Influence of children characteristics on the performance of Juvenile rehabilitation centres in Nakuru County, Kenya

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ABSTRACT

This study sought to examine the influence of children's characteristics on the performance of Kenyan juvenile rehabilitation centers. The study was influenced by the Social Disorganization Theory. It also adopted a correlational research design involving a mixed-method approach in both data collection and data analysis. The population consisted of 64 staff working in 6 juvenile rehabilitation institutions in Nakuru County and 409 children admitted to these institutions. Purposive sampling techniques were employed to select the respondents leading to a sample size of 10 staff members and 42 juvenile children. The research instruments were a questionnaire and an interview guide. Quantitative data were analyzed using percentages, frequencies, Pearson correlation independent sample t-test, and ANOVA. Qualitative data were analyzed using the thematic content analysis technique. The results established that the age and gender of the children did not have a significant influence on performance but the children's socio-economic background and family support had a significant influence. The study recommended that the family should be engaged in the rehabilitation process of the children.

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Introduction

The Juvenile Justice System (JJS) is the structure developed to deal with children mainly between the age of 10 and 18 years involved in crimes and deviant behaviours. The establishment of the JJS is founded on the rationale that children warrant a legal system that is separate from adults' legal system because of their distinct psychosocial and developmental needs. The main object of the JJS is to rehabilitate children who are engaging in delinquent behaviours. Through the JJS, the state assumes parenting responsibility for a child who has been involved in deviant behaviour until when they are reformed or when they become adults.

The concept of JJS was conceived in the United States of America in 1899 following psychological researches showing that children are fundamentally different from adults in terms of their capacity to make sound judgment, comprehend the consequences of their actions, and understand the reality of committing crimes (Thompson & Morris, 2016). Prior to this period, children were viewed as miniature adults and were subjected to similar procedures as adults when they committed offenses. The USA JJS emphasised on teaching and developing trade skills among juveniles. It comprises of three main institutions: juvenile courts, new reformatories, and house of refuge. Decker (2019) observed that the JJS in the USA had performed dismally in terms of reforming delinquents marked by high rates of recidivism among children who went through the system. Further recommended increase in funding aimed at financing data driven community-based initiative for rehabilitating juveniles.

In most European Countries, the concept of JJS is entrenched by the United Nation's Convention of the Rights of the Child of 1989 (CRC) that has been ratified by all countries in Europe (Dunkel, 2014). This convention emphasises the creation of a separate legal system for the child and makes it clear that the purpose of the JJS should be to promote the best interest of the child. The performance of JJS in Europe varies from one country to another. In Italy, JJS are largely understaffed preventing effective implementation of rehabilitation programmes (Souverein et al., 2019). Netherland, on the other hand, has a high quality JJS that incorporates a wide

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range of strategies for rehabilitating young offenders including providing mental health care. As a result, the number of juvenile incarcerations declined from 1,240 to 505 between 2010 and 2017.

The Chinese juvenile process is less formal than the adult trial process and emphasises on both legal and educational issues (Zhang & He, 2018). The primary objective of the Chinese system is to educate offenders rather to punish them. The Chinese JJS has realised relative success in terms of reducing juvenile crimes and recidivism (Young, Greer, & Church, 2017). The success can be attributed to the upgrade in the judicial processes and development of innovative rehabilitation programmes such as summer camps. In Africa, most of the studies on JJS have been conducted in South Africa. The JJS in South Africa transitioned from punitive to restorative justice in 1995 when the Apartheid era came to an end (Swanzen & Harris, 2012). The system also has a strong working relationship with mezzo structures at the community levels such as schools and churches (Roestenburg & Oliphant, 2012). This cooperation has been instrumental in promoting the effective rehabilitation of delinquent children.

In Kenya, the juvenile justice system comprises of several institutions such as courts, juvenile detention facilities, line remand homes, juvenile prison and the children department (Wambugu et al., 2015). The courts are responsible for making determination on whether a child is culpable of committing an offense. Pending the determination of their case, children are temporary detained in remand homes. There are about 14 juvenile remand homes in Kenya with a capacity of 2,500 children (Mucemi, 2010). From remand home, children may be committed to rehabilitation schools, borstal institutions, or adult prisons. The rehabilitation schools are under the Department of Children Services while the borstal institutions are in the purview of the Department of Correctional Services (Okech, 2017).

