



Self-Concept Development and Participation of Rehabilitees in Rehabilitation Outcomes

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Abstract

Self-concept and juvenile delinquency have received a lot of attention in other parts of the world. Studies within the Kenyan juvenile justice system have portrayed juvenile offenders as passive participants in rehabilitation. This study sought to uncover the role of the self in determining rehabilitation outcomes. Using the Adolescent Self-Concept Short Scale (ASCSS), a sample size of $N=34$ was obtained through a census, and the data was analyzed using SPSS[®] version 24, to establish statistically significant relationships with the use of Pearson's correlation tests. The study found that there is a significant relationship between self-concept and participation in rehabilitation programs, and that the adolescents' behavior was congruent with their labeled identities. The study concluded that an incorporation of interventions that targeted self-concept will foster an effective rehabilitation process for integration and rehabilitation.

Keywords: Delinquency, Juvenile Offender, Labeled Identity, Rehabilitation, Self-concept

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I. Background

Systems for dealing differently with children in conflict with the law have existed for more than a century. Frequently, such systems of child justice entail a variety of therapeutic and educational institutions for the rehabilitation and reintegration of child offenders. Muncie (2009) asserts that recent years have seen these systems ratified into laws. For instance, the United Nations Convention on Children's Rights (UNCRC), as established in 1989, recognizes the rights of children worldwide in view of the special attention needed for children to cater for their age and developmental needs. Accordingly, when dealing with children in conflict with the law, the primary consideration is the best interest of the child. Moreover, when a child is deprived of liberty, they should then be separated from adults, unless otherwise stated (United Nations, 1989).

Kenya ratified the UNCRC in July of 1990 and in keeping with its stipulations, soon after, the country embarked on a law reform process, which culminated in the Children's Act of 2001. Odongo (2017) describes the Kenyan juvenile justice system as benign and rehabilitative. Juvenile offenders in Kenya are defined as adolescents between the ages of 12-18 years (Children's Act, 2001) and referred to as 'children in conflict with the law'. These children are committed to rehabilitation schools under court committal orders for durations not exceeding three years, but arguably, alternatives to imprisonment may also be damaging (Odongo, 2017). Additionally, there is an emphasis on the minimum age of criminal capacity; and detention is considered as a last resort and should be for the shortest time possible. The juvenile justice system also precludes use of the terms 'conviction' and 'sentence' when referring to juvenile offenders. In the same vein, the term committal is used in place of imprisonment when referring to children in conflict with the law, and these children do not get criminal records (Children's Act, 2001; Odongo, 2017). These provisions indicate a leaning toward welfarism in the juvenile justice system and an overarching proclivity to minimize the damaging effects of stigmatization associated with institutionalization.

Adolescent delinquency is an extensive societal problem that greatly distresses the victims, perpetrators, and society at large Smith et al. (2015). Whereas the problem of delinquency in adolescence is a worldwide social phenomenon, there is concern about the impact of delinquency on not only the adolescents and their families, and the society at large, but also on the relationship between delinquency and adult crime (Gachara&Wasanga, 2011). Moreover, it places an extensive strain on resources and causes a great level of

distress on the part of victims, perpetrators, and society at large. Whilst rehabilitation and punishment as a deterrent for future offending form the rationale for incarcerating juveniles, a growing body of evidence suggests that there are numerous negative psychological and behavioral consequences for adolescents who are incarcerated (Hennigan et al., 2010; Lambie & Randell, 2013; Odongo, 2017; Tie & Waugh, 2001). Lambie and Randell (2013) in their research found that incarcerated youths have common disabling conditions, ranging from psychological maladjustments, learning disabilities to behavioral disorders. Relatedly, Hennigan et al. (2010) assert that there are social disadvantages and characteristics associated with institutionalized juveniles, and which tend to increase the likelihood of their future contact with the criminal justice system and heighten the probability of a lifelong criminal career (Lambie & Randell, 2013). This is because early contact with the juvenile justice system tends to initiate a spiral of events that drive adolescents into adult criminality, situation which raises concerns among juvenile justice practitioners in Kenya (Gachara and Wasanga 2011). Reviews of correctional outcomes in different jurisdictions for both juveniles and adults have concluded that a significant number of juvenile offenders commit more crimes after release from incarceration (Espiritu et al., 2001; Krohn et al., 2001). In Japan, for instance, about 17 percent of juvenile probationers and about 23 percent of juvenile parolees are disposed of or adjudicated by courts for recommitting crimes (Krohn et al., 2001). Similarly, in Kenya, there are high levels of recidivism among ex-inmate delinquents (Oywa, 2004).

