The Predictive Ability of Some Variables in Satisfying Sociopsychological Needs of Convicted Juveniles

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Abstract
The study aims at exploring the predictive ability of some variables in satisfying sociopsychological needs of convicted juveniles in Jordan. A questionnaire of 61 items divided on seven dimensions is designed to measure the juveniles needs. Seventy six convicted juvenile in Jordan completed the questionnaire. Results indicated that all health care needs of the juvenile’s results are moderate, except for “comprehensive medical check-up” which scored high. Shelter needs satisfaction scored high in “maintaining toilets cleanliness” and education satisfaction needs scored high in “providing lounges to watch television”. Results also revealed that juvenile’s age, sentence length, educational level of the father and the number of rehabilitation programs all contribute in explaining 59% of the total variation in self-awareness. And fathers’ educational, juvenile academic level and number of family visits contribute in explaining 75% of the total variation of modifying personal behaviour.

Keywords: shelter, health care and education needs, social needs, self-awareness, modifying personal behaviour, Juveniles

1. Introduction
Many developed countries focused their attention on different categories within different social patterns; recently attention was directed toward delinquent juveniles admitted to correctional institutions, because delinquent juveniles are considered a source of annoyance and insecurity for their families the society and themselves. The concept of juvenile delinquency varies according to the view of society, individuals or organization. Accordingly, the definition fits the society values, which in turn determines the general framework of the characteristics and dimensions that define the characteristics and aspects of juvenile age and behaviour. It also defines the beginning and end of the period that characterizes the concept and complies with specialists perspectives in the science related to this concept.

Jordan government represented by ministry of social affairs paid attention on juveniles by establishing social observation homes to care for delinquent juveniles and aimed to provide education, social, religious, corrective and psychological needs. These observation homes are managed by many specialists in medical, psychological, educational and social domains. A young juvenile is: a child that deviate from the right path (Sadhan, 1996).

The juvenile is defined in the social concept as “a child who acts different from his peers, the same actions committed by adults will be punished upon as criminals”. Thus, a juvenile is the child who violates the social norms in his actions. Psychologically a juvenile is defined as a child who is not compatible or has a psychological conflict with himself and the community, if the psychological conflict and the anti-social behaviour is a characteristic or a social or a psychological trend imposed by the juvenile character (Jaber, 2004, p. 73).

Definitions of law, psychology and social scientists of the concept vary. Since the current study is of psychosocial nature it will focus on the definition from a psychosocial perspective that complies with the population. Al-Awaji (cited in Jibbons, 1991) defines it as violations of the familiar in social behaviour, or as behaviours that violates the social standards. The concept of delinquency may refer to the violation of expectations, social norms and misbehaviours that may threaten life itself (Ghabari, 1989). But delinquency means social actions of some people which are prohibited by law or socially disapproved (Atef, 2005).

Several theories explained the juvenile delinquency concept and searched in its causes, these theories have been discussed by Khoj (1998), Sikorski (2005) and Gabay (2014) as follows;
Social Control Theories suggest that social control effectiveness, weakness or absence lead to juvenile delinquency. The lack of organization and cohesion are essential elements in explaining juvenile delinquency, containment and socialization are essential prerequisites for individual’s harmony with the society.

Sub-Cultural Theories consider delinquency and crime occurrence as a result of certain environmental situations but not from the individual himself, because of control models practiced by adults in a certain group, and because the social structure elements are the main reasons leading to delinquency and crime.

Psychological Theories concentrate on the processes within the individual himself, they vary according to the methods used to reveal reality and source of behavioural delinquency.

Biological Theories refer to the relationship between delinquent biological composition in the private domain that recognize and measure the effect of genes and chemical compositions that carry certain biological factors affecting behaviour.

Labeling Theories concentrate on the personal characteristics of the delinquent juvenile and the factors that are included such as the distinctive perception of individuals feeling that characterizes him by the community, and on the self-concept according to the delinquent juvenile.

Needs and rights of juveniles in human right perspective: Human rights constitute an integrated system that individuals may not live without in dignity as humans; it is the foundation of freedom, justice and peace that provides the individual and community with an opportunity to develop. Human rights are not bought nor inherited; they simply belong to individuals for being humans. They are rooted in each individual regardless of gender, religion, political opinion, nationality, or social origin they are authentic, integrated and indivisible (Al Gharaibeh, 2009).

Human rights may be categorized according to Ife (2001) and Allen (2009) into three generations; the first is called the political and civil rights generation, it includes the right of living, freedom, security, torture free, slavery free, freedom of opinion and expression, and freedom of joining organizations; the second is called the economic and social rights generation, it includes the right to work, learn, live decently, eat, shelter and health care; the third is environmental, cultural and developmental rights generation, it includes the right to live in a clean environment, in addition to the culture, political and economic development.

Jordanian law is consistent with the general criteria recommended by the United Nations Congress on the Prevention of Crime and Treatment of Offenders held in Havana to adopt the United Nations Rules for the Protection of Juveniles Deprived of Liberty (United Nations, 1990). International laws that have emerged from the Havana convention ensured creating open detention institutions for juveniles, where the number of juveniles is at the minimum to help psychologists and social workers in the treatment of juveniles individually (Human Rights, 1993).

The state is responsible for all individuals in the society regardless of age, gender, colour, religion or disability, it is also responsible for providing care to them, therefore, psychosocial care of juveniles is a social responsibility guaranteed for individuals by the community (Abdel Samad, 2002; Al Baz, 2004).

Regardless of the juvenile age group recognizing his needs and ensuring his rights is a humanitarian necessity according to divine laws and human rights conventions. A juvenile is a human regardless of his age or felony but he needs more care and attention (Albadayneh, 2012; Creag, 2013). Many theories discussed sociopsychological needs of delinquent juveniles (Norwood, 1999; Donna, 1992; Slavin, 2009). These theories are:

The Freudian psychoanalytic theory: considers needs as a set of relatively stable characteristics that distinguishes an individual from the other in mood, behaviour, mind and body. Freud also talked about two main human instincts of living and death. The instinct is the main element of the personality, so the energy of the body affects the mind and it is considered the link between two types of energy; the body and soul, when certain needs prevail like hunger it transforms into a desire in the mind, this desire represents the need of the body in the mind which derives the individual to perform a certain behaviour.