Although there has been a paradigm shift in the juvenile rehabilitation practices in Kenya from the punitive model to the egalitarian and restorative model, policies that govern the assessment of juvenile offenders have not undergone similar transformation. Children who find themselves in conflict with the law are still processed by the Courts of Law. Waitherero (2011) also observed that the legal framework governing the JJS in Kenya has failed to define the minimum age of criminal responsibility, do not guarantee access to legal representation by children, and lack child friendly facilities such as courts, rehabilitation homes, remands, and trained personnel. Conditions in the juvenile homes and remand vary but majority experience challenges such as poor sanitation amenities, rundown facilities, inadequate bedding materials, poor recreational facilities, and use of corporal punishment (UNICEF, 2017).

The government of Kenya has made some efforts to improve the juvenile justice system through reforms in the sector. One of the reforms entails transforming the approved schools that operated on punitive model of juvenile justice into rehabilitation centres (Odera, 2013). However, it seems that such efforts have not been working as expected. They are marked by increased number of dropouts and recidivism in the juvenile rehabilitation centres. Studies by Walker and Bishop (2016), Steinberg, Cauffman and Monahan (2015), Bright, Hurley, and Barth, (2014) suggest that the performance of rehabilitation institution is linked to children characteristic. However, few such studies have been conducted in the juvenile rehabilitation institutions in Kenya as well as other developing countries. Thus, this study sought to address this research gap by assessing how the characteristics of admitted children determine the performance of juvenile rehabilitation centres in Nakuru County, Kenya.

Literature Review

Theoretical Background

The study was guided by the social disorganization theory. Social disorganization theory was developed to explain risk factors for engagement in criminal behaviour. The theory contends an individual's risk of engaging in criminal behaviours increases when there is low level of social control (Bellair, 2017). Social control is in turn a function of various factors including neighbourhood conditions, socioeconomic condition, cultural standards, age, gender, and race. For instance, poor socioeconomic conditions may make a person desperate in terms of fulfilling basic needs thus disruption social control and order. The theory also posits that the factors that determine the level of social control also interact to shape the prevalence of criminal behaviours (Kubrin & Mioduszewski, 2019).

For instance, Bellair (2017) observed that there was an association between neighbourhood conditions, socioeconomic status, and race in the USA that increased the risk of engaging in criminal behaviours by African American and Hispanic youths. Although social disorganization theory was developed to explain factors that contribute to crime, it has also found application in informing the design of rehabilitation programme. The theory suggests that for rehabilitation programme to be effective, they must consider ecological variables that predispose a person to crime such as age and socioeconomic variables (Karimu, 2015). The programme must be tailored to address these variables meaning that they should be personalized.

This theory is relevant to the current study as it illustrates the connection between the characteristics of juvenile delinquents and the performance of the JJS in reforming the formers' behaviours. According to the theory, the demographic and ecological conditions of a child determine his or her probability of engaging in crime. These conditions also determine their chances of returning to criminal ways after being rehabilitated. Consequently, the theory suggests that to understand factors that shape the performance of juvenile justice system in Nakuru County, the study should interrogate the characteristics of children that go through the system such as their age, gender, culture, and socioeconomic background.

Empirical Review

Juvenile rehabilitation performance is the successful reformation of children who were previously engaging in deviant behaviour. Studies focusing on the juvenile justice system have used different indicators to assess juvenile rehabilitation performance. The most commonly used indicator is recidivism, the tendency by an ex-delinquent to return to criminal ways after undergoing rehabilitation. Recidivism is a strong indicator of performance as it shows that whatever interventions that were administered to the child did not change their behaviour (Lipsey et al., 2010). In the study by Thompson (2016) that focused on Riverside and Orange Counties of the USA, the effectiveness of rehabilitative programmes in reforming juveniles was assessed using the recidivism rate. However, he also observed that there were several limitations associated with the use of recidivism as a measure of rehabilitation effectiveness. One of the limitations was that few institutions had accurate data on recidivism since they had little capacity to track all juveniles that they released. Some institutions did not collect recidivism data. The second limitation was in the conflicting conceptualisation of recidivism where some institutions conceptualised it as a time when a juvenile is re-arrested and others as a period when a child is re-convicted.