A number of studies conducted in the Kenyan context have focused on the effectiveness of rehabilitation programs within rehabilitation schools. For example, Gachara and Wasanga (2011) examined how the effectiveness of rehabilitation interventions is influenced by perceptions of rehabilitees about rehabilitation schools and parental involvement in the rehabilitation process. Similarly, a survey of rehabilitation schools in Nairobi County conducted by Onyango (2013) on the effectiveness of rehabilitation programs on the reduction of juvenile delinquency, specifically focused on the environmental setting of such programs, the competence of staff handling juvenile delinquents and the policies and guidelines for managing rehabilitation schools as the key variables of study.

However, there is a paucity of studies on variables internal to the juveniles which may be of relevance to rehabilitation interventions and outcomes. Smith et al. (2015) observe that although literature is advanced on juvenile offending, it remains limited in uncovering predisposing psychological factors, such as self-concept. They further note that while it is possible to have a positive self-concept in some domains and a negative one in others, everyone has an overall self-concept that mirrors individual evaluation of their self-worth. Having positive self-concept has been linked to positive social and emotional development, while having a negative self-concept, especially during adolescence, has been associated with maladaptive behaviors and emotions.

This omission could be missing link that could weaken the impacts of these interventions when self-perceptions. For instance, a study conducted by Van de Schoot and Wong (2012) to test whether delinquent young adults have high- or low-level self-concept found that both low and high self-concept are indeed related to delinquent behavior. However, they qualified their findings by noting that they would not be generalizable to juveniles (because the study was conducted among young adults) and that the population studied was not institutionalized. It is against this backdrop that this study sought to establish the role of self-concept in shaping rehabilitation outcomes among adolescents who have been committed into rehabilitation programs in the Kenyan context.

Adolescence, as a developmental stage, is typically a period of transition, and therefore an unstable phase of life. Studies that have examined the relationship between adolescence and delinquency (Omboto et al., 2013; Prior & Paris, 2005) have specifically focused on pertinent risk factors. While there are varying factors making the adolescents susceptible to delinquent behaviors, not all adolescents at risk for conduct problems manifest delinquent behavior (Gachara&Wasanga, 2011). One factor which accounts for this situation is self-concept among delinquents. Studies have shown that adolescence is a period of life in which the sense of 'self' changes profoundly (Robins &Trzesniewski, 2005; Sebastian et al., 2008). It comprises an important developmental period for the self as the brain neural structures associated with self-processing, change between early adolescence and adulthood. Consequently, the neurocognitive development at this stage might contribute to behavioral phenomena characteristic of adolescence, such as heightened self-consciousness and susceptibility to peer influence (Bick-har, 2012; Sebastian et al., 2008). Moreover, there is some association between self-concept and delinquent behavior across the lifespan; from childhood, adolescence and through to adulthood. For instance, Brownfield and Thompson (2005) argue that there is a significant contribution of self-concept and significant others' appraisals of adolescents to their delinquent conduct. Their study on non-institutionalized high school male adolescents in Canada aged between 12-15 years found that self-identities developed through processes of social interaction which cause behavior (motivational factors). They observe that acquisition of a delinquent identity occurs through an interactive process which may involve a cycle of delinquency and punishment. Punishment is not necessarily a deterrent for delinquency, but rather, may work to reinforce the person in a delinquent role. Societal reaction to delinquency is therefore a pivotal factor in the process of developing a delinquent identity, primarily through a process referred to as labeling.

In general, labeling theorists critically examine the forces of law and order that typically apply the deviant label onto those who are (allegedly) in conflict with the law (Brownfield & Thompson, 2005). They argue for instance that involvement in the juvenile justice system commences a negative labeling process which results in depreciated self-concepts for those children so labeled (Mears & Travis, 2004). Additionally, the stigma associated with criminal convictions or sanctions work toward reinforcing the juvenile offenders' personalized negative self-worth (Gardner, 2010; Mears & Travis, 2004). These processes of stigmatization entrap juvenile offenders in cycles of delinquency and negative self-concepts. This theoretical framework provides a lens through which the experience of children in conflict with the law and who are committed to the juvenile justice system in Kenya can be examined.