Maslow needs theory: Abraham Maslow identified the hierarchy of human needs, it consists of five levels starting with physiological basic needs such as food, drink, clothes, shelter and sex all of which are important for human survival, these needs are characterized in being natural and the starting point to satisfy other needs such as security, social affiliation, appreciation and respect and finally to need of self-realization which is considered a distinctive degree reached by human, he develops independency which is considered the most important need. Sociopsychological needs of juveniles according to Maslow are human rights guaranteed by international laws and approved by the Universal Declaration of Human Rights through local constitutions and laws.
Murray’s motivation theory: categorizes needs into manifest needs and latent needs. Needs are defined as “a kind of composition that represents power in the brain region that organizes cognition, tendency and action and transforms a certain not satisfied situation”. Murray also believes that needs are sometimes motivated by internal processes that stand among vital sequences, but needs are usually motivated by the appearance of an effective event. The need translates itself when it provokes the human to look for or avoid confrontation with something; every need has a special form accompanied by a certain feeling or a particular emotion.

Miller & Dollard’s reinforcement theory: explains needs by the stimulus response theory. The theory believes that the humans are born with a small number of primary psychological motives and the rest of the motives are acquired. A motive is considered an powerful stimulus that pushes the individual to be active, any motive may become a stimulus if it reaches a certain level of power. Motives are associated with psychological processes, alleviating the necessity of these motives stimulant is vital for human life.

The philosophy of therapeutic programs in juveniles institutions depend on the idea that if patients are treated physically, then they may be treated psychologically and socially, that is if knowledge is able to intervene in order to treat patients physically it may also intervene to treat them psychologically, morally and socially. Experience proved that delinquency and crime factors are due to psychological and social needs and factors (Al-Romaith, 2004; Stubbs, 2014). Some prominent studies are conducted on sociopsychological needs of convicted juveniles in the United States of America, such as the study of Brown (1993) which involved a sample of 44 delinquents in prison reforms. Results indicated that most general needs of delinquent juveniles are related to mental and emotional health, health care in general considering that they suffer from poor health care before entering juvenile’s centres.

In Saudi Arabia Al-Rshood (1994) conducted a study on institutional care services provided to 80 delinquent juvenile Residents of Social Observation Home in Riyadh. The results revealed that 40% of the juveniles in the Home believe that the services provided don’t satisfy their needs.

Al Musalam (2001) conducted a study to find the effect of parent’s relationship with juvenile’s delinquency. The sample included 122 juveniles, they completed the juvenile delinquency questionnaire. Results revealed that age group under 15 are more vulnerable to delinquency, which means younger age is more vulnerable to delinquency compared with older age. The study also revealed that a juvenile living with his parents is less vulnerable to delinquency compared with a juvenile not living with his parents.

Al Qarni (2002) study aimed to recognize the delinquent juveniles satisfaction level toward the services provided to them in Observation Homes in Riyadh, Dammam, Jeddah and Abha. The study recruited 133 juveniles. The researcher concluded that most of the juveniles in these homes are very satisfied about the services provided to them during their stay; they also recognized development in their behaviour toward their colleagues and those responsible for the homes such as social workers and psychologists.

Al Romaith (2004) study is comprehensive, it investigated the basic needs of juveniles such as toilets, meals, cleanliness of dormitories, providing periodic clothing and ventilation of the dormitories. The sample consisted of 177 juveniles. Results indicated that all these services are fairly provided in Saudi Arabia Homes of juveniles.

Al Fayoumi (2007) discussed the psychological condition among juveniles. The sample consisted of 80 juvenile, their age ranges between (13-15) year. Results indicated that juveniles have a sense of guilt and they don’t have enough recognition and they have repressed sexual tendencies.

Andera (2008) aimed at discussing the level of educational needs provided to juveniles. One hundred and eighty seven American juveniles participated in the study. The results indicated a weakness in educational services provided in juvenile’s centres in America.

Marsha (2008) examined the educational environment provided to juveniles. He recruited 300 American juvenile ages 12-17 years. Results indicated that education in juveniles centres is generally weak, there is one hour a day for teaching, classes are overcrowded where 70 juveniles are taught in one room, in addition to the increase of teachers violence against juveniles, and silencing them in class.

Lengvinas (2010) conducted an experimental study to explore educational issues of juveniles in reformatories; he interviewed juveniles, employees and teachers in reformatories. The study concluded that delinquent juvenile’s education in reformatories creates an environment that helps juveniles enjoy and engage in learning, and to maintain their motivation toward learning.

Zoraqa (2012) looked in family’s correlation with adolescent juvenile delinquency. His study recognized the socioeconomic and cultural situations of families that may be the cause of their sons delinquency, it also recognized the psychological state of juveniles being adolescents going through periods and psychological contradictory situations sometimes, which in turn was a motivation to try delinquency. The sample consisted of 54
family. Results revealed that mal economic situations are the main reason of delinquent behaviour followed by social situation then the cultural situation.

Jajko (2013) addressed the relationship between risk factors and crime styles among criminals. Risk factors included sexual delinquency, drug abuse, social isolation, lack of intimate relationship with peers, exposure to violence, chronic rage problems, behaviour problems in school, and the problematic relationship between the juvenile and parents. Results revealed that risk factors represented by social isolation and the problematic relationship between the parents plays a vital role in crime occurrence.

Bondurant (2014) in a recent study examined the relationship between high school dropouts and criminal activity. The sample consisted of 80 participant ages more than 18; half of them are high school graduates, and the other half are dropouts; the two groups consisted of (20 male and 20 female). Results revealed a statistical significant correlation between school dropouts and criminal behaviour; moreover, males are more vulnerable to be convicted compared with females.

Recently Reston (2014) explored health care provided for the Afro-American origins juveniles’ rehabilitation organization in the state of Colombia. Data collected is provided from a data base of young people. Results indicated that juveniles obtain primary health care, but there is an obvious shortage in mental health care.

Wie (2014) explored the impact of family upon adolescent’s behaviour. Using data from the national longitudinal health care study of adolescents. Results showed that children in one parent families are more vulnerable to engage in property and violence crimes. Biological children are more vulnerable to engage in violence crimes.

Fraser (2014) explored family role in juvenile’s treatment. Data from five randomized clinical trials to test the effectiveness of family based treatment to examine the change in male and female adolescent’s juveniles. Results proved the positive role of family environment in treating and reducing children orientation to delinquency.