Another indicator that may be useful in assessing juvenile rehabilitation performance is knowledge and skill acquisition. Young et al. (2017) argues that involving juvenile delinquents in skill-based and education programmes is a central aspect of a successful rehabilitation. This indicator was applied in the study by Walker and Bishop (2016) that focused on 14 communities and secure juvenile placements centres. The pre-test and post-test experimental design was used where the skills of 637 juvenile delinquents were assessed by 10 independent raters in two intervals. The first rating (pre-test) was done 45 days after the children's admission to the centre while the second rating (post-test) was done 30 days before the children's release. The study mainly focused on assessing the acquisition of socio-emotional skills such as goal setting, consequential thinking, dealing with others, problem solving, dealing with distress, aggression control, and impulse control (Walker & Bishop, 2016). From the study, it is evident that acquisition of skills offers a viable measure of rehabilitation performance. The study highlights the complexity of using this measure including the use of the experimental design and large number of raters, which can be time and resource consuming. In addition, deciding the type of skill to assess may also be challenging given that children learn a wide range of skills in the rehabilitation programmes.

Rehabilitation performance may also be measured by assessing attitudinal change among committed children. Young et al., (2017) asserts that for law, and rehabilitation programme to be effective in preventing future involvement in crime, its activities must lead to improvement in areas such as the child self-belief, self-esteem, beliefs regarding crime and its consequences, beliefs regarding the legitimacy of the law, and life aspirations. This measure was applied in the study by Odera (2013) which focused on rehabilitation centres in Nairobi County, Kenya. Mantey and Dzeto (2018) also observed that the attitude of juveniles towards the rehabilitation institution and program is also a central indicator of rehabilitation performance. It was argued that juveniles who had little confidence in the rehabilitation system were less likely to develop desired outcomes as they are bound to resist the transformation process. However, they also observed that 95% of the committed children were remorseful of the actions that led to their confinement, which also illustrated a change in attitude.

The reviewed studies showcase that rehabilitation performance can be evaluated from different perspectives and using different indicators. To ensure a comprehensive assessment of the rehabilitation performance of the juvenile justice system in Nakuru County, the current study combined different measures including recidivism (proportion of juveniles who are returned to correctional facilities after release), skill acquisition, and attitudinal change. The study intended to evaluate how these performance aspects are shaped by the characteristics of children committed in the centres.

It has been observed that juveniles respond differently to rehabilitation efforts (Lipsey et al., 2010). Some children respond better than others to the same rehabilitation interventions. This means that difference in outcomes boils down to the individual characteristics of the children. As Day and Howells (2017) explained, rehabilitation is a learning process where different offenders exhibit different responses. The response of an offender is shaped by a myriad of variables such as age, gender, ethnicity, socio-economic status, and disability.

The role of children's characteristics in determining rehabilitation performance was demonstrated in the study by Walker and Bishop (2016) that focused on 637 youths from juvenile placement centres in the USA. The study assessed skills acquisition among the children and associated factors. Results showed that there was a significant association between the age of the children and skill acquisition with older children demonstrating greater likelihood of acquiring skills than younger children. Another variable that was positively associated with acquisition of skills was the children's contact with parents. Although this study illustrates the relationship between children's characteristics and rehabilitation outcomes, the fact that it was conducted in the USA where the situation is different from Kenya in terms of resources and culture means that this finding may not reflect the circumstance in Kenya.

In another study, Steinberg et al., (2015) found out that successful rehabilitation of serious juvenile offenders was influenced by the psychosocial maturity of the child. The study was longitudinal in nature and entailed following up 1,300 serious juvenile offenders for a 7-year period after their conviction. Results showed that offenders whose criminal behaviour persisted through the 7 years after conviction had maturity deficit as compared to those who abandoned criminal ways when they transitioned to adulthood. On the other hand, Mulvey, Schubert and Chassin (2010) findings indicated that substance use had a major impact on rehabilitation outcomes of juvenile offenders. Results showed that offenders who were using recreational substances were more likely to return to criminal

activities after release from juvenile correctional facilities as compared to those who did not use substances such as alcohol, marijuana, and khat.

