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Influence of Parental Involvement on Rehabilitation of Juvenile Delinquents: A Case of Boys Rehabilitation Centres in Kenya

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Abstract:

Through the Children Act 2001, the government banned corporal punishment, which was widely used as a corrective method. Instead guidance and counselling was introduced and advocated as an alternative method of behaviour change in correctional and rehabilitation facilities. The study examined the influence of parental involvement in decision making on rehabilitation of delinquent boys in rehabilitation centres in Kenya. The study was based on ex post facto design and was guided by the bio-ecological theory. The target population consisted of 1573 children and 54 staff in ten rehabilitation centres in Kenya. Purposive sampling procedure was adopted in selecting 140 respondents (110 delinquent adolescent boys and 54 staff). Questionnaires and interview guide were used to collect data from the respondents. Data collected from the study was analysed using both descriptive and inferential statistics which included percentages, frequency counts, means, standard deviation, correlation analysis, regression analysis and Chi-square. The study established that parental involvement in decision making had a significant positive influence on rehabilitation of delinquent boys. The study concluded that parental involvement in decision making accounted for 37% of the observed improvement in the rehabilitation process.

Keywords: Delinquent behaviors, parental involvement, rehabilitation process, decision making, guidance and counselling

1. Introduction

According to Lamb (2017) delinquent behaviors encompass two broad dimensions: internalizing and externalizing. Internalizing disorders are directed inward and involve behavioral deficits such as withdrawal, isolation and depression while externalizing disorders are directed outward and involve behavioral excesses such as verbal and physical aggression (Shatrin & Balakrishna, 2013). Delinquency is a universal problem that is not restricted to specific regions, cultures or religions. In virtually all parts of the world, the rate of juvenile crime has risen sharply since 1990s. In Western Europe, arrests of juvenile delinquents and under-age offenders increased by an average of 50 per cent between the mid-1980s and the late 1990s. Since 2015 juvenile crime levels in many countries in Eastern Europe have increased by more than 30 per cent. Similarly, the number of children at risk of juvenile delinquency increased from 80 million to 150 million between 1992 and 2000.

In Africa, the problem of juvenile delinquency is best captured by the rising number of adolescents in the juvenile justice system and rehabilitation. Children born poor, with unmet health needs or as victims of violence are at increased risk of ending up in the criminal justice system or correctional and rehabilitation facilities. Approximately 87,000 youth each year are enrolled in juvenile residential facilities (Bush & Peterson, 2014).

In Kenya, there has been a steady increase in the number of juvenile delinquents. The rates of delinquency peaked in 1996 at 9,443 per 100,000 youth ages 10 to 17 and fell by one-third in 2011 (to 6,318 per 100,000). The trend has since increased with juveniles servicing custodial sentences increasing by over 60 percent from 6,318 to 13,108 per 100,000 in 2013 (Odera, 2013). According to Wambugu, Njoroge and Komen (2015) the high propensity for delinquency is linked to poverty, absent parent(s), parental alcoholism, child neglect, breakdown of family, single parenthood, overcrowding, abusive home conditions and HIV/AIDS scourge.

Due to the impact of delinquency, parents need to be involved in the rehabilitation process. Parental involvement is the initiative taken by parents as part of their responsibility for promoting psychosocial and educational development of children in rehabilitation facilities (Mo & Singh, 2011). Lamb (2017) conceptualizes parental involvement as assuming responsibility for child care and welfare. Parental involvement includes the frequency of contact, amount of time spent together, and the perceived accessibility and availability of the parent (Allen & Daly, 2015). Positive parental involvement in decision making in the rehabilitation process is key in facilitating behaviour and attitude change that are associated with better behavioral outcomes. For instance, teens in rehabilitation centres whose mothers disengage in both parental warmth and supervision often exhibit negative behaviours (Levin, 2017; Han & Jun, 2013). Going by this view it suffices to

say that parental involvement is of paramount importance and enhancing parental responsibility through parental involvement in key decisions in the rehabilitation process should be promoted (Noraini, 2016). However, most rehabilitation centres have not given much attention to parental involvement in decision making (Shorter & Onyancha, 2009). Mutie and Ndambuki (2009) observed that parents can play an important role if they are involved in decision making concerning how best to run the rehabilitation programs. Most studies on parental involvement have been done in regular schools and those done in rehabilitation have been conducted outside Kenya. Additionally, parental involvement in decision about guidance and counselling may have an impact on rehabilitation of juvenile delinquents. It is in view that the study investigated the influence of parental involvement in decision making on the rehabilitation of delinquent adolescent boys in rehabilitation centres in Kenya

