

Skill-based Intervention Programme for Children in Conflict with Law: An Innovative Approach from University of Calcutta

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Abstract: A major population of youth is increasingly engaging in law violation activities which has become a matter of concern all over the world. The need of the hour calls for a rehabilitation programme designed to cater to the needs and deficits of conflict with law. Keeping this view in mind, a Skill Based Intervention Programme (SBIP) has been developed for CCL. The SBIP consisted of two sets of modules of group sessions: Direct Application of Psychological Principles and Application of Psychological Principles using Music and there was also another module for Individual Psychological sessions. Post the development of the Intervention Programme, the SBIP was conducted on 93 males within the age range 12-17 years. Pre-post intervention data was collected using the Adaptive Behaviour Checklist for CCL, specially developed to meet the requirements of the module. Data for Pre-intervention assessment was collected from 93 males. However, data for post assessment intervention could be collected only from 59 adolescents who participated in the entire Intervention programme. Results indicated significant differences between the pre-intervention and the post-intervention scores, the post-intervention scores significantly higher than the pre-intervention score. Change processes have been enumerated in the discussion.

Keywords: Children in conflict with law, law violation, Psychological principles, Music, Skill Based Intervention Programme, Adaptive Behaviour Checklist for CCL.

I. INTRODUCTION

The theory of 'therapeutic jurisprudence' (Wexler, 1995, 2001) enunciates that principles of justice should operate keeping in view therapeutic principles. Therapeutic jurisprudence focusses on the human aspect of law and reflects law's impact on the emotional and psychological side on human beings (Wexler, 2010). Thus the impact of law as a social force was first recognized through this theory and has been extensively utilised in the rehabilitation of CCLs.

In the context of therapeutic jurisprudence, the 'Good lives Model' (Ward, 2002) can be useful in planning their rehabilitation. The Good lives model is based on 'Positive Psychology' that aims to enhance the well-being of the offenders. This model aims to enhance the responsibility of the offenders so that they can develop their own positive

attributes, necessary to achieve their own life goals (Fortune, et al, 2015; Fortune, 2018)

Keeping this model in mind, an attempt has been made to develop a Skill Based Intervention Programme (SBIP) which will facilitate intervention of the children in conflict with law, on the basis of the deficits identified during observation and psychological assessment. While rehabilitation programmes for children in conflict with law are being conducted all over the world, the lack of a culturally competent intervention module becomes a bottleneck, as they are unable to cater to all the existing deficits and problems of the group.

II. METHOD

A. Rationale behind the Development of the Skill Based Intervention Programme (SBIP)

The Skill Based Intervention Programme (SBIP) was developed as a 'Culturally Competent' (Lo and Fung, 2003) skill training programme catered to meet the needs and deficits of Children in conflict with law (CCL). The SBIP was developed keeping in mind the language and comprehension ability, the socio-economic status, existing system of values and biases, social interaction patterns, family dynamics of this target group.

Modules of SBIP were developed using an integrative approach, involving two elaborate phases. The first phase of this work revolved around identifying the deficits of Children in conflict with law on the basis of existing literature and using empirical research. The second phase of this work was initiated from the perspective of clinicians addressing the questions, which came up while extending the intervention programme to children. To finalise this intervention programme, a process based approach was adopted primarily to explain improvement or deterioration. During this approach our focus was more on 'functional first' (Hayes et al, 2020). This aims to reduce their suffering and to enhance their adaptive behaviour.

Further, the underlying biopsychosocial processes need to be addressed in order to facilitate improved adaptive functioning (Hoffman and Hayes, 2019 a) of these children .

Even though the process based therapy explicitly states that it is an ideographic approach, our research encompasses both nomothetic and ideographic approaches since our empirical research has indicated that the underlying psychological processes are more or less similar for all the children. Individual differences were addressed separately in the total intervention programme.

B. Theoretical framework

Literature review and empirical findings have pointed out that CCL often experience dysfunctional abusive family environments with either neglecting parenting or over permissive parenting. As a result they are exposed to faulty models in their immediate environment. Following this, they develop no routine or schedule in their lives for which they also show poor adherence to socially appropriate normative behaviour. This is in line with **Bandura's social cognitive theory (1971)**. The behaviour often gets manifested in the form of rule violation. They also fail to develop any positive activity and goal directed engagement which eventually leads to neuropsychological deficits. Their ability to sustain attention is poor along with their information processing ability, leading to poor decision making which in turn, gets reflected through their deficits in social functioning. This often leads to reduced subjective well being manifested through different mental health problems which include both internalising and externalising features and also substance dependence. These problems often culminate in developing Personality issues and deficits in higher cognitive functioning. This whole phenomena eventually gets converted to a vicious cycle, where finally they end up engaging in law violation activities.