To sum up, Al-Romaih (2004) study concluded that basic needs provided to juveniles such as toilets and meals are fairly delivered in Saudi Arabia Homes of juveniles. Brown (1993) study indicated that health care services provided to delinquent juveniles are week. Reston (2014) study indicated that juveniles obtain primary health care, but there is an obvious shortage in mental health care. And Al-Rshood (1994) proved that institutional care services provided to delinquent juveniles Residents of Social Observation Home doesn’t satisfy their needs. These results differed from the results of Al Qarni (2002) which concluded that most of the juveniles are very satisfied about the services provided to them during their stay at Observation Homes. Andera (2008) and Marsha (2008) referred to weakness in educational services provided in juvenile’s centres in America. Marsha referred to an increase of teacher’s violence against juveniles, and silencing them in class. Lengvinas (2010) study indicated that delinquent juveniles education in reformatories create an environment that helps juveniles enjoy and engage in learning, and to maintain their motivation toward learning. Bondurant (2014) study revealed a correlation between dropping out from schools and felony behaviour; males were also more vulnerable to be condemned with a crime.

Jajko (2013) revealed risk factors represented by social isolation and the problematic relationship between the parents plays a vital role in crime occurrence. In the same regard Wie (2014) found that children in one parent families are more vulnerable to engage in property and violence crimes and biological children are more vulnerable to engage in violence crimes. Fraser (2014) found evidence of family environment positive role in treating and reducing children orientation to delinquency. Al Fayoumi results (2007) indicated that juveniles have a sense of guilt and they don’t have enough recognition and they have repressed sexual tendencies.

In different age groups, Al Musalam (2001) study indicated that younger age is more vulnerable to delinquency compared with older age and that a juvenile living with his parents is less vulnerable to delinquency compared with a juvenile not living with his parents.

To sum up the previous studies are directly related to the current study subject, they all reviewed social care programs provided to delinquent juveniles at social welfare homes and the extent of its success in reforming juveniles and their satisfaction about these programs from different perspectives. They also dealt with health care, shelter, social or educational needs of juveniles. This study is different in discussing the level of health care, shelter, sociopsychological and educational needs satisfaction of convicted juveniles in Jordan, and the extent of variables ability to explain social needs, self-awareness and modifying personal behaviour. It must be mentioned that studies in this respect are very few and old, hence this study will try to bridge the gap and explore the level of satisfaction of Jordanian juveniles scientifically.

1.1 Study Problem

Juvenile’s centres are considered different from the natural environment in which he lived, so juveniles need an integrated care to satisfy sociopsychological needs; if the juvenile feels that the services provided to him are not
satisfying his sociopsychological needs, he denies these programs, and then he starts to look for alternative ways to satisfy his needs. Fahme (1996) says if individuals’ needs whether they are organic or psychological are not satisfied this pressures him to try satisfying these needs, and the longer the deprivation is the more intense the pressure becomes, but if environmental or social circumstances does not allow satisfaction a juvenile tries to find a way to satisfy his needs abnormally and at this point the individual becomes a delinquent and the process of adjustment disturbs. The current study stems from here and tries to explore the level of sociopsychological needs satisfaction such as needs of health care, shelter and education as well as searching the relative contribution of some variables in social needs, self-awareness and modifying personal behaviour of convicted juveniles in Jordan. For that the study is limited to answer the following questions:

1) What is the satisfaction level of health care, shelter and educational needs provide to delinquent juveniles in juveniles centres?

2) To what extent do the variables of social status of the juvenile family, his age, and parent’s educational level, length of sentence, number of visits, and number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in the social satisfaction extent of the juvenile?

3) To what extent do the variables of social status of the juvenile family, his age, parent’s educational level, length of sentence, number of visits, and number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in self-awareness?

4) To what extent do the variables of social status of the juvenile family, his age, parent’s educational level, length of sentence, number of visits, number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in modifying of personal behaviours?

1.2 Significant of the Study

Providing basic needs to juveniles helps them to learn and develop social, educational, cultural abilities in addition to expanding their knowledge and development of social skills. Therefore, the importance of this study stems from its try to reveal sociopsychological needs of delinquent juveniles in Jordan, and the extent of the variables contribution in these needs, which may contribute in setting appropriate policies to meet the needs and to define its importance by care providers such as social workers and psychologists in a time that all previous studies concentrate on delinquent causes, motives and manifestations. There is also a practical importance of the study present in designing future programs that serves convicted juveniles, and designing a guide for those who work to understand, explain or predict juvenile’s behaviour.

1.3 Procedural Definitions

- Convicted Juveniles (delinquent juvenile). Article 2 of the Jordanian juveniles act (2007) defines a juvenile as “every individual that have completed seven years and not yet eighteen, whether male or female, convicted by juveniles court and serving his sentence in Irbid or Amman juvenile centre”.
- Sociological needs, represented by sociological conditions and requirements which enable a juvenile of proper sociological personality development (Al-Romaih, 2004). It is measured by implementing the questionnaire of juvenile’s health care, shelter and educational needs.
- Health care needs, the availability of health care involves comprehensive medical check-up before being admitted into the centre, providing appropriate medicines, isolating infected delinquent juveniles, periodic medical check-ups by the medical staff at the juveniles detention centre (United Nations, 1990). It is the degree measured by the implementing juveniles health care needs questionnaire.
- Sheltering, providing proper places to sleep and taking into account cleanliness of the dormitories and toilets. Provide healthy sufficient meals, clothes periodically in summer and winter, personal supplies, proper ventilation inside dormitories, supervising personal hygiene and showers, bedding and blankets to everyone, and snacks between main meals in juvenile’s centres (Human Rights, 1993). It is measured by implementing shelter needs questionnaire.
- Educational needs, providing television lounges for educational and entertainment movies, books and magazines in centres libraries and daily newspapers (United Nations, 1990). It is measured by implementing educational needs questionnaire.
- Self-awareness is the individual’s ability to compose standards from what he believes, ethical principles and community values to choose directions and steer behaviour and enhance them (Isaias, 2011). It is measured by implementing self-awareness questionnaire.
• Modifying personal behaviour is to make a fundamental change in social behaviour (Al-Romaih, 2004). It is measured by implementing modifying personal behaviour questionnaire.

1.4 Limitations of the Study
The study is limited by the following: the participants in the study came from one age group (12-17 year); the psychometric features of the questionnaire utilized (health care, shelter and education needs of juveniles); when was the study conducted; the statistical method used in data analysis. Hence the results are valid only for this population and similar samples.