II. Theoretical Review

Self-concept

Self-concept is acknowledged as an important factor affecting behavior (Baumeister et al., 1996; Brownfield & Thompson, 2005; Van de Schoot & Wong, 2012) It is generally thought of as an individual's perceptions of one's behavior, abilities and unique characteristics. Cherry (2018) and Mishra (2016) posit that while there are a number of theories on the exact constitution and development of self-concept, they generally converge at these basic themes:

- a) Self-concept is essentially the overall idea we have about who we are encompassing cognitive and affective judgments about ourselves.
- b) Self-concept is multi-dimensional, incorporating views of ourselves in terms of several different aspects.
- c) It is learned, not inherent.
- d) It is influenced by both biological and environmental factors, and by social interactions.
- e) It is dynamic since it develops through childhood and early adulthood and can be changed in later years.
- f) Self-concept does not always align with reality. When it does, it is said to be congruent, and when it doesn't, it is said to be incongruent.

As an individual develops from infancy to adulthood, their self-concept becomes more complex and multifaceted. According to Robins and Trzesniewski (2005) the early childhood stage registers relatively high levels of self-esteem, but which gradually decline over the course of childhood. As children develop cognitively, they begin to base their self-evaluations on external feedback and social comparisons and thus form a more balanced and accurate appraisal of themselves.

During middle childhood (about 7 to 11 years old), children are beginning to develop a sense of their social selves and figuring out how they fit in with everyone else. They reference social groups and make social comparisons more often and begin to think about how others see them (Berk, 2007; Bick-har, 2012). Studies have shown that during adolescence the sense of 'self' changes profoundly (Robins & Trzesniewski, 2005; Sebastian, Burnett & Blakemore, 2008). This is the stage in which individuals play with their sense of self, experimenting and comparing, and begin developing the basis of the self-concept that will likely stay with them throughout the rest of their life (Bick-har, 2012). During this period, adolescents are prone to greater self-consciousness and susceptibility to the influence of their peers, in part due to the changes happening in the brain (Sebastian et al., 2008). They enjoy greater freedom and independence, engage in increasingly competitive activities and are more able to take the perspective of others (Manning, 2007).

Symbolic Interactionist Perspective on the Development of Self-concept

Symbolic interactionism focuses on the relationships that an individual has within a given society. Herman and Reynolds (1994) note that this perspective sees people as being active in shaping the social world rather than simply being passive participants. Herbert Blumer coined the term "symbolic interactionism" and profiled the basic postulates as: human interaction with things is based on meanings they evoke; the attributed meaning of these things stems from socialization; and that the meanings of things are interpreted contextually (Brownfield and Thompson 2005).

Constructivism extends from the symbolic interaction theory and proposes that reality is what humans cognitively construct it to be. Thus, social constructs are developed based on interactions with others, and the constructs that last over time are those that have widely accepted meanings by most within the society. This approach is often used to understand deviance (Brownfield & Thompson, 2005).

Rubington and Weinberg (2002) further point out that associating with deviants helps the individual to maintain a deviant identity, since one loses their conventional characteristics and ties. A symbolic interactionist perspective on deviance has been developed by labeling theory (Becker, 1963; Lemert, 1967). It surmises how one's self-identity and behavior may be determined or influenced by the terms used to classify them. The theory assumes that although deviant behavior can initially have specific causalities, once individuals have been

labeled as deviants, they often react to the self and others within the negative stereotypes attached to their deviant label (Lemert, 1967). The labels applied to individuals further influence their behavior, particularly the application of negative or stigmatizing labels. Individuals labeled as delinquents tend to be set aside fundamentally as being different from others, and they also tend to be associated with stereotypes of undesirable traits (Brownfield & Thompson, 2005). More specifically, people will tend to believe that the labeled person is unable/unwilling to act morally. The stigma attached to criminal labeling promotes distrust for people bearing the criminal label (Brownfield & Thompson, 2005). In view of this, it postulates that it is possible to prevent social deviance through limiting the social shaming reaction by emphasizing on the rehabilitation of offenders through an alteration of their label(s).