In addition to this, as **Bailey, et al (2001)** states in his concept 'critical window of time' that during a particular developmental phase, the brain expects some stimuli which will help in acquisition of different abilities and capacities. This is possible only through exposure of a healthy learning environment and it facilitates in the development of new neural connections. Failure to stimulate the brain during this phase deprives the child of essential adaptive qualities.

Research literature over the years has substantiated the efficacy of music not just in creating a positive impact on human psyche by facilitating catharsis and emotional expression, it also helps in affective regulation (Sloboda, 1998 ; Das et al, 2018). Music also helps in enhancing various executive functions like attention, concentration, memory, reasoning and comprehension and plays a very important role in developing self concept (Johnson, 1981; Loui and Guetta, 2018).

The '**Good Lives Model**' as already discussed in the Introduction is a major contributor to the intervention programme. This model aims to enhance the internal and

external resources of client at both personal and social level (Ward et al, 2011). It emphasizes on the usage of different techniques like cognitive restructuring, empathy training, affect regulation and social skill training (Willis and Ward, 2013).

Based on the Social cognitive theory (Bandura,1971) and the concept of critical window of time (Bailey, et al 2001), the content of the intervention programme was formulated. Implementation of the module was done following the Good Lives Model (Ward, 2002) and it encompassed various modes, which included colouring visual analogue scales, story construction using visual aids and discussion, along with other established psychotherapeutic techniques. Both Group and Individual sessions were incorporated in the intervention programme. Group sessions were further classified as Direct Application of Psychological Principles (Psychological Session) and Application of Psychological Principles using Music (Music Session).

C. Objective

The overall aim of the Programme was to develop the socio-emotional developmental skills of CCL which will help in everyday functioning. Other important needs of this group include enhancing their positive emotions, increasing their level of engagement, improving their relationship with self and others and to enhance their sense of attainment which may help in creating a more meaningful life for them. Finally, an attempt will also be made to develop positive self-concept in these children. Positive self-concept will help in fostering their motivation, achievement and socialization (Huang, 2012). Positive self-concept will also act as a buffer against problem behaviour (Yusop et al, 2015).

D. Brief Description of the SBIP

This account includes a description of the 'Psychological Sessions' and the 'Music Sessions'.

The 'Psychological Session' includes the following modules:

- a. *Introduction to Group Therapy and Basic Psychological Processes:* Through this module, children were introduced to the concept of Group Session and to the various Mental Health promoting as well as damaging factors.
- b. *Understanding the Positive Aspects of Self:* This module helps children to identify the positive traits within self and others and also to learn how these positive traits can be applied in various social settings.
- c. *Recognition of Emotions:* This module is especially important as it helps in awareness of the emotions experienced within self and others. Through this module children are acquainted with various basic emotions as well as psychoeducated about Emotion Dysregulation

