale nursing times. Journal publications ,vol 11 (March 2014) p: 20-21. www.nursingtimes.net/publication-index/www.nursingtimes.net/publication-index/
- 51. Nightingale nursing times. Journal publications, vol 6 (Oct 2013) p: 7-9. www.nursingtimes.net/publication-index/