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ATTITUDE OF JUVENILE OFFENDERS TOWARDS REHABILITATION AND ITS SELECTED INDIVIDUAL DETERMINANTS

The resident's level and especially the **form** of conformism to formal role models (authorities) in a reformatory constitute the main marker of receptivity to the rehabilitation actions. If the forms of conformism distinguished by Aronson (1978, pp. 57-59). are transferred to a rehabilitation case, the following sequence can be developed: non-conformism (rejection of behavioural instructions) – submissiveness (subordination for the sake of one's own comfort – to avoid punishment or to gain benefits) – identification (subordination for the sake of rewarding aspects of a good contact with a tutor or imitating him or her) – internalisation (subordination resulting from the acceptance of arguments, referencing to values shared with the tutor). Identification constitutes a key term in such a case. Identification means the first stage of exceeding personal norms in the regulation of one's behaviour. It constitutes also the starting point for internalisation (we adopt the values of those people with whom we identify and whose acceptance provides us with an internal reward).

Certainly, the tutor is not the only target of identification for his or her charges in the reformatory. An informal group of charges constitutes a powerful source of influence (A. Szecówka 1998, vol. 20/21; M. Kosewski 1985). Unfortunately, in such a case, we face an accumulation of various pathological attitudes and behavioural models providing an individual with the comparative reference. Most often the group provides an individual with goals being contrary to the idea of rehabilitation. By stigmatising rehabilitation as the evil worst of all, such a group generates negative behavioural norms – the second life and a subculture enforces norms which are obviously contradictory to the values of the rehabilitation training, rehabilitation itself, and individuals both rehabilitating and subordinating to rehabilitation. At the same time, it shows the individual different means of conspiracy and defence against the pressure of the training. The charge's stay in a reformatory always involves a choice between identification with the formal role model and identification with the subculture. Such a choice determines an attitude to charges' rehabilitation.

Problems

I am interested in the importance of individual factors in the origin of the attitude of juveniles staying in a reformatory towards their rehabilitation. I assume that the attitude towards rehabilitation can be either favourable or negative, whereas two alternative and negatively

correlated identifications constitute the most significant determinants of the attitudes; the two identifications with: **the formal role models** or **the reformatory's subculture**. In my opinion, the most important individual features, among these which I take into consideration as possible determinants of the attitude towards rehabilitation, are the features which demonstrate the degree of demoralisation, disturbance of the internal control mechanism, and the deficiency of competences necessary to build harmonious relations with the social environment. Namely – according to Czapów (1978, pp.342-352) these features locate a juvenile in the dimension of psychopathy – neurosis, whereas according to the later presentation, they refer to e.g. the concept of the interpersonal maturity (the assessment and classification system I-level) (L. Pytka, 2005 pp.138-162). Receptivity to rehabilitation is associated with the higher maturity level, and opposition to it with the low maturity level. I present and describe these factors in the following point.

Variables and their measurement

Dependent Variable – Attitude towards Rehabilitation

I developed my own scale, in order to measure the variable. The measurement of the attitude was performed indirectly by the value of its two determinants – identification with the formal role models (formal authorities in reformatory) and identification with the reformatory's subculture (delinquent group, informal authorities). Every determinant was assessed by means of 5 items. In the analyses I used the results of each subscale and the general result (the sum of 10 items after reversing the score of the items referring to the subculture – the sum demonstrates receptivity to rehabilitation; the higher score, the higher receptivity). The contents of the scale are discussed in a separate publication (P.Kwiatkowski, 2002, vol. 2, pp.87-95).

Independent Variables

Empathic Sensitivity. Generally, we can distinguish two dimensions of empathy – emotional and intellectual. Emotional – is more primeval in the ontogenetic development and means emotional reacting to emotions of another person. Intellectual – means understanding of the situation of another individual and recognising his or her mental condition. Optimally functioning person not only **knows and understands** what is happening with another individual but also **sympathises** with them. In order to capture these dimensions, I used significantly modified version of the Interpersonal Reactivity Index by Davis (1999), (I changed the grade scale and, after appropriate calculations, decreased the number of items). The final version - 4 items per each dimension of empathy selected in the original version. These dimensions are: **personal distress** (reacting with a strong excitation in response to emotions shown by others), **empathic concern** (initiating warm feelings and the tendency to

take care for someone who is suffering), **perspective taking** (a tendency to perceive incidents from the perspective of another, ease in assuming someone's role), **fantasy** (emotional identification with fictional characters). I expected that receptivity to rehabilitation will be associated especially with two dimensions of empathy – empathic concern and perspective taking.

Aggressiveness – a relatively permanent, acquired tendency to use aggression and violence in relations with others (M. Kosewski, Warszawa 1977).; can manifest itself in different ways, starting from hostile aggression, aggression for fun, to instrumental aggression. It is manifested also in seeking by an individual situations which allow for experiencing reinforcing consequences (directly or indirectly) of these various forms of aggression. I developed my own test, in order to measure aggression. The items mainly come from the Buss-Durkee's scale. However, they were selected so as to reflect each dimension of this questionnaire (they had to correlate with every original subscale highly enough, at the same time "loading" the main factor with high values in the factor analysis. Following this method, I selected 8 statements and complemented the set with several statements of my own, from which I eventually used the best 2. The scale of 10 items proved to be homogeneous, reliable, and correct.