- d. *Psychoeducation about Depression, Associated factors and its Management:* The first part of this module deals with understanding signs and features of Depression and low self esteem and consequences and manifestations of Depression. The second part of the module includes management of Depression using various strategies.
 - e. *Psychoeducation about Causes, Consequences of Aggression and its Management:* The module helps in understanding the causes and impact of aggression and also understanding the various ways by which aggression can be managed.
 - f. *Interpretation of social situation and social cues:* This module focusses on understanding Intergroup conflict and on accepting differences.
 - g. *Addressing Underlying Traumas:* All children residing in CCIs have a history of trauma and much of the maladaptive behaviour stems from those traumatic experiences. Therefore, it is important that the trauma of these children be addressed.
 - h. *Awareness of the Interconnectivity of thoughts, emotions and bodily sensations and knowing how to manage:* The module helps in identification of factors causing distress and also figuring out associated cognition, emotions and behaviour associated with the distress and also to enhance skills to tolerate distress.
 - i. *Understanding Deliberate self harm:* Deliberate self harm is a very significant matter of concern and needs proper deliberation. Alternative behaviour that one can engage in instead of harming self have been discussed in the module.
 - j. *Changing Attribution style:* Since these children mostly have an externalized attribution style, they need to be educated about alternative styles of attribution.
 - k. *Psychoeducation about substance use:* This module addresses the consequences of substance use and ways by which substance use can be reduced is another point of discussion.
 - l. *Understanding Relationships:* Dysfunctional and Unhealthy relationships are very commonly experienced by these children. Therefore, a discussion about relationships is very relevant for these groups.
 - m. *Cognitive games:* This is a mode of cognitive training for CCL designed to strengthen their cognitive faculties.
- The 'Music Session' includes the following modules
- a. *Introduction to Group Session:* This module focuses on the need of music in everyday life and providing supportive examples to substantiate this view.
 - b. *Syllables of Music:* This module introduces them to basic, yet important theory elements like Swaras, Talas, Sargams, Key, Scale, etc. It also includes a more detailed demonstration of Swaras, Sargams, some basic Tala Patterns, They will also be introduced to Basic Alankars, Sargam geets, Sargam pattern.
 - c. *Introduction to Vocal Therapy exercises:* This module introduces them to vocal therapy exercises and also to various forms of breathing exercises.
 - d. *Introduction to Intermediate concepts (komal and shudh notes):* This module introduces them to the concept of 'komal' and 'shuddha' notes and also explains the different emotions, invoked by the Komal and Shudh Notes.
 - e. *Introduction of Swarmalikas/Sargam Geets:* The session gradually shift to an intermediate-Semi Advanced stage of Note identification, execution and understanding
 - f. *Introduction of the concept of Ragas, Bandishes/Hindustani Classical compositions:* Through this module Gradual shifting is made to an Advanced stage of compositions, execution and understanding. This module also explains the meaning and concept of the bandishes in the local language.
 - g. *Introduction to Patriotic songs, Tagore songs and Folk songs:* The next module introduces them to Concept of Variety of Music like Patriotic song, Tagore song, Folk song along with contemporary music etc.
 - h. *Preparation, rehearsals, performance module using music tracks:* A very important part of the module is to prepare children for Musical programmes as it will enhance their self esteem, positive well being and will also expose them to more prosocial models.
 - i. *Listening session of variety of Music & In case of Instrumental Music children will be introduced with the sound & Photograph of different Instruments:* The next module deals with Listening session of variety of Music & In case of Instrumental Music, children will be introduced with the sound & Photograph of different Instruments.
 - j. *Concept of seasonal music:* A module will also be included to introduce children to the concept of seasonal music.
 - k. *Effect of the lyrics of a song:* Another focus of the module will be on the lyrical content. Repeated practicing of the lyrics will not only improve their

pronunciations but also enhance their verbal comprehension and vocabulary

E. Participants-

Phase 1

Psychological assessments were administered on Children in conflict with Law. Initially the assessments were administered on 84 children, out of which 15 children had to be excluded either because of poor intellectual functioning or incomplete data. The study was conducted only on male adolescents. All the adolescents were between the age range 12-17 years. All the participants have completed education at least till the 8th grade.

Phase 2

The SBIP was administered on 93 children, all of whom were males and resided in the child care institution for at least 15 days. All these adolescents were within the age range 12-17 years and all of them were under trial for law violation. However, out of these 93 children, 26 children were excluded who did not complete the intervention programme and 7 adolescents whose intellectual functioning were below average were also not included in the study.

F. Tools Used:

Phase 1:

- **Information schedule** was used for collecting necessary information about their personal history, family history and academic history.
- Bhatia Performance Test of Intelligence (Bhatia, 1955) was administered to understand their level of intellectual functioning. This was followed by administration of checklists to assess their behavioural emotional problems. Neuropsychological assessments were also administered to understand their executive functioning.

Phase 2:

- An Adaptive Behaviour Checklist for CCL was constructed for assessing the effectiveness of the intervention. The intervention used both as a pre-intervention and post-intervention assessment to measure outcome of SBIP. The checklist was constructed by the same experts who constructed the modules of this intervention programme. Items relevant to the expected outcome of SBIP were included in the checklist along with several behavioural manifestations of change processes. The relevance of the items was rated by the experts who have substantial knowledge in dealing with children in conflict with law. Items rated as irrelevant by the experts were discarded. Around 15 items were discarded by experts and the remaining items were retained. The checklist has been conceptualized expecting the following outcomes:

- Following an everyday routine.
- Increased sense of well being
- Understanding necessity of adherence to rule and decreasing rule violation
- Emotion Regulation: Reducing anger outbursts, Managing low mood and other negative emotions, Adequate use of Positive Distraction during Negative Affective state.
- Increasing their tolerance of negative emotions
- Perspective taking
- Increasing Positive engagement
- Awareness of different mental health conditions of self and others
- Reduced restlessness

G. Procedure

At the very beginning, requisite permission was sought from necessary judicial and state government authorities. The work also received approval from the Institutional Ethics Committee in 2016. Work was initiated in a Correctional Home of West Bengal, India in 2017. Initially, psychological assessments were conducted which helped in the construction of a profile of their behavioral deficits and problems.