Bright et al. (2014) found out that there was an association between gender and rehabilitation outcome in a sample of 5000 juveniles in different intensive-in-home services for youths in the USA. Results showed that while the overall recidivism rate was 26%, it was 29.2% for boys and 20.2% for girls. Other factors that were linked with rehabilitation outcomes were substance abuse with youth who had history of substance use being 1.18 times more likely to resume criminal activities and history of status offense (Bright et al., 2014). Gender may also interact with other factors that are unique to individual offenders to shape the success of the rehabilitation process. This premise is demonstrated in the study by Conrad et al., (2014), where it was found out that history of sexual abuse was the most salient risk factor for recidivism among female juvenile offenders. Results showed that girls who gave experienced sexual abuse were more likely to continue with deviant behaviours even in adulthood. The findings by Conrad et al. (2014) point to the need for JJS to develop tailor-made programmes for female juvenile offenders with history of sexual abuse that would help them overcome their experiences.

Another child-specific characteristic that is associated with rehabilitation outcome is the child socio-economic background. This relationship has been documented in the study by Sickmund and Puzzanchera (2014), which found out that children who grow up in communities or families that have little socio-economic resources have a greater likelihood of engaging in delinquent behaviours than those who live in affluent communities or families. The timing of exposure to poverty is also a major determinant of the children behaviours with children who are exposed to poverty at an early age (6-11 years) being more likely to engage in deviant behaviours than children who are exposed to poverty at later stages of childhood (12-17). Although the study by Sickmund and Puzzanchera (2014) connected poverty to the behaviours of children within the community setup, it can also give a pointer regarding how children from different socio-economic background may respond to rehabilitation interventions. Rehabilitation efforts thus need to consider the socio-economic background of the children when administering the rehabilitation interventions.

A different child-specific characteristic that has been linked to rehabilitation success is family involvement and support. Burke, Mulvey, Schubert, and Garbin (2014) observed that family support is one of the three most vital ingredient in the rehabilitation of juvenile, but is also the most difficult to institutionalise. Many JJS lack elaborate methods and system for integrating families in the juvenile rehabilitation process. Garfinkel (2010) noted that a major barrier to parent involvement in the juvenile rehabilitation process is families' little understanding of how they can effectively participate in the rehabilitation process. To many families, the juvenile rehabilitation process usually appears very opaque. Families receive very little information on what takes place at the centre and how they can support the process.

Research and Methodology

The study utilised the correlational research design involving a mixed method approach. The target population of the study were all the 64 staff working for various juvenile justice institutions in Nakuru County namely the Molo Probation and Aftercare, Nakuru Girl's Probation Centre, Nakuru District Probation Centres, Department of Children Services that is in charge of overseeing the activities of the institution, and juvenile court and 409 children that had been admitted at the centre. Two staffs were picked from five institutions using purposive sampling to make a total of 10 staffs. The purposive random sampling technique was used to select 14 children from three centres to make a total of 42 children. The sample for the study thus comprised 52 respondents. Employees and children from the Molo Probation and Aftercare centre were excluded because the centre was used for the pilot study.

Data Collection Instrument

Questionnaires were used to collect data from the children while interview guides were employed to collect information from Staffs. A pilot study was conducted at the Molo Probation and Aftercare Centres with the view of assessing the validity and reliability of the questionnaire. The pilot study involved 10 children and one Staff from the remand home. The content validity of the questionnaire was assessed using the expert judgement method. Criterion validity was improved by dividing the questionnaire into sections that correspond to each study variable and thus ensure that all variables are adequately covered in the questionnaire.

Reliability of the questionnaire was assessed by analysing the pilot test data using the test-retest method. The test gave a correlation coefficient of 0.765, which indicated that the instrument had a high level of reliability. Supporting this is the fact that the children's views in the second round of data collection did not vary significantly from their views in the first round. The test was conducted using the Statistical Package for Social Science (SPSS) version 25.

Data Collection and Analysis Procedures

After obtaining the necessary approvals, the researcher approached the heads of the juvenile institutions to seek their informed consent and organise the distribution of the data collection instruments to both the Staff and children and also identify the staff and children to be interviewed. The Administration Staff of the Centres distributed the questionnaires and interview guide to their selected Staff and children. In two Centres, the data collection instruments were completed and returned to the researcher on the same day. In the remaining Centres, the researcher was asked to pick the completed questionnaires and interview guides on a later date.