2. Literature Review

2.1. Theoretical Framework

The study was guided by the Bronfenbrenner (1979)'s bio-ecological theory. The theory is based on the premise that an individual develops in a dynamic relationship with an inseparable part of the social contexts in which the individual functions. The theory proposes that human development is grounded in the ecological contexts and development is an individual's evolving concept of the environment and relationship to it, as well as the individual's increasing ability to discover, maintain or change certain aspects of the environment (Bronfenbrenner, 1979). Bronfenbrenner (1979) refers to the ecological contexts as the microsystem, mesosystem, exosystem, macrosystem, ontogenicsystem and the chrono system. The micro system is the pattern of activities, roles and interpersonal relationships experienced by a developing individual in the immediate setting in which they are functioning. The mesosystem represents the interrelations among two or more settings in which the individual actively functions. This may include interrelations among home and school, home and neighbourhood and school and peer group. The exosystem represents those settings that do not involve the individual directly including the parent's workplace, a sibling's classroom and the school system. The macrosystem involves the broad social factors that impinge on the settings within which the individual is contained.

The theory also appreciates the role of the ontogenic system which includes the personal characteristics of the individual such as the individual's cognitive, communicative, social and physical competencies that individuals bring to the settings in which they are functioning (Tinbergen, 2005). The chronosystem in the Bronfenbrenner's ecological systems consists of all the environmental changes that occur over the lifetime which influence development, including major life transitions, and historical events. These can include normal life transitions such as starting school but can also include non-normative life transitions such as parents getting a divorce or having to move to a new house. The claims about the determinants of human development enshrined in the tenets of the theory provided plausible justification in adopting the theory in the study. Parental involvement in decision making on guidance and counselling activities can help delinquent children to develop proper ways of satisfying their needs thereby developing socially accepted behaviours.

2.2. Rehabilitation of Juvenile Delinquents

Currently, there are several methods employed in rehabilitating juvenile delinquents. The most common forms are repatriation, institutionalisation, diversion programs and conditional release. Repatriation is mostly common among delinquent adolescent boys who come from the streets. It involves taking the child home with an assumption that the child has a home to go back to. However, this is not always in the best interest of the children because a large proportion of the delinquent children usually return to the streets owing to abuse at home. Conditional release involves releasing the child under the supervision of the parents or relatives or a children officer. In practice few children normally have the money to take advantage of the granting of a conditional release. Diversion refers to the removal of cases involving children from criminal justice processes (Lundman, 2014). Supporters of diversion program believe that persistent delinquency is the result of treating first time offenders, as if they were about to become persistently delinquent. Institutionalisation on the other hand refers to admission of delinquent children into rehabilitation for rehabilitation purposes (Lundman, 2014). Rehabilitation routinely offers academic and vocational instructions and assume that better educated and skilled inmates will be less delinquent upon release. Most rehabilitation centres also supplement these routine efforts with special programs such as individual and group counselling. In Kenya rehabilitation centres provide social rehabilitation and training programs for children by way of discipline and counselling so as to empower them. They also provide spiritual direction for the children by introducing religious instructions and equipping the children with useful skills which will help them on their return to their families. The centres also provide formal learning to ensure that the children's committal to rehabilitation centres does not negatively affect their schooling. For effective rehabilitation there is need to involve parents in decision making on the nature of activities carried out at the centre. This has also been observed by DeVillers (2015) who asserted that involving parents in key decisions is an important consideration in promoting correctional effectiveness. Kehio (2018) observed that there is an increased demand of accountability and quality programming for juveniles. The study looked at the influence of parental involvement in decision making on guidance and counselling on rehabilitation of juvenile delinquents in juvenile correctional institutions in Kenya.

2.3. Parental involvement in Decision Making

Previous studies have shown various effects of parental involvement in the life of a child. In Britain, Drake (2010) revealed that parental involvement is generally acceptable but this does not always translate into implementation of parental proposals. BATTERY and Anderson (2009) observed that the complexity of the society requires schools,

communities and parents to co-operate and work collaboratively to improve the learning experience of all children. Berger (2010) noted that parents can be involved in decision making in the school by serving in the school board, site-based management team or on advisory council. In England, Kogan (2015) found out that parents were not involved in decision making because parents lacked continuity, coherence and expertise. Moreover, Munn and McIntyre (2002) and Bechand Knight (2018) emphasised that parents were not much concerned with broad issues of accountability and that they wanted professionals to be strong in their expertise and were themselves concerned with their own children's needs. In general, many institutions do not include parents in school decision making to a great extent. With the exception of decisions about evaluating teachers, schools with parents on advisory groups are likely to consider parent input on all issues when compared to schools without these kinds of groups. Thus, parental involvement through a series of activities such as parent-teacher conferences and school functions, volunteering in classrooms and tutoring children can provide the best opportunities for parents to make significant decisions that influence the learning process. These activities enable parents to understand something of the school's structure and its instructional programs and provide basic experience in working with school personnel. These experiences can expand parents' knowledge and increase their credibility with school staff as they move into decision-making roles (Cotton & Wiklund, 2016).