During the second phase, on the basis of previous findings, the domains of the modules were decided on. The module was formulated by a team of Clinical Psychologists and Indian Classical vocalists and music composers. The intervention programme was done in three phases on three different groups. The SBIP could be completed in 32 weeks for each group (one group psychological session per week and two music sessions per weeks and individual sessions as per need). The module was conducted by the same team. There was no specific way for conducting the module. The sequence of the module was decided on the basis of the need of the group. It is also important to mention that the groups were fluid in nature, that is there was continuous admission of new boys as well as release of existing boys. During the same phase, the adaptive behaviour checklist was constructed following the method of tool construction. Post assessment was done only on the completion of the intervention programme, by the two Clinical Psychologists. Based on the consensus of the rating, the final scoresheet was prepared.

III. RESULTS

Phase 1:

The average IQ of this group was found to be between 90-101. Test results also suggested the presence of internalising features as well as externalising features. Internalising features included low mood, reduced sleep and appetite, reduced energy and social withdrawal. Externalising features included presence of aggression, disobedience, impulsivity and substance use. Other features included inability to sustain attention and somatic complaints. Other important findings included cognitive inflexibility, response inhibition, poor working memory and poor abstraction.

Phase 2:

Baseline measures were taken before the initiation of the skill based intervention programme and post the completion of the intervention programme .

Table 1.1: Paired samples t-test to find the presence of significant differences, if any, between the pre-intervention phase and the post-intervention phase.

	Mean score	t-value
Pre-intervention	94.02	5.74**
Post-intervention	116.73	

**p< 0.01 level

Paired Sample t-test was done to evaluate the efficacy of the intervention. Results indicated that there is a significant difference in the scores obtained on the Adaptive Behaviour Checklist in the pre-intervention and post-intervention phase. The total mean scores of the post-intervention phase was greater than the total mean score in the pre-intervention phase. Greater scores indicated better adaptive behaviour.

IV. DISCUSSION

This skill based intervention programme is more activity based and Psychoeducational in nature where CCL will be oriented to Self, Emotion, Social Context and Mental Health. They will also be introduced to how each of these affect adaptive functioning in a cyclical way.

Multiple psychotherapeutic strategies and techniques were incorporated in the modules. Some of these included acceptance strategies, activity scheduling, cognitive restructuring, cognitive training, commitment to values, cost benefit analysis, distraction strategies, positive refocusing, problem solving and few others.

Among the various modes of conducting sessions, story-telling and story construction were very commonly used. Research studies indicate that during story telling, children often place themselves in the shoes of the main character and engage in 'critical thinking' and 'decision making' which are very important psychological attributes (Shafieyan, Soleymani, Samouei and Afsar, 2017). Furthermore, story-telling also helps in improving their communication pattern and has several neuropsychological benefits (Yabe, et al, 2018). Each story-telling and story construction session was followed by discussion. Colouring as an activity was also used in the Psychological sessions. As Literature suggests colouring helps to reduce negative emotions and also enhances ability to sustain attention (Holt, Furbert and Sweetingam, 2018). Colouring is also a cognitive task which addresses multiple facets from reducing restlessness to helping in concept formation (Holt et al, 2018).

The initial sessions of the Skill training programme focus more on limit setting and rule following, in both group sessions. The introduction to Psychological and Music sessions orient them about the content of these sessions, how activities of these session are different from other activities of

the Home and the rules that they are expected to follow in these sessions. The initial rule setting becomes very important as it deters most of them from any major law violation and also helps in practicing rule following which gradually becomes a part of their behavioural repertoire. The following sessions also orient them with behaviour and activities that help to promote a positive mental health and also enhances their awareness of indicators that suggest a negative mental health.

The next few sessions were dedicated to help CCLs understand their positive attributes and character strengths and hence to develop a positive self concept. The reason for this emphasis on developing a positive self concept was its multidimensional impact on life. Positive self concept not just helps in enhancing positive emotions but also creates a positive outlook on life. Literature indicates that positive self concept reduces disciplinary problems (Norlizah, 2008; Othman, 2006; Riffat Un Nisa, 2011). Furthermore, these children are reared up in environments, where they have been exposed to negative models and negative aspects of their personality. Highlighting positive attributes exposes them to a new aspect about themselves. Similarly, identification of positive traits in others will help them to take a more balanced view of other people and situations.