According to Matsueda (1992), self-concepts may be affected and developed through reflected appraisals. However, while reflected appraisals may be thought of as causing self-appraisals (self-concept), both appraisals (self and reflected) are affected by actual appraisals made by others inclined towards labeling. Brownfield and Thompson (2005) posit that the stigma attached to criminal labeling promotes distrust for people bearing the criminal label and reinforces a stigmatized identity. As an adolescent who is trying to fit in with peers, a labeled identity draws them to an ingroup, characterized by delinquent identities, and further away from the mainstream societal norms. And since self-concept is reinforced by how an individual tends to act, an adolescent establishes a self-identity that is congruent with the label. Thus, it is arguable that if one of the functions of the correctional systems- adult or juvenile- is to reduce recidivism, applying a long-term label may cause prejudice against the offender, thereby resulting in their inability to maintain employment and social relationships (Bernburg, 2009).

In sum, self-concept is influenced and affected by labeling and social interactions. Consequently, the adjusted self-concept influences how an individual interacts with society, leading to a cycle of appraisals that may dictate and/or shift one's self concept. This is especially so among adolescents who are affected by peer appraisals.

III. Empirical Review

Self-Concept and Delinquency

Van de Schoot and Wong (2012) posit that research into the association between self-concept and delinquent behavior has in the past yielded contradictory inferences. They studied delinquent young adults (n=899) and concluded that both low and high self-concept are indeed related to delinquent behavior. An important caveat to the findings was that self-concept, being a multi-dimensional construct, should be studied in its respective domains (Van de Schoot & Wong, 2012).

Brownfield and Thompson (2005) in their study of high school students in a large urban community in Canada conducted in 2001, with (n = 543) found that there was a significant relationship between self-concept and juvenile delinquency. They quantified their findings based on the Symbolic Interactionist Theory, with a focus on parental and peer reflected appraisals. Pertinently, an important temporal issue raised by their findings on the role of self-concept and reflected appraisals and their contributions to delinquency was that reactive environment, - temperament and evoked behavior- do in fact have implications on delinquent behavior and self-concept.

Schwartz and Stryker (1970) as cited in Brownfield and Thompson (2005) conclude that the content of the self unequivocally influences behavior and this in turn is affected by social interaction. They draw inference from their empirical analysis of propositions about self-concept premised on the symbolic interactionist perspective. Their study sampled black and white boys (n=447) between 12 - 15 years old from two urban schools in New York and concluded that while peers significantly affect the overall self-concept, teachers mainly affected the potency dimension of self-concept. Brownfield and Thompson (2005) further propose that a delinquent identity stems out of an interactive process. A close association between delinquents reinforces a delinquent identity owing to a loss of conventional ties as exemplified by incarceration of juvenile offenders which sets a platform for relearning delinquent behavior through close interaction with peers (Rubington & Weinberg, 2002).

While the core principle in the modern rehabilitative schools is to rehabilitate an individual Gachara and Wasanga (2011) have concluded that a significant number of juvenile offenders commit more crimes after release from institutions, and that successful rehabilitation was a rare exception. Converging on the ineffectiveness of juvenile rehabilitation, Lambie and Randell (2013) advanced the idea that incarceration fails to meet both developmental and criminogenic needs of youth offenders arising from the complex individual and environmental interactions, which compound the offending behavior. This was drawn from their review of published literature on the outcomes of incarceration which concluded that the resentment and hostility towards "the system" has the consequence of compounding antisocial behavior (Lambie & Randell, 2013).

This study therefore sought to assess whether rehabilitation programs provide the opportunity for adolescent to become effectively rehabilitated by building on their developing self-concept

Method

The study was conducted at Kabete Boys' Rehabilitation School, among a population of high-risk male adolescents aged between 13 to 18 years. Established in 1910 by the colonial government, the Kabete Rehabilitation School holds boys who have been confined for committing both serious crimes, and petty offenses. The rehabilitation center focuses on behavioral change and is run in collaboration with the Ministry of Labour and Social Protection.

The sample size of the study was $n=34$ which was representative of the total population of the Institution at the time of the study. The study applied a quantitative design to measure empirical associations and correlates between the different self-concept variable, by drawing on the psychometrics of the study instrument.