Quantitative data was coded assisted by the statistical data package (SPSS) version 25 software. Descriptive statistics such as frequencies, percentages, and means were used to assess the situation in the study setting with respect to each variable of the study. The Pearson correlation test, analysis of variance (ANOVA), and the independent sample t-test were then utilised to examine the association between the independent and dependent variables of the study. Qualitative data on the other hand was analysed using the thematic content analysis technique.

Findings

Out of the 52 individuals who were expected to participate in the study, 49 successfully completed the study marking a response rate of 94.2%. Those who responded included 10 staff (100%) who completed interview guides and 39 (92.9%) children who duly completed their questionnaires. The majority of the children (53.8%) were male while the remaining 46.2% were female. The findings are consistent with Muthomi (2016) who observed that the majority of children in Kenyan juvenile rehabilitation centres are male. Similarly, the sample had more male staff indicate in number (60%) than female (40%). Nonetheless, female voices were adequately captured in the study.

Table 1: Sample Characteristics

Item	Children	Staff
Response Rate	92.9%	100%
Gender	Male = 53.8% Female= 46.2%	Male= 60.0% Female= 40.0%
Age	Mean= 16.3 years Youngest= 14 years Oldest= 17 years	Mean= 36.4 years Youngest= 24 years Oldest= 51 years
Highest Education Level	No education= 5.1% Some primary education= 66.7% Completed primary=17.9% Some secondary education= 10.3%	Completed secondary=10.0% Vocational training= 70.0% University= 20.0%

Source: Field Data (2020)

The children who were involved in the study had a mean age of 16.3 years in age. The youngest was 14 years old while the eldest was 17 years in age. This range is reasonable given juvenile rehabilitation centres in Kenya are only allowed to admit children between the age of 8 and 17 years. The sampling strategy used in this study prioritised children who were older and mature. The mean age for staff was 36.4 years in age with the youngest being 24 years old and the oldest being 51 years in age.

The majority of the children who participated in the study (66.7%) attended primary school but had not completed studies at this level. About 17.9% had completed primary school but had not joined secondary school while 10.3% had joined secondary schools. About 5.1% of the children had not attended any formal schooling. The majority of staff (70%) had vocational level training, 10% had attained secondary level education while 20% had university degrees.

Performance of the Juvenile Rehabilitation Centres

The dependent variable of the study was performance of the juvenile rehabilitation centres. Three indicators were used to assess performance namely recidivism, skill acquisition, and attitude change.

Recidivism

Recidivism was assessed by asking respondents whether they have ever been admitted to another rehabilitation centre before. The majority of the respondents (65%) reported that they had never been admitted to any other rehabilitation centre before while 38% said that they had been to another rehabilitation centre. The findings suggest that recidivism in the rehabilitation centre is about 38%. However, the data may not point directly to the performance of the specific centres that were involved in the study as the respondents were asked to state whether they have been admitted to any other centre. It is possible that those who answered affirmatively may have been admitted to other centres that are currently being studied and thus their recidivism may not precisely indicate the performance of these centres. Nonetheless, the recidivism figure points to the general performance of the juvenile rehabilitation system in Kenya. The recidivism rate obtained in this study is however lower than the 47% documented by Khaemba (2017) in his study while examining juvenile recidivism in Kenyan prisons. This study), however, focused on juvenile prisons that handle individual who have already been convicted. The findings are reinforced by qualitative data provided by the staff through the interview guides. In response to the question that the Staffs was required to rate their centre in terms of number of children that were rehabilitated, one of the Staff responded:

Our centre is quite successful in rehabilitating the children. Most of the children change their ways after leaving the centre. But a few returns to criminal way and are returned to the centre. (Staff3, Interview Guide Data, 2020).

This response was supported by one other Staff who shared that:

The centre helps to transform many children. Some however return to streets because they have no homes and have to survive on their own when they leave the centre. (Staff5, Interview Guide Data, 2020)

Yet another Staff stated that:

The centre has helped many children. Only those who are not ready to change leave the centre without being transformed. (Staff8, Interview Guide Data, 2020).