Awareness of emotions was another attempt and a crucial one, since most of the maladaptive behaviour manifested by them involve difficulties in emotion regulation. Increased understanding of the emotions made it easier for them to regulate their emotions and also enhances interpersonal effectiveness (Silvia, 2002; Lane and Smith, 2021)

Through interaction with these children, it was realized that in most of distressing or negative situations, these children do not know the exact strategies as to how such situations should be dealt with. Therefore, modules were developed to cater to these needs. In each of these sessions, pertaining to 'Depression', 'Negative self esteem', 'Anger' and 'Deliberate self harm', they were psychoeducated about strategies they can use to deal with the situation. Research too suggests the efficacy of psychoeducation in Group interventions. Enhancing awareness of the client regarding their condition and the resources that the client can harness to enhance their adaptive functioning through psychoeducation often leads to positive outcomes (Kaplan, Sadock, 1996; Bauml, et al, 2006; Palacin et al, 2004). Addressing trauma and gratitude journal (Flinchbaugh et al, 2012; Isik et al, 2017) was again important since most of the boys remain stuck to their childhood negative experiences. The importance of 'Acceptance'(Wojnarowska et al, 2020; Haspert 2020) and 'Positive refocussing'(Chaturvedi and Kumari, 2016) in this context was explained. Despite Group Intervention, Individual sessions are also organized for enhancing their coping resources and if necessary to address their specific psychopathology.

Understanding social cues was also emphasized on. This was again important since these children often misinterpret social

cues and as a result respond erroneously which causes much of their problems. Through this segment also, more thoughtful actions were emphasized on.

Music sessions on the other hand, compliments psychological sessions by acting as a cognitive training for set shifting, cognitive rigidity, response inhibition, facilitating working memory through its components like practice of *taal pattern* (traditional rhythmic pattern) and *sargam patterns* (different patterns of musical notes).

The music session gives specific emphasis on Indian Classical music, regional music and patriotic music.

The Indian Classical ragas and regional songs evoked various emotions in these children (Goldstein, 1980; Tanner and Budd, 1985; Mathur, 2015) which helped in releasing their pent up emotions. Other than that research evidence is also indicative of the role of music as a mood lifter (Nagarajan et al 2015). Similarly, Hallam and Price (1998) also indicated in their research that music is capable of reducing emotional and behavioural difficulties in children which may help to explain reduced restlessness and improved mood of children in conflict with law. Music is also believed to instill a calmness in the internal psychological functioning of these children.

Similarly patriotic music instills a sense of confidence and belongingness in these children. During phases of crisis, these songs give the courage to confront such crisis situations. Regional songs helps children to connect with cultural roots, nature and motherland and brings back memories of their early life which helps in releasing their pent up emotions and also improves their low mood.

In addition to that, music also helps in promoting vocabulary as children are made to repeat the lyrics of various songs, which not only clears their pronunciation but also increases their repertoire of words. Research too is suggestive of the fact that music improves linguistic ability and memorization (Patel, 2003). fMRI studies have also shown that singing stimulates the language centre and logic areas of the brain (Satoh et al, 2015)

The rhythm of the songs especially selected for the group was also very important as it help to modulate and regularize their biological functioning (Harrer and Harrer, 1977). Music Listening is also considered equally important for them as it helps in relaxation and coping with stress (Gupta and Singh, 2020) It also helps in increased sustaining of attention and reducing restlessness. Music Listening also enhances their cognitive functioning such as language and memory. Music listening provides a rich material for verbal encoding and later on helps in retrieval as well (Nagarajan et al, 2015). Other than this, the different components of music like pitch, tempo, rhythm, tune and lyrics altogether activate the different cortical and subcortical networks which requires further experimental probing.

The current discussion focussed on underlying processes as well as in improvement in different desirable skills of the Children in conflict with law.

Despite being able to establish the efficacy of the module, it is important to state that only people proficient in the field of Clinical psychology and having sound knowledge about the techniques used in therapy and those proficient in the field of music (having knowledge of different musical genres) will be able to deliver this therapy effectively. Furthermore, our perception is also that an integrated approach with a team of experts from both the fields of Clinical Psychology and Music will bring about the best results.

However, in the process of our journey of developing SBIP, several hindering factors were identified starting from initial difficulty in developing therapeutic alliance, conducting a successful group session because of their initial resistance, restlessness and difficulty in sustaining attention. With Patience and skillful approach, these problems can be handled with time

V. CONCLUSION

The SBIP has been successfully implemented at an observation Home in West Bengal, with plans of further implementing it in other Homes in different districts of West Bengal. However, the SBIP has been framed in such a way that it can be applied in other CCL based Child care institutions, if necessary with minor modifications to make it culturally competent.

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