Morrison and Lena (2016) studied the effect of parental involvement in the provision of social guidance to children in schools in the USA and found out that parents of children at risk of expulsion were required to attend regular meetings to develop a solution regarding their child's behaviour. The collaboration team approach used was rated as highly successful by both parents and teachers. Cotton and Wiklund (2016) observed that parental involvement was one area that was the most controversial as most parents would like to play a more active role, whereas most school administrators and teachers exhibit great reluctance to encourage parents to become partners in governance. However, Cotton and Wiklund (2016) found no programs in which parental participation in decision-making roles could be directly linked to improved positive leaning outcomes.

In rehabilitation centres, the major goals of parental involvement include the elimination of mistaken assumptions held by parents and school about one another's motives, attitudes, intentions and abilities. It is also needed to foster growth of parents' ability to serve as resources for the academic, social and psychological development of their children. However, in Kenya, limited studies exist documenting the influence of parental involvement in decision making about guidance and counselling and other learning programs.

3. Methods and Material

The study was based on the *ex post facto* research design. The *ex post facto* design was appropriate for this study because parental involvement in guidance and counselling and its possible effect on rehabilitation was not possible to be manipulated during the study. The study targeted ten boys' government rehabilitation centres namely Othaya, Wamumu, Machakos, Kericho, Kakamega, Dagoretti, Thika, Kabete, Likoni and Getathuru rehabilitation centres. The target population consisted of 60,600 children enrolled in these rehabilitation centres. The accessible population consisted of 1523 boys, 50 staff in ten approved schools (rehabilitation centres) and 10 sub county children officers. Purposive sampling was used in selecting the study participants. Four rehabilitation centres were conveniently selected. The selected centres were Kericho, Kakamega, Dagoretti and Thika rehabilitation centres. The total number of boys and staff in the selected centres was 715 and 29 respectively. From each rehabilitation centre, only boys in class seven were purposively as study participants. All the staffs in the sampled centres were also involved as study participants. These included teachers, social workers and counsellors. Four sub-County children's officers in the areas where the rehabilitation centres were situated also constituted the sample size. To obtain the number of class seven boys and staff members, Yamane's (1973) formula was used:

$$n = \frac{N}{1 + N(e)^2}$$

Where

n- sample size

N- the population, (715 boys)

e- the acceptable sampling error taken as 5%

The estimated number of boys was 110. The number of boys was proportionally allocated in the selected 4 rehabilitation centres. Therefore, the total sample was 110 children in class seven, 29 staff members and 4 sub county children officers totalling to 143 respondents.

Data was collected using questionnaires for the delinquent boys and staff and interview guide for the sub county children's officers. To establish the reliability of the instrument, the researcher piloted the instrument in Kakamega rehabilitation centre in Western Kenya. The reliability of the instruments was established using Cronbach alpha which helped to determine the internal consistency of the responses on the variables. From the findings, the Cronbach Alpha was found to be above the minimum threshold of 0.7 implying that the instruments were reliable. To ensure that the instruments were valid, the questionnaire items were divided into different sections as per the objectives of the study with different sections having items that reflected the objective to be considered. The supervisors were consulted to validate the instruments and the advice given enabled the modification of the items accordingly.

The data were tabulated and frequency distribution tables prepared. Both descriptive and inferential statistics were used to analyse the data. Raw scores and percentages were used to interpret data obtained from the field. Pearson product moment correlation coefficient was used to determine whether there was a significant relationship between

parental involvement and rehabilitation process. The analysis was aided by the Statistical Package for Social Sciences (SPSS) version 25.

4. Results and Discussion

4.1. Parental Involvement in Decision Making on Rehabilitation of Children

The results obtained from the study on the respondents' level of agreement with the statements pertaining to the influence of parental involvement in decision making on the rehabilitation of juvenile delinquents in Kenya. The findings are presented in Table 1.