Skill Acquisition

The performance of the rehabilitation centres was also assessed in terms of skills acquired by the children during their stay at the centre. Young et al., (2017) argue that for rehabilitation institutions to be successful in transforming the behaviours of the juvenile, they must impart skills that the children need to stay away from crime. Apart from skills needed to earn a living, the centres should impart life skills so as to reduce the children's influence by peers and on the contrary enhance the socialisation skills so as to enable the children live in harmony with other members of their communities. In order to assess skill acquisition, the children were asked to indicate whether they had acquired any skills during their stay at the centre. The majority of the respondents INDICATE THE NUMBER (90%) said that they had acquired some skill at the rehabilitation centre. These results are consistent with the study by Odera (2013), who found out that most rehabilitation centres in the country offer educational programmes that seek to impart various types of skills among the children. To further assess the skill acquisition, the children were asked to list some of the skills that they had gained at their centres. The skill that was frequently mentioned by the children was barber and hairdressing (33.3%), followed by tailoring (28.0%), and sports (20.5%). Other skills that were mentioned included cooking and baking (17.9%) and agriculture (12.8%). It striking that all the skills that were identified by the children were occupational skills. The children's responses are further summarised in Figure 1 below

Figure 1: Skills acquired by the Children at the Rehabilitation Centres; *Source: Field Data (2020)*

None of the children referred to social and cognitive skills. However, the presence of programmes aimed at developing such skills was confirmed by the interview data. In response to the question that the interviewees were asked to share on some of the skills that children learn at the centre, one of the Staff responded:

Children learn skills when we have the normal classes for children at different level of education. These classes give the children basic skills that they need to undertake daily activities such as calculations, language, and science. We also offer practical training such as hairdressing and tailoring. (Staff1, Interview Guide Data, 2020).

Another shared:

We have the normal primary and secondary classes. We also offer guidance and counselling for children going through different issues such as substance abuse, domestic violence, and rejection and abandonment. We also have vocational training programmes such as hairdressing. (Staff4, Interview Guide Data, 2020).

In addition, the other sharing was on the aspects of Sports as shared by the Staff below:

We have regular classes where the children have the usual subjects like Maths and English. We also have extracurricular activities like football and volleyball that help some children to nurture their talent in sports. We also offer vocational trainings such as tailoring and baking. (Staff9, Interview Guide Data, 2020)

These findings suggest that the juvenile rehabilitation centres in Nakuru County offer a wide range of programmes aimed at imparting life and occupational skills among the children confined in these centres. Previous studies such as highlighted in the works of Walker

and Bishop (2016) suggest that imparting such skills is vital towards transforming the behaviours of juvenile offenders and reintegrating them into the community.

Attitude Change

The final indicator that was used to assess the performance of juvenile rehabilitation centres was the change in attitude of the children being rehabilitated. Mantey and Dzetor (2018) asserted that to successfully transform the behaviours of juvenile offenders, rehabilitation programmes must be effective in changing the attitudes of the children towards crime and life in general. To assess attitude change, the questionnaire incorporated a set of seven statements and instructed children to indicate whether the statements were true or false. Their responses are summarised in Table 2 below.

Table 2: Children Attitude towards Crime and Life

Statement	True (%)	False (%)
It is understandable to hit someone who insults you	10.3	89.7
People are right to take what is owed to them, even if they have to steal it	7.7	92.3
For a good reason, I would commit a crime	7.7	92.3
I am going to keep all my former friends after leaving this centre	25.6	74.4
I need a lot of luck and assistance to create a better life for myself	35.9	64.1
My circumstances make it impossible for me to be successful in future	28.2	71.8
My circumstances cannot allow me to follow all rules and be nice	46.2	53.8

Source: Field Data (2020)

Results in Table 2 indicate that the majority of the respondents (89.7%) did not agree with the statement that it is understandable to hit someone who insults you. Also, the majority of the respondents (92.3%) also rejected the claim that people are right to take what is owed to them, even if they have to steal it. Another 92.3% refuted the statement that for a good reason, they would commit a crime while 74% of the children said that they were not going to keep their former friends after leaving the centres. These four statements were geared towards assessing the children attitude towards crime. The responses suggest that the majority of the respondents did not have attitude that justify criminal behaviour and thus were less likely to commit crimes when they live the centre.