Level of Anxiety – the individual's tendency to habitual and excessive reaction with stress to life situations. The term *excessive* means that the stress is too strong and is experienced too often and, as a result, causes disturbances of the individual's activity. An antipode to the above-mentioned trait is the deficiency of anxiety – manifesting itself in the slower learning and low ability to generalise anxiety reactions and slow learning of the avoidance reaction to dangerous incidents. I used Cohen's Perceived Stress Scale (S. Cohen, T. Kamarck, R. Mermelstein, 1983, vol. 24, pp.385-396), in order to measure the level of anxiety. I used the shortened version (4 items).

Machiavellian Tendencies – the trait manifesting itself in cold, ruthless, and totally instrumental treatment of others (justified by a negative opinion about the human nature), and the flippant attitude towards social norms and universal human values. Such a tendency is regarded as the very essence of antisociality (K. Pospiszyl, 1995, pp.16-24). I measured this trait by means of the modified version of the Levenson's Psychopathy Scales (M.R. Levenson, K.A. Kiehl, C. Fitzpatrick, , 1995, vol. 68, pp. 151-158). The modification consists in the selection of only those items of the original version, which compose the secondary factor (this factor strongly demonstrated itself in the hierarchical factor analysis of the full scale). I treated them as criteria of the general antisocial tendency. The contents of these items require that the very essence of antisociality is the Machiavellian attitude towards people.

Method and respondents

The research was of the opinion poll character. I used a correlation coefficient for the ordinal data (Gamma coefficient available in the Statistica 6.0 package) to detect interrelations between variables. The charges of two reformatories in the area of Lower Silesia constituted the examined population. I examined 74 persons but eventually excluded some respondents from analyses (due to their incomplete questionnaires or the method of completion suggesting the negative attitude towards the research). The final analyses were completed on the group of 65 charges in reformatories.

Results

In the following table I present the correlation coefficients of every independent variable with particular coefficients of the attitude towards rehabilitation. The results can be summarised in several points.

Table 1. Attitudes towards rehabilitation and selected personality traits - correlation analysis (in the sample 65 juvenile offenders)

Independent Variables	Dependent Variable: attitudes towards rehabilitation		
	dimension AUTHORITY	dimension SUBCULTURE	GENERAL SCORE
EMPATHY (subscales IRI)			
Correlation - gamma coefficients (in parentheses significance level)			
Personal distress	0,04 (ns)	0,10 (ns)	-0,05 (ns)
Empathic concern	0,47 (0,0000)	-0,39 (0,0000)	0,49 (0,0000)
Perspective taking	0,31 (0,0008)	-0,07 (ns)	0,23 (0,0131)
Fantasy	0,05 (ns)	-0,09 (ns)	0,12 (ns)
AGGRESSIVENESS			
A-10 Scale (own test)	-0,35 (0,0001)	0,44 (0,0000)	-0,45 (0,0000)
ANXIETY LEVEL			
Cohen's Scale (short version)	0,17 (0,0661)	-0,23 (0,0110)	0,24 (0,0089)
MACHIAVELLIAN TENDENCY			
Levenson's scale (short version)	-0,27 (0,0024)	0,11 (ni)	-0,25 (0,0059)

ns - non-significance correlation

1. All four dimensions of personality are related to the attitude towards rehabilitation as expected. The traits which are regarded as the core components of antisociality are related to the lowered receptivity to rehabilitation. The **empathic concern** proved to be the strongest correlate; it correlated negatively with identification with the subculture; positively with identification with the formal authorities, and positively with the general result of the scale. Such correlations mean that **the deficiency of empathic concern** defines the negative attitude, whereas the well-developed sensitivity defines the juveniles' attitude being favourable for rehabilitation. A different dimension of empathy, i.e. **perspective taking**, correlates slightly lower with the attitudes towards rehabilitation (the correlation refers only to the identification with the authorities, whereas no correlation with the identification with the

subculture was detected).

2. **Aggressiveness** is related to the attitude towards rehabilitation on the similar level of gravity but slightly lower than empathy. The higher aggressiveness, the less constructive attitudes.

3. **Anxiety and escalation of Machiavellianism** clearly weaker but still significantly refer to the attitude towards rehabilitation. Low anxiety and strong Machiavellianism associate negative attitudes.

4. It is worth mentioning that if the dimensions of the **formal authority** and the **subculture** are taken into consideration, a certain correlation pattern is developed. As a result, empathy correlates stronger with the authority identification, whereas Machiavellianism correlates negatively with this trait. Aggressiveness, in turn, correlates with the subculture identification, with which the anxiety level correlates negatively.

Conclusions

Four core components of antisociality – the deficiency of empathy and anxiety, intensification of aggressiveness and Machiavellianism, determine the juvenile offenders attitude towards two factors, namely the influence of the formal authorities and the subculture with “the second life”, the factors which are crucial for the success of rehabilitation. Receptivity to the influence of the formal role model is determined by the level of empathy (as opposed to the level of Machiavellianism); whereas receptivity to the influence of the subculture is determined by the level of aggressiveness (as opposed to the level of anxiety). Hence, identification with the authorities is associated with the desire to establish the emotional contact with the environment, the desire which was developed in the earlier period of life, whereas the rejection of formal role models is associated with the emotional coldness. Identification with the subculture is, in turn, associated with those traits which determine competence to undertake actions in the area of the subculture: the ability to respect the norms of the subculture (aggression and the deficiency of anxiety correspond to the concept of toughness, strength of character, etc.). On the other hand, a mild disposition and the excessive anxiety practically prevent from acquiring a status in the elite of the second life (hence, "carriers" of these traits are forced in a way to hold on to the reformatory's personnel). The achieved pattern of the results seems to confirm the accuracy of the applied technique of the assessment of the attitudes towards rehabilitation.

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