All the respondents had been in rehabilitation for a duration ranging from less than 1 year to 3 years for purposes of behavior modification and preparation to re-enter society. The population studied came from various regions of Kenya: Western, Nyanza, Rift Valley, Coast, Eastern, Central and Nairobi.

Data Collection Tool

The study used a standardized survey specific in measuring self-concept among adolescents. The Adolescents' Self-Concept Short Scale (ASCSS) (Veiga&Leite, 2016) is an adaptation, and simplified version of the Piers-Harris Children's Self-Concept Scale (PHSCS). The scale uses a 30 item Likert scale scored on a six-point scale ranging from total disagreement to total agreement. The scale employs a six-factor dimension: anxiety (an); physical appearance (pa); behavior (be); popularity (po); happiness (ha); and intellectual status (is). The tool's scores range from 30 to 180, with 30 being the lowest score and 180 as the highest.

IV. Research Findings

The Levels of Self-concept

These levels were obtained by adding up the scores of each item on the ASCSS for everyone, with the lowest possible score being 30, and the highest 180. The number of participants in the study was $n=34$ and they reported the levels of global self-concept as shown in Table 1 below.

*Table 1:
Frequency and percentages of global self-concept*

Levels	Frequency	Percentage
Low level of self-concept	0	0%
Low to moderate level of self-concept	22	64.71%
Moderate to high level of self-concept	12	35.29%
High level of self-concept	0	0%
Total	34	100%

From the table, most of the respondents (64.71%) reported a low to moderate level of the global self-concept. Van de Schoot and Wong (2012) proposed that self-concept be studied in its respective domains. To cater for the multi-faceted domains of self-concept the further analysis of each of the sub scales was conducted.

These results are presented as follows.

*Table 2:
Scores and Percentages of the Adolescent Self-Concept sub- scales*

	Scores	Percentage
Anxiety(an)	502	16.21%
Physical appearance(pa)	613	19.79%
Behavior(be)	422	13.63%
Popularity(po)	428	13.82%
Happiness(ha)	575	18.57%
Intellectual status(is)	557	17.99%

ASCSS score

3097

100%

The table above represents the domains of self-concept as captured under the ASCSS. They are presented as per the cumulative scores of all the respondents, and the percentages in relation to the overall ASCSS score of all the research participants.

The physical appearance items which measured how comfortable the adolescents are with how they look, scored highest amongst the respondents at 19.79%. This agrees with other findings that, unlike the female adolescent population, male adolescents do not bother too much about physical appeal (Smith et al., 2015).

Anxiety ranked fourth at 16.21%. This means that the respondents exhibit relatively high levels of anxiety. This was measured by items like; “I am often afraid” to which 71% of the responses were affirmative. On the item “I am nervous” 74% reported a range of between ‘more agreement than disagreement’ and ‘totally agree’.

Behavior ranks at 13.63%. Behavior was the dimension with notable low scores. This implies a rather obvious behavioral misconduct characteristic among the students, with 88.24%, which is 30 out of the 34 of the boys, having reported that they ‘do many bad things’ and, 26 out of the 34, (76.47%), reported that they ‘mostly behave badly’.

While the purpose of rehabilitation is to help in amelioration of maladjusted behavior and this finding aligns with a labeled identity which could hamper effective rehabilitation due to the internalized stigma of a labeled deviant identity (Brownfield & Thompson, 2005).

The study tested the correlation of the duration of stay in the rehabilitation school and behavior. The findings were as follows.

*Table 3:
Correlation between Behavior and Duration of rehabilitation*

		Behavior	How long have you stayed in this school?
Behavior	Pearson Correlation	1	-.511**
	Sig. (2-tailed)		.002
	N	34	34
How long have you stayed in this school?	Pearson Correlation	-.511**	1
	Sig. (2-tailed)	.002	
	N	34	34

These findings report a strong negative relationship between behavior and duration of rehabilitation, at ($r = -0.511$, $p < 0.002$). Thus, the duration in the rehabilitation school had not helped the respondents in behavioral change.