The last three statements were aimed at assessing the children's attitude towards life. From Table 4.4, the majority of the children (64.1%) rejected the claim that they need a lot of luck and assistance to create a better life for themselves. The finding implies that the majority of the children believe that their life outcomes are within their control rather than based on fate or other people. Similarly, 74% of the children refuted the statement that their circumstances make it impossible for them to be successful in future. This finding implies that the majority of the children still have a positive aspiration towards life. They believe that despite their circumstances, they can create a bright future for themselves. The findings are congruent with the study by Kabiru *et al.* (2013), which found out that the majority of children in Nairobi slums still maintained high aspiration towards life and try to achieve them through education, religion, and residential mobility. Unfortunately, some children try to achieve their aspirations through delinquent actions such as stealing. This suggests that while high life aspiration is a protective factor against delinquent behaviours it can also motivate children to commit crimes.

In the final statement, 53.8% of the children contested the assertion that their circumstances cannot allow them to follow rules and be nice. This implies that the majority of the children hold the belief that their circumstances do not excuse them from adhering to societal rules. However, it is worth noting that the 46.2% who supported this principle is quite significant. This implies that there are still a substantial number of children who would use their circumstances to justify breaking of rules. One of the staff that was interviewed also supported this position that the majority of children change their attitude after going through rehabilitation at the centres as evidenced in the narrative below:

Most of the children leave this place with a transformed attitude. The centres help them to adopt a positive attitude towards life and to take charge of their lives. The counselling sessions also help them to develop a positive view of themselves and life. (Staff2, Interview Guide Data, 2020)

Another Staff also shared that:

Majority of the kids change their attitude once they undergo our rehabilitation programmes. They abandon criminal ways and choose to live productive lives. Our programmes are also designed to improve the self-esteem of the children. (Staff7, Interview Guide Data, 2020).

The interview data suggests that most of the staff is upbeat regarding the success of their programmes in transforming the attitude of the juvenile offenders who are committed in the centres. Most of the interviewees express that the majority of the children have changed their attitude for the better before leaving the centres.

Overall Performance of the Juvenile Rehabilitation Centres

It was essential to obtain an overall performance score for the juvenile rehabilitation centre so as to make it easy to conduct the inferential test. To establish the overall performance score of the juvenile rehabilitation centres, data on the three indicators that were used to assess performance (recidivism, skill acquisition, and change in attitude) was combined to come up with a performance score. Recidivism had one yes-or-no question where “yes” was coded as (0) and “no” was coded as (2) as yes indicated a case of recidivism that is an indicator of poor performance. Skill acquisition also had one yes-or-no question where “no” was coded as (0) and “yes” was coded as (2) since yes signified acquisition of skill which is an indicator of good performance. Attitude change had seven true-or-false questions, with true being coded as (0) and false being coded as (2) because true responses signified attitudes that reinforced crime or were negative towards life.

Using the above coding criteria, the score for each of the nine questions were summed up to obtain an aggregate performance. This means that the overall score ranged between 0 (for children whose responses to all nine questions received a [0] code) and 18 for children who responses to the nine questions received a coding of (2). Table 3 presents key statistics on the overall performance score as computed from the children’s responses.

Table 3: Overall Performance of the Juvenile Justice Centre

Statistic	Value
N	39
Mean score	13.72
Minimum score	5
Maximum score	18

Source: Field Data (2020)

The mean performance score for the juvenile rehabilitation centres was 13.72 out of a highest possible score of 18. The mean score was generally obtained by summing the score obtained for each of the 39 children and then dividing the sum by 39. Since the highest possible score was 18, a score of 13.72 means that the performance of the centres was above average.

Influence of Children Characteristics on Performance of Rehabilitation Centres

The objective of the study was to analyse the influence of children characteristics on the performance of juvenile rehabilitation centres. The study presumed that since children are the recipient of the rehabilitation services, their characteristic is bound to have an implication on the success of the rehabilitation process. Several characteristics were examined including age, gender, social background, and family support.

Influence of Children’s Age on Performance

Literature suggests that there is an association between children’s age and the success of the rehabilitation process. Walker and Bishop (2016) observed that the age of the juvenile offender determines their acquisition of skills during their stay in juvenile rehabilitation institutions. Older children found it easier to acquire the skills that they needed to avoid crime and cope with life challenges.

The aim of this study was to establish whether the age of the children in a given centre has an influence on the performance of the centre in rehabilitating juvenile. This analysis was done by first assessing the mean performance score of the three centres from each data that was collected. Results are presented in Table 4 below.