1.5 Study Variables
The study includes the following variables: independent variables (father’s education, age, the number of rehabilitation programs, educational level, number of visits, mother’s education, length of sentence, social status of the parents, and number of juveniles); dependent variables (shelter needs, educational needs, health care needs, social needs, self-awareness and modifying individual’s behaviour).

2. Method
2.1 Population and Study Sample
Population consisted of all Jordanian juveniles (N. 150) convicted and admitted to Irbid and Amman juvenile’s homes in (2014). Sample included 76 juvenile ages between 12-17 years randomly assigned to the study from these homes. A descriptive analytical approach is used is employed for its appropriateness to the nature and objectives of the study.

2.2 Instrument
To achieve the aim of the study the questionnaire of sociopsychological needs including health care, shelter, educational, and social needs, self-awareness and modifying individual behaviour of juveniles is constructed depending on the previous literature. The questionnaire included 61 items; juveniles answered the questionnaire items according to their level of certainty on a 3-point scale that ranged between; Always, Sometimes, and Never. Items are distributed on the primary variables and questions related to juveniles as follows; health care needs 7 items, shelter needs 12 items, educational needs 4 items, sociological needs 11 items self-awareness 11 items and the extent of modifying personal behaviour 16 items.

2.3 Validity of the Instrument
To verify compatibility of the scale for the purpose of the study, 15 professors in psychology and social work from Jordan universities provided observations on the scales’ items in terms of representation of dimension, suitability to the aim, and the structure of each item, their observations were considered in modifying the scale. Generally it was agreed that the items verify the purpose of the study, which means the scale has an acceptable validity degree scoring (80%).

Construct Validity: items internal consistency is calculated using a pilot sample of 15 juvenile other than the participants of the study. Correlations between items and dimensions is calculated by Pearson correlation as shown in Table 1.

Table 1. Correlation coefficients of the items based on test dimensions and overall test

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Modifying personal behaviour</th>
<th>Shelter needs</th>
<th>Sociological needs</th>
<th>Self-awareness</th>
<th>Health care needs</th>
<th>Educational Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Items</td>
<td>Correlated with Dimension</td>
<td>Correlated with Instrument</td>
<td>Correlated with Dimension</td>
<td>Correlated with Instrument</td>
<td>Correlated with Dimension</td>
<td>Correlated with Instrument</td>
</tr>
<tr>
<td>1</td>
<td>0.77</td>
<td>0.71</td>
<td>0.80</td>
<td>0.60</td>
<td>0.81</td>
<td>0.57</td>
</tr>
<tr>
<td>2</td>
<td>0.73</td>
<td>0.81</td>
<td>0.55</td>
<td>0.71</td>
<td>0.71</td>
<td>0.53</td>
</tr>
<tr>
<td>3</td>
<td>0.81</td>
<td>0.77</td>
<td>0.77</td>
<td>0.66</td>
<td>0.74</td>
<td>0.78</td>
</tr>
<tr>
<td>4</td>
<td>0.65</td>
<td>0.83</td>
<td>0.69</td>
<td>0.65</td>
<td>0.64</td>
<td>0.64</td>
</tr>
<tr>
<td>5</td>
<td>0.67</td>
<td>0.61</td>
<td>0.73</td>
<td>0.64</td>
<td>0.59</td>
<td>0.64</td>
</tr>
<tr>
<td>6</td>
<td>0.79</td>
<td>0.65</td>
<td>0.71</td>
<td>0.70</td>
<td>0.77</td>
<td>0.77</td>
</tr>
<tr>
<td>7</td>
<td>0.78</td>
<td>0.82</td>
<td>0.70</td>
<td>0.85</td>
<td>0.81</td>
<td>0.63</td>
</tr>
</tbody>
</table>
Correlation coefficients values between the items and modifying personal behavior dimension ranged between 0.65-0.85, and the correlation values with the test as a whole ranged between 0.59-0.81. Correlation values between items and shelter needs ranged between 0.59-0.81, and it ranged between 0.59-0.82 with the test as a whole. Correlation values of the items and social needs ranged between 0.55-0.87, and it ranged between 0.54-0.85 with the test as a whole. Correlation values of the items and self-awareness ranged between 0.60- 0.82, and it ranged between 0.67-0.81 with the test as a whole. Correlation values of the items and educational needs ranged between 0.57-0.78, and it ranged between 0.524-0.735 with the test as a whole as revealed in Table 1.

The results of Table 1 in terms of construct validity prove that correlation coefficient of the items with the dimensions and the test as a whole wasn’t less than the standard 0.20; which indicates to a good construction of the test items of concepts cognition.

Internal consistency of the items is calculated using a pilot sample answers by Cronbach Alpha. Test re-test (interval of two weeks) is carried out to ensure the internal consistency and it is calculated by Pearson correlation as shown in Table 2.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Internal Consistency</th>
<th>Test re-test Consistency</th>
<th>Items N.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health care needs</td>
<td>0.74</td>
<td>0.83</td>
<td>7</td>
</tr>
<tr>
<td>Shelter needs</td>
<td>0.72</td>
<td>0.77</td>
<td>12</td>
</tr>
<tr>
<td>Education needs</td>
<td>0.70</td>
<td>0.79</td>
<td>4</td>
</tr>
<tr>
<td>Social needs</td>
<td>0.80</td>
<td>0.73</td>
<td>11</td>
</tr>
<tr>
<td>Self-awareness</td>
<td>0.73</td>
<td>0.75</td>
<td>11</td>
</tr>
<tr>
<td>Modifying personal behavior</td>
<td>0.73</td>
<td>0.75</td>
<td>16</td>
</tr>
</tbody>
</table>

Internal consistency ranged between (0.70-0.80) and test re-test values ranged between (0.77-0.83) as observed in table (0.77-0.83).

2.4 Measuring Satisfaction Level

Items had three answers ranging from (3) Always, (2) Sometimes, and (1) Never. Items of needs are considered week if their averages scored (1-1.69), averaged (1.7-2.39) and high (2.4-3).

2.5 Procedures of the Study

- An official permission is obtained to implement the study on convicted juveniles;
- The questionnaire is constructed;
- Juveniles centres in Irbid and Amman are visited;
- The questionnaire is implemented within 2-3 weeks;
- Data is collected and analysed.
2.6 Statistical Analysis

SPSS is used to analyse data. To answer the study questions multiple correlation coefficients, square, sum of squares regression, and standard weights of independent variables using progressive input method is utilized.