Statements	N	Mean	St. Dev	χ^2	P-value
My parents are called at the beginning of every term to discuss the activities in the institution	140	4.01	0.32	64.99	0.047
Sometimes when there are counselling sessions with the counsellor parent are called to be involved	140	3.89	0.77	37.79	0.044
Whenever I fail in class-work my parent is consulted on the steps to be taken	140	3.69	0.97	31.75	0.047
Whenever we want to visit a place, my parent is informed	140	4.11	0.61	58.86	0.028
Involving parents in coming up with ways of solving problems helps	140	3.79	1.15	65.17	0.038
Whenever I don't improve in solving my problems my parent is called for discussion	140	4.16	1.019	31.15	0.027

Table 1: Parental Involvement in Decision Making
Source: Researcher, 2020

As shown in table 1, the respondents agreed that parents were invited at the beginning of every term to discuss termly activities as revealed by a mean response of 4.01 with a standard deviation of 0.32 ($\chi^2=64.99$; $p<0.05$). Sometimes parents were invited to participate in counselling sessions by providing any information that can help in the counselling process as shown by a mean response of 3.89 with a standard deviation of 0.77 ($\chi^2=37.79$; $p<0.05$). Moreover, majority of the respondents agreed that parents were consulted on the steps taken when a child did not improve in class as revealed by a mean response of 3.69 with a standard deviation of 0.97 ($\chi^2=31.75$; $p<0.05$). Further, the respondents agreed that whenever children wanted to visit a place the parents were informed as revealed by a mean response of 4.11 with a standard deviation of 0.61 ($\chi^2=58.86$; $p<0.05$). The respondents also agreed that involving parents in coming up with ways of solving problems was helping in the rehabilitation process as revealed by a mean response of 3.79 with a standard deviation of 1.15 ($\chi^2=65.17$; $p<0.05$). Moreover, parents were invited to discuss ways of improving in the level of performance when the children were not improving as revealed by a mean response of 4.16 with a standard deviation of 1.019 ($\chi^2=31.15$; $p<0.05$). The relationship between parental involvement in decision making and rehabilitation process was computed using Pearson correlation. The results are presented in table 2.

		Rehabilitation of Juvenile Delinquents
Parental Involvement in Decision Making	Pearson Correlation	.608**
	Sig. (2-tailed)	.002
	N	140

Table 2: Parental Involvement in Decision Making and Rehabilitation

** Correlation Is Significant at the 0.05 Level (2-Tailed)

Source: Researcher, 2020

The results presented in table 2 reveals that there was a moderate positive correlation between parental involvement in decision making and rehabilitation of juvenile delinquents as revealed by $r=0.608$ at $p<0.05$. This means that parental involvement in decision making contributed to 37% (r^2) of the positive change in the rehabilitation of the juvenile delinquents. The results were applied to test the hypothesis that: There was no statistically significant influence of parental involvement in decision making on rehabilitation of juvenile delinquents in Kenya. The determination of correlation of 37% was statistically significant at $p<0.05$. Therefore, the null hypothesis was rejected and the study concluded that parental involvement in decision making had a significant influence on rehabilitation of juvenile delinquents in Kenya. However, the interview conducted with the children's officers revealed that parental involvement was minimal and inadequate because of the general belief that the delinquent children have defeated their parents and

therefore parents may not contribute much to help them at the rehabilitation centres. Nevertheless, the children officers observed that parental involvement was positively associated with a child's improved level of academic performance.

4.2. Summary and Discussion

From the results it is evident that parental involvement in decision making was significant in the rehabilitation process. Parental opinions were critical in facilitating the rehabilitation process. The outcome of the study is supported by the tenets of the bio-ecological model which emphasizes the multiple influential factors on rehabilitation of children including parental involvement. In this regard, the microsystem (interpersonal relationships with parents or primary caregivers), mesosystem (interrelations between home and school such as parent-teacher collaboration), exosystem (the school system), macrosystem (rehabilitation policies such as the duration of stay at the centres), ontogenic system (personal characteristics of the individual) and the chronosystem (environmental changes occurring over the duration of stay) were all relevant in influencing rehabilitation process and overall improvement in the level of academic performance of delinquent children. Thomas (2001) observes that parental involvement in decision making should be strengthened through effective partnership and cooperation among stakeholders. As a result, the study provides evidence that parental involvement is significant in influencing children's level of academic performance. Therefore, it is critical for parents to increase their level of participation in decision making as a foundation for improved level of academic performance among children undergoing rehabilitation programmes.

5. Conclusion and Recommendations

5.1. Conclusions

Based on the findings of the study, the study concluded that parental involvement in decision making influenced the rehabilitation of boys in rehabilitation centres in Kenya. There was a positive relationship between parental involvement in decision making on rehabilitation of juvenile delinquents ($r^2=0.369$). This implied that 37% of the observed improvement in the rehabilitation process was accounted for by parental involvement in decision making. This is supported by the Bronfenbrenner's model which considers the inclusion of different ecological systems in promoting positive change in children who are going through rehabilitation.

5.2. Recommendation

Based on the study findings the following recommendations were made:

- Rehabilitation centres should involve parents in decisions about behaviour change programs and offer parents opportunity to provide counselling and guidance to their children to complement the effort of teachers and counsellors.
- The managers of the rehabilitation centres should consider the principles of Bronfennbrener's bio-ecological theory when formulating rehabilitation programs for the children.

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