The respondents were further asked to state how the rehabilitation programs were beneficial to them. This was intended to measure the significance of attitudes towards rehabilitation, and the overall self-concept. Below is a table of responses in percentages and frequencies

*Table 4:
Frequencies and percentages of attitudes towards rehabilitation programs*

	Frequency	Percentage
To be better	5	14.71%
To keep busy	7	20.59%
For self-employment	2	5.88%
To make parents happy	16	47.06%
I don't know	4	11.77%
Total	N=34	100%

It is notable that 47.06% of the respondents are in rehabilitation to make their parents happy, while 14.71% want to be better. 20.59% are interested in keeping busy and 5.88% are future oriented, as they seek self-employment. 11.77% of the respondents were indifferent, as they did not know how they benefitted from the rehabilitation programs.

V. Discussion

Generally, the contents of the self have been found to affect behavior (Baumeister et al., 1996; Brownfield & Thompson, 2005; Van de Schoot & Wong, 2012). From this current study, the levels of self-concept averaged at low to moderate levels. These findings agree with Ahad et al. (2016) who found that institutionalized adolescents have an average level of self-concept. Additionally, as per the specific domains, the respondents reported low scores on behavior and high levels of anxiety. High levels of anxiety among high-risk adolescents that are expressed as externalized behavior share in similarity with findings by Ahad et al. (2016) and Felizardo, (2017). There is a convergence between the current study and other findings. They are generally consistent with a cross-sectional study of 124 pupils with social risk aged between 13 and 18 years of age conducted in northern Portugal, from January to June 2016 using the Adolescents' Self-concept Short Scale (ASCSS). The results show that there are statistically significant differences in domains of self-concept, which is especially dependent on risk factors (Felizardo, 2017).

For instance, it has been argued that stress and psychological deficits are a culmination of social isolation (Siegel & Welsh, 2008; Mulvey, 2011)

The current study, which was conducted in the Kenyan context, found generalized low levels of self-concept. It appears that a factor that accounts for this is the often-overlooked acquisition of deviant/delinquent identities owing to labeling through institutionalization (Brownfield & Thompson, 2005; Van de Schoot & Wong, 2012). From this study, the respondents reported being 'bad people' and 'mostly behave badly'. While this could be an internalized identity because they are in rehabilitation for criminality, the study cannot conclusively say whether these self-concepts impact their participation in the rehabilitation programs. The current study aligns with Brownfield and Thompson (2005) on the weight of bearing a stigmatized identity and its influence on self-appraisal (self-concept) which potentially renders change inadmissible. Brownfield and Thompson (2005) argue that it is possible to prevent social deviance through limiting the social shaming and emphasizing on rehabilitation through an alteration of labels. The value laden connotation of labels serves a significant role in development of the self, and actively participating in acquiring of prosocial behavior. Perhaps one way to account for this is the use of Positive Psychology (PP). The merits of deploying Positive Psychology (PP) are in its ability to enhance an individual's optimal functioning and promote factors that foster flourishing at both micro and macro levels (Trom & Burke, 2021). As a component of rehabilitation programs and outcomes, PP, having common interests with parts of humanistic psychology, will help shift focus to interventions targeted at self-perceptions of children in conflict with the law and view them as fully functioning individuals capable of participating in their self-development and determining rehabilitation outcomes.

VI. Conclusion

Whereas juvenile justice systems seem to be benign in Kenya (Odongo, 2017) mental health issues could potentially arise, as reported from the findings on the relatively high levels of anxiety. Emotional and behavioral problems are known to be more prevalent among incarcerated adolescents than with the outside population. Moreover, institutionalization has profound negative impacts on young people's mental health, which could be reflected in a relatively lower concept of the self (Lambie and Randell 2013). Generally, the research participants reported a low to moderate self-concept and a heightened sense of anxiety. This in potentially affects rehabilitation outcomes, as seen in the low scoring of behavior in comparison to the different variables. Although a successful rehabilitation process may be impeded by several other factors, drawing from this study, the level of self-concept is possibly one such factor.

Drawing from the literature, emphasis is put on self-concept as a key factor in the evaluation processes of children and adolescents because of its potency in protecting against antagonistic life situations. Because of this, self-concept unequivocally has a bearing on behavior- positive or negative. In agreement with Felizardo (2017) this study recommends educational and therapeutic interventions to foster comprehensive development of self-concept, circumvent negative personal beliefs and consequently, prevent future emotional and behavioral difficulties.

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