3. Results

The study aimed at recognizing the level of satisfying shelter, health care and education needs, and the predictive ability of variables of social needs, self-awareness and modifying personal behaviour of convicted juveniles in Jordan by answering the following questions:

To answer the first question “What is the satisfaction level of sociopsychological health care, shelter and educational needs provided to delinquent juveniles in juvenile’s centres?” Averages and relative importance of health care needs are calculated and arranged in a descending order based on items means as shown in Table 3.

Table 3. The satisfaction level of health care needs of convicted juveniles in descendant order

<table>
<thead>
<tr>
<th>Item N.</th>
<th>Item order</th>
<th>Health care needs</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Relative Importance%</th>
<th>Service Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>Comprehensive medical check-up</td>
<td>2.56</td>
<td>0.73</td>
<td>85.30</td>
<td>High</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>Providing appropriate medicines</td>
<td>2.32</td>
<td>0.77</td>
<td>77.30</td>
<td>Medium</td>
</tr>
<tr>
<td>7</td>
<td>3</td>
<td>Isolating infected delinquent juveniles</td>
<td>2.23</td>
<td>0.86</td>
<td>74.30</td>
<td>Medium</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>Providing medicine to sick juveniles</td>
<td>2.18</td>
<td>0.93</td>
<td>72.70</td>
<td>Medium</td>
</tr>
<tr>
<td>5</td>
<td>4</td>
<td>Periodic medical check-up</td>
<td>2.18</td>
<td>0.74</td>
<td>72.70</td>
<td>Medium</td>
</tr>
<tr>
<td>6</td>
<td>5</td>
<td>General medical check-up before being admitted to the centre.</td>
<td>2.10</td>
<td>0.91</td>
<td>70</td>
<td>Medium</td>
</tr>
<tr>
<td>4</td>
<td>6</td>
<td>Medical services provided by resident nurses.</td>
<td>2.07</td>
<td>0.87</td>
<td>69</td>
<td>Medium</td>
</tr>
</tbody>
</table>

The juveniles level of health care satisfaction ranged between 2.07-2.56 as observed in Table 3, all health care services provided to juveniles scored medium scores except for “comprehensive medical check-up”, which scored high (mean 2.56) and was ranked first, “proper medications” followed, then “nurses providing health care services” scored sixth and last (mean 2.07).

Table 4. The satisfaction level of shelter needs of convicted juveniles in descendant order

<table>
<thead>
<tr>
<th>Item N.</th>
<th>Item order</th>
<th>Shelter needs</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Relative Importance</th>
<th>Service Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>1</td>
<td>Maintain toilets cleanliness</td>
<td>2.63</td>
<td>0.67</td>
<td>87.7</td>
<td>high</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>Providing healthy diet</td>
<td>2.55</td>
<td>0.75</td>
<td>85</td>
<td>high</td>
</tr>
<tr>
<td>6</td>
<td>3</td>
<td>Maintain cleanliness of dormitories</td>
<td>2.48</td>
<td>0.84</td>
<td>82.7</td>
<td>high</td>
</tr>
<tr>
<td>2</td>
<td>4</td>
<td>Provide enough meals</td>
<td>2.43</td>
<td>0.77</td>
<td>81</td>
<td>medium</td>
</tr>
<tr>
<td>8</td>
<td>5</td>
<td>Provide an adequate number of toilets</td>
<td>2.39</td>
<td>0.8</td>
<td>79.7</td>
<td>medium</td>
</tr>
<tr>
<td>11</td>
<td>6</td>
<td>Providing periodic clothing (in summer and winter)</td>
<td>2.36</td>
<td>0.84</td>
<td>78.7</td>
<td>medium</td>
</tr>
<tr>
<td>12</td>
<td>7</td>
<td>Provide personal supplies</td>
<td>2.23</td>
<td>0.87</td>
<td>74.3</td>
<td>medium</td>
</tr>
<tr>
<td>5</td>
<td>8</td>
<td>Provide proper conditioning inside the dormitories</td>
<td>2.18</td>
<td>0.89</td>
<td>72.7</td>
<td>medium</td>
</tr>
<tr>
<td>4</td>
<td>9</td>
<td>Provide proper ventilation inside the dormitories</td>
<td>2.08</td>
<td>0.87</td>
<td>69.3</td>
<td>medium</td>
</tr>
</tbody>
</table>
9 10 Supervise personal hygiene and bathing of juveniles 1.98 0.88 66 medium
10 11 Provide enough bedding and blankets to everyone 1.92 0.86 64 medium
3 12 Provide snacks between the three main meals 1.79 0.8 59.7 medium

Average shelter satisfaction is observed in Table 4 scoring between 1.79-2.63, i.e. the level ranges from high to medium, the need of “maintain cleanliness of toilets” is ranked first followed by “providing healthy diet” then “providing snacks between the three main meals” in the twelfth rank and the final one (mean 1.79).

Table 5. The satisfaction level of educational needs of convicted juveniles in a descendant order

<table>
<thead>
<tr>
<th>Item N.</th>
<th>Item order</th>
<th>education needs</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Relative Importance</th>
<th>Service Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>41</td>
<td>1</td>
<td>providing lounges to watch television</td>
<td>2.77</td>
<td>0.55</td>
<td>92.30 %</td>
<td>high</td>
</tr>
<tr>
<td>22</td>
<td>2</td>
<td>provide educational movies</td>
<td>2.08</td>
<td>0.92</td>
<td>69.30 %</td>
<td>medium</td>
</tr>
<tr>
<td>13</td>
<td>3</td>
<td>provide books and journals at the library</td>
<td>1.77</td>
<td>0.93</td>
<td>59 %</td>
<td>medium</td>
</tr>
<tr>
<td>34</td>
<td>4</td>
<td>provide daily newspapers</td>
<td>1.59</td>
<td>0.89</td>
<td>53 %</td>
<td>low</td>
</tr>
</tbody>
</table>

Juveniles satisfaction of education averages are observed in Table 5, scores range (1.59-2.77) i.e. the level ranges from high to low, the need of “providing lounges to watch television” came first (mean 2.77, standard deviation of 0.55), followed by “displaying educational movies”, and “providing daily newspapers” came fourth (mean of 1.59, and standard deviation of 0.89).

To answer the second question “To what extent do the variables of social status of the juvenile family, his age, and parent’s educational level, length of sentence, number of visits, and number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in the social satisfaction extent of the juvenile?” multiple correlation coefficients, square of correlation coefficients, sum of regression squares, and standard weights of the independent variables using the progressive input method (stepwise) are calculated as observed in Table 6.

Table 6. Coefficient of multiple correlation, explained variation ratio, cumulative explained variation ratio of (satisfying social needs) due to demographical variables

<table>
<thead>
<tr>
<th>independent variables</th>
<th>coefficient of multiple correlation</th>
<th>explained variation ratio</th>
<th>cumulative explained variation ratio</th>
<th>F value</th>
<th>A value</th>
<th>B value</th>
<th>statistical significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>0.42</td>
<td>0.18</td>
<td>0.18</td>
<td>16.13</td>
<td>42.75</td>
<td>-3.40</td>
<td>0.00</td>
</tr>
<tr>
<td>Age and length of sentence</td>
<td>0.59</td>
<td>0.17</td>
<td>0.35</td>
<td>18.88</td>
<td>53.14</td>
<td>-4.023</td>
<td>0.00</td>
</tr>
<tr>
<td>Age, length of sentence and fathers’ education</td>
<td>0.66</td>
<td>0.27</td>
<td>0.44</td>
<td>11.67</td>
<td>53.49</td>
<td>-4.079</td>
<td>0.00</td>
</tr>
<tr>
<td>Age, length of sentence, fathers’ education and the number of rehabilitation</td>
<td>0.76</td>
<td>0.30</td>
<td>0.57</td>
<td>22.41</td>
<td>56.24</td>
<td>-2.907</td>
<td>0.00</td>
</tr>
</tbody>
</table>
Correlation between juvenile age and social satisfaction level (dependent variable) scored 0.42 as observed in Table 6 cumulative explained variation ratio of 0.18. Table 4 also presented the Coefficient of multiple correlation of juvenile age and length of sentence with level of social needs satisfaction scoring 0.59, and cumulative explained variation ratio of 0.35. Coefficient of multiple correlation of juvenile age, length of sentence and father’s educational level reached 0.66, and cumulative explained variation ratio of 0.44. Coefficient of multiple correlation of juvenile age, length of sentence, father’s education level and number of rehabilitation programs reached 0.76, and cumulative explained variation ratio of 0.57. Coefficient of multiple correlation of juvenile age, length of sentence, father’s educational level, number of rehabilitation programs and the number of juveniles in the same room reached 0.77, and cumulative explained variation ratio of 0.60. All correlation coefficients are statistically significant at $\alpha = 0.05$.

To answer the third question “To what extent do the variables of social status of the juvenile family, his age, parent’s educational level, length of sentence, number of visits, number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in self-awareness of the juvenile?” multiple correlation coefficients, square of correlation coefficients, sum of regression squares, and standard weights of the independent variables using the progressive input method (stepwise) are calculated as observed in Table 7.

Table 7. Coefficient of multiple correlation, explained variation ratio, and cumulative explained variation ratio on (level of self-awareness) due to demographical variables

<table>
<thead>
<tr>
<th>independent variables</th>
<th>coefficient of multiple correlation</th>
<th>explained variation ratio</th>
<th>cumulative explained variation ratio</th>
<th>F value</th>
<th>A value</th>
<th>B value</th>
<th>statistical significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>father education</td>
<td>0.42</td>
<td>0.42</td>
<td>0.18</td>
<td>16.22</td>
<td>37.09</td>
<td>-3.55</td>
<td>0.00</td>
</tr>
<tr>
<td>father education and number of rehabilitation programs</td>
<td>0.60</td>
<td>0.06</td>
<td>0.36</td>
<td>21.00</td>
<td>48.03</td>
<td>-6.42</td>
<td>0.00</td>
</tr>
<tr>
<td>father education, the number of rehabilitation programs and juvenile age</td>
<td>0.67</td>
<td>0.38</td>
<td>0.44</td>
<td>10.53</td>
<td>64.34</td>
<td>-3.28</td>
<td>0.00</td>
</tr>
<tr>
<td>father education, the number of rehabilitation programs, juvenile age and length of sentence</td>
<td>0.72</td>
<td>0.14</td>
<td>0.52</td>
<td>11.62</td>
<td>72.94</td>
<td>-4.05</td>
<td>0.00</td>
</tr>
</tbody>
</table>
father education, the number of rehabilitation programs, juvenile age, length of sentence and social status of the parents
0.76 0.44 0.58 9.07 76.3 -4.12 0.001

Correlation between father’s educational level and self-awareness (dependent variable) scored 0.42 as observed in Table 7, with a cumulative explained variation ratio of 0.18. Table 7 also presented the Coefficient of multiple correlation of father’s educational level and the number of rehabilitation programs which a juvenile joined with the level of self-awareness scored 0.60, and cumulative explained variation ratio of 0.36. Coefficient of multiple correlations of father’s educational level, the number of rehabilitation programs, juveniles’ age with self-awareness reached 0.67, and cumulative explained variation ratio of 0.44. Coefficient of multiple correlation of father’s educational level, the number of rehabilitation programs, juvenile’s age and length of sentence with self-awareness reached 0.72, and cumulative explained variation ratio of 0.52. Coefficient of multiple correlation of father’s educational level, the number of rehabilitation programs, juvenile’s age, length of sentence and social status of the juvenile’s family with self-awareness reached 0.76, and a cumulative explained variation ratio of 57.7%. The family social status added 0.58 to the overall variance of self-awareness. All correlation coefficients are statistically significant at $\alpha = 0.05$.

To answer the fourth question of “To what extent do the variables of social status of the juvenile family, his age, parent’s educational level, length of sentence, number of visits, number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in modifying of personal behaviour?” multiple correlation coefficients, square of correlation coefficients, sum of regression squares, and standard weights of the independent variables using the progressive input method (stepwise) are calculated as observed in Table 8.

Table 8. Coefficient of multiple correlation, explained variation ratio, and cumulative explained variation ratio on (modifying personal behaviour) due to demographical variables

<table>
<thead>
<tr>
<th>independent variables</th>
<th>coefficient of multiple correlation</th>
<th>explained variation ratio</th>
<th>cumulative explained variation ratio</th>
<th>F value</th>
<th>A value</th>
<th>B value</th>
<th>statistical significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>father education</td>
<td>0.42</td>
<td>0.42</td>
<td>0.18</td>
<td>16.22</td>
<td>37.09</td>
<td>-3.55</td>
<td>0.00</td>
</tr>
<tr>
<td>father education and juvenile age</td>
<td>0.64</td>
<td>0.16</td>
<td>0.41</td>
<td>20.14</td>
<td>88.57</td>
<td>5.8-</td>
<td>0.00</td>
</tr>
<tr>
<td>father education, juvenile age and family social status</td>
<td>0.74</td>
<td>0.38</td>
<td>0.55</td>
<td>21.87</td>
<td>100</td>
<td>8.8-</td>
<td>0.00</td>
</tr>
<tr>
<td>father education, juvenile age, social status of the family and the number of rehabilitation programs</td>
<td>0.82</td>
<td>0.30</td>
<td>0.67</td>
<td>28.04</td>
<td>111.9</td>
<td>8.7-</td>
<td>0.00</td>
</tr>
<tr>
<td>father education, juvenile age, social status of the family and the number of rehabilitation programs</td>
<td>0.85</td>
<td>0.44</td>
<td>0.73</td>
<td>14.06</td>
<td>105.6</td>
<td>8.6-</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Table 8. Coefficient of multiple correlation, explained variation ratio, and cumulative explained variation ratio on (modifying personal behaviour) due to demographical variables
Correlation between father’s educational level with modifying personal behaviour (dependent variable) scored 0.50 as observed in Table 8, with a cumulative explained variation ratio of 0.25. Coefficient of multiple correlation of father’s educational level and juveniles age with modifying personal behaviour scored 0.64, and cumulative explained variation ratio of 0.41, and it is statistically significant at $\alpha = 0.05$. Coefficients of multiple correlation of father’s educational level, juvenile’s age, social status of the parents and the number of rehabilitation programs provided to the juvenile with modifying personal behaviour scored 0.82, and cumulative explained variation ratio of 0.67. Coefficient of multiple correlations of father’s educational level, juvenile’s age, social status of the parents, the number of rehabilitation programs provided to juvenile’s educational level and the number of visits from the juvenile’s family with modifying personal behaviour scored 0.87, and cumulative explained variation ratio of 0.76. Coefficient of multiple correlations of father’s educational level, juvenile’s age, social status of the parents, the number of rehabilitation programs provided, juvenile educational level, the number of visits from the juvenile’s family and mother’s educational level with modifying personal behaviour scored 0.88, and cumulative explained variation ratio of 0.78. All correlation coefficients are statistically significant at $\alpha = 0.05$.

4. Discussion

The first question was “What is the satisfaction level of sociopsychological health care, shelter and educational needs provided to delinquent juveniles in juvenile’s centres?” The results revealed that the averages of satisfaction level of sociopsychological needs provided to juveniles ranged between 2.07-2.56, all needs scored a medium level except for the “comprehensive medical check-ups” which scored high and was ranked first with an average 2.56, followed by “proper medications” and “nurses providing health care services” scored sixth and last (mean 2.07).

Average shelter satisfaction ranged between 1.79-2.63, i.e. the level ranges from high to medium, the need of “maintain cleanliness of toilets” is ranked first followed by “providing healthy diet” and “providing snakes between the three main meals” was ranked twelfth (mean 1.79).

Averages of satisfaction of education ranged between 1.59-2.77, i.e. the level ranged from high to low, the need of “providing lounges to watch television” came first (mean 2.77, standard deviation of 0.55), followed by “displaying educational movies”, and “providing daily newspapers” came fourth (mean of 1.59, and standard deviation of 0.89).

To guarantee the development of children’s sociopsychological abilities such as health care, shelter and education they should be prioritized, particularly when the aim is to develop delinquent’s juvenile’s abilities. Juveniles need
every family member, organization (school, caring home or a centre) to participate in rearing them in a safe and sound manner in the community especially if delinquency is their characteristic.

It may be argued that shelter needs satisfaction provided in juvenile’s centres scored medium in terms of medication, isolation and medical check-up. This result agreed with Al Romaih (2004) study, which concluded that the basic services provided such as toilets cleanliness and proper meals scored medium in juvenile’s centres in Saudi Arabia. Reston (2014) study revealed that there is an obvious weakness in mental health care provided to juveniles but they obtain the primary health care.

Although the educational needs provided to juveniles scored medium, but it agrees with the study of Andera (2008) which concluded that there is weakness in the level of educational needs satisfaction in America, and the study of Marsha (2008) which concluded that education in juveniles centres is weak in general; they are provided with one teaching hour per day and only juveniles aged 12-17 years attend it. Marsha (2008) confirmed that over crowdedness in classes where 70 of the juveniles are taught, teachers violence toward them and not allowing them to speak in class caused this weakness. Lengvinas (2010) indicated that delinquents juveniles teaching in reformatories creates an environment that helps them to enjoy learning, engage in learning issues and helps to maintain their motivation toward learning. Bondurant (2014) indicated to the relationship between high school drop outs and criminal behaviour, and that males are more likely to be convicted in a crime.

The second question of the study is “To what extent do the variables of social status of the juvenile family, his age, and parent’s educational level, length of sentence, number of visits, and number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in the social satisfaction extent of the juvenile?” Results show that correlation coefficient between juvenile’s age and the social satisfaction level (dependent variable) scored 0.42, cumulative explained variation ratio of 0.18. The results also revealed that multiple variance between juvenile’s age and sentence length with the social satisfaction level scored 0.59, cumulative explained variation ratio of 0.35. And that variance of juvenile’s age, sentence length, father’s educational level and the number of rehabilitation programs provided scored 0.76, cumulative explained variation ratio of 0.57. Coefficient of multiple correlations of juvenile’s age, sentence length, father’s educational level, number of rehabilitation programs provided and the number of juveniles in the room scored 0.77, cumulative explained variation ratio of 0.60. All correlation coefficients are statistically significant at α = 0.05.

When a juvenile age increased his social needs increased, this may be explained by the juveniles’ need to satisfy his needs in Centres which increases with increased age. This indicates that the juvenile depends on the social environment of the Centre to satisfy social needs, especially with older juveniles. Age and sentence length explain how social needs of the juvenile within the Centre, that is, the higher ages of juveniles and sentence length increased social needs of the juvenile within the Centre, due to the length of stay in the Centre, which make a juvenile dependent on the social environment within the Centre. As for the father’s educational level and his role in satisfying social needs of the juvenile, it is linked to the cultural and educational level of the juveniles’ family especially his father, and the father communication with his son at the Juvenile Centre. The number of rehabilitation programs has contributed to the juvenile increased satisfaction of social needs, in addition to the factors mentioned above these programs provide communication and interaction opportunities with others, and the programs seek to rehab juveniles in all aspects including the social aspect.

The number of juvenile’s in the same room contribute to satisfy social needs in Centres, because juveniles spend a long time with each other communicating through playing or participating in group activities.

Generally the variables of juvenile age, length of sentence, the father’s educational level, the number of rehabilitation programs, and the number of juveniles in the same room together contribute in satisfaction increased level of juveniles social needs at the Centre scored 59.8%, that is, these variables combined are responsible of 59.8% of the total variation in satisfaction level of social needs. Jajko (2013) said that risk factors such as sexual delinquency, drug abuse, social isolation lack of intimate relations with peers, exposure to violence, chronic anger problems, behaviour problems in school, and the problematic relationship between the parents and the juvenile are one of the characteristics of delinquent juvenile.

The third question of the study is “To what extent do the variables of social status of the juvenile family, his age, parent’s educational level, length of sentence, number of visits, number of juveniles in the room, his educational level and the number of rehabilitation programs all together in explaining the difference in self-awareness of the juvenile”. Results show that correlation coefficient between father’s educational level with self-awareness and personal structure (dependent variable) scored 0.42, with a cumulative explained variation ratio of 0.18. Coefficient of multiple correlations of father’s educational level and the number of rehabilitation programs which a juvenile joined with the level of self-awareness scored 0.60, and cumulative explained variation ratio of 0.36.
Coefficient of multiple correlations of father’s educational level, the number of rehabilitation programs, and juvenile’s age with self-awareness reached 0.67, and cumulative explained variation ratio of 0.44. Coefficient of multiple correlation of father’s educational level, the number of rehabilitation programs, juvenile’s age and length of sentence with self-awareness reached 0.72, and cumulative explained variation ratio of 0.52. Coefficient of multiple correlation of father’s educational level, the number of rehabilitation programs, juvenile’s age, length of sentence and social status of the juvenile’s family with self-awareness reached 0.76, and a cumulative explained variation ratio of 57.7. All correlation coefficients are statistically significant at \( \alpha = 0.05 \).

This indicates that the father’s educational level contribute in self-awareness and personal structure development of juveniles by 18%, i.e. higher educational levels of the father increase self-awareness of a juvenile, because the fathers education is reflected in the style of parenting, leading to sound upbringing that develops personalities of juveniles properly. The increase in the number of rehabilitation programs that the juvenile attend in the Centre contribute to increased self-awareness, leading to the formation of a positive view about the self.

The existence of living unseparate parents increases their role in caring for their children, and providing psychological support for them. But if the juvenile losses one or both of his parents it may lead to homelessness and delinquency, but at the same time it may lead to adopting more responsibilities in life. Juveniles develop responsibility and self-awareness while admitted in juveniles Centers, provided with rehabilitation. It should be noted that increased age of the juvenile increases personal self-consciousness, because he develops psychologically, emotionally, mentally and physically, and structures his personality.

In the same respect Wie (2014) concludes that children in single-parent families are more likely to engage in property crimes and violent crimes, and biological children are more likely to engage in crimes of violence. Fraser (2014) confirms positive role of the family in reducing and treating juvenile’s orientation to delinquency.

The fourth question of “To what extent do the variables of social status of the juvenile family, his age, parent’s educational level, length of sentence, number of visits, number of the juveniles in the same room, his educational level and the number of rehabilitation programs all together explain the difference in modifying personal behaviour?” results of correlation coefficient between father’s educational level and modifying personal behaviour (dependent variable) scored 0.50, with a cumulative explained variation ratio of 0.25. Coefficient of multiple correlation of father’s educational level and juveniles age with modifying personal behaviour scored 0.64, and cumulative explained variation ratio of 0.41, and the result is statistically significant at \( \alpha = 0.05 \). Coefficients of multiple correlation of father’s educational level, juvenile’s age, social status of the parents and the number of rehabilitation programs provided to the juvenile with modifying personal behaviour scored 0.82, and cumulative explained variation ratio of 0.67. Coefficient of multiple correlations of father’s educational level, juveniles age, social status of the parents, the number of rehabilitation programs provided to the juvenile and the juvenile educational level with modifying personal behaviour scored 0.85, and cumulative explained variation ratio of 0.73. Coefficients of multiple correlation of father’s educational level, juvenile’s age, social status of the parents, the number of rehabilitation programs provided juvenile educational level and the number of visits from the juvenile’s family with modifying personal behaviour scored 0.87, and cumulative explained variation ratio of 0.76. Coefficient of multiple correlations of father’s educational level, juvenile’s age, social status of the parents, the number of rehabilitation programs provided, juvenile educational level, the number of visits from the juvenile’s family and mother’s educational level with modifying personal behaviour scored 0.88, and cumulative explained variation ratio of 0.78. All correlation coefficients are statistically significant at \( \alpha = 0.05 \).

An apparent connection between the juveniles’ age and ability to modify personal behaviour exists. Getting older increases mental, social and emotional development of the juvenile, this makes him understand what it going around, and identify, modify and change his behaviour to consist with his view of himself. The results of Al Musalam (2001) study proved that younger ages are more vulnerable to delinquency compared with older ages. The higher levels of father’s education increases the child’s opportunity to have a sound parenting that increases his ability to distinguish between right and wrong, and be able to fine tune and adjust behaviours toward himself and towards the surrounding environment. Al Musalam results (2001) indicated that the juvenile who lives with both parents is less vulnerable to delinquency compared with the juvenile who lives without his parents. The rehabilitation programs increase juveniles awareness of the social environment, it also increase his ability to adapt his own behaviour, controls behaviour, stemming from his awareness and responsibility. This proves success of rehabilitation programs in juvenile centres, its impact in achieving the goals of the juvenile’s centres. The role of the number of visits to the juvenile by his family was influential in increasing commitment and response for educational and rehabilitative and Correctional Centre, this leads to have a better view of the self by the juvenile, this in turn leads to self-healing and modifying personal behaviour.
Recommendations

The study recommends to increase supervision on juveniles personal hygiene periodically; provide bedding and blankets to everyone, increase serving of snacks between main meals in juvenile’s centres, providing daily newspapers for juveniles because the level of this service is low; provide a dentist in juvenile centres, and conduct further studies in this domain, due to the rare studies on both Arab and foreign levels.

References


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