Table 4: Mean Performance Score of the Centres

Centre	Mean Performance Score
Centre1	12.91
Centre2	14. 58
Centre3	13.64
Total	13.72

Source: Field Data (2020)

The names of the centres are withheld to ensure that they remain anonymous; the codes Center1, Centre2, and Centre3 are used instead. Centre2 had the highest mean performance score (mean=14.58) as rated by child recidivism status, skills acquisition, and attitude change suggesting that it was the best performing centre out of the three that were involved in the study. Centre3 had the second highest mean performance score (mean=13.64) while Centre1 had the lowest score. The next step entailed obtaining the mean

age of children in each centre and using the ANOVA test to determine whether there is a significant difference between the mean ages of children in three centres. Results are presented in Table 5 below.

Table 5: ANOVA of the Mean Age of Children in the Three Centres

Occupation	N	Mean Age	Df	F	p-value
Centre1	14	16.6	2 (between group)	1.321	.141
Centre2	14	16.2	36(within group)		
Centre3	11	15.9	38 (Total)		

Source: Field Data

Centre1 had the highest mean age of 16.6 years followed by Centre2 with a mean age of 16.2 years and lastly Centre3 with a mean age of 15.9 years. There is no clear pattern between the mean age of the children in each centre and the performance of the centres. If there was a relation, the mean age of the children would have followed the pattern that the performance data followed. That is Center2 (which had the highest performance score) would have had either the lowest or the highest mean age followed by Centre3 and Centre1 would be the last. The f-test have a p-value ($p=0.141$) that is greater than the 0.05 level of significance suggesting that there is no significant difference between the mean age of children in the three centres. These findings fail to support previous studies such as by Walker and Bishop (2016), which had suggested the existence of a relationship between the age of children and their rehabilitation process. However, it should be noted that the study by Walker and Bishop (2016) only examined how age influences skill acquisition by children in the rehabilitation centres. The present study has incorporated other rehabilitation outcomes besides skill acquisition including recidivism and attitude change. Furthermore, the findings are supported by the interview guide data where most of the respondents indicated that their centres take care of children of diverse age. For instance, one of the Staff revealed that:

The centre has children of different ages; some are as young as 8 years old but the maximum age we can take is 17 years. (Staff2, Interview Guide Data, 2020).

In addition, another Staff shared that:

The centre does not focus on children of any particular age. Any child between the age of 8 and 15 can be admitted to the centre without discrimination because this is a public facility. (Staff9, Interview Guide Data, 2020).

The narrations suggest that most of the rehabilitation centres are not age specific and thus it would be difficult to determine the extent to which age influences the rehabilitation process.

Influence of Children's Gender on Performance

Another characteristic that was investigated was the gender of the children. The study sought to determine whether the gender of the offenders that a given centre takes care of determines their performance. In order to establish this, the gender distribution of children in each centre was examined. Results are presented in Table 6 below.

Table 6: Distribution of Children in Each Centre by Gender

Centre	Male (%)	Female
Centre1	78.6	21.4
Centre2	71.4	28.6
Centre3	0	100
Total	53.8	46.2

Source: Field Data (2020)

Centre2 that had the highest performance score was dominated by boys (71.4%) while Centre3 that had the second highest performance score was dominated by girls at (100%) because the centre was for girls only Centre1 which had the lowest performance score had the highest percentage of boys at 78.6%. From this data, no particular pattern can be established between gender and the performance of the centres. The centre that had the highest performance score did not have the highest percentage of boys and not have the highest percentage of girls. This implies that the gender of the children does not influence the performance of a rehabilitation centre. This position is reinforced by one of the Staff that was interviewed who shared:

I don't think the gender of a child has a major influence on rehabilitation outcomes. Sometimes you get difficult boys but you can also get girls who are difficult to deal with. It depends on many other factors. (Staff1, Interview Guide Data, 2020).

Another Staff was also of the opinion that:

The gender of the child does not make a very big difference. Both boys and girls respond the same way to the rehabilitation problem. I think the greatest determining factor is a person's commitment and willingness to change rather than the gender. (Staff5, Interview Guide Data, 2020).

These findings fail to support the earlier study by Bright et al. (2014), which found out that there was an association between gender and rehabilitation outcome in a sample of 5000 juveniles in different intensive-in-home services for youths in the USA. Results showed that while the overall recidivism rate was 26%, the recidivism rate was 29.2% for boys and 20.2% for girls. The statistics imply that girls in that study were easier to rehabilitate than boys. Current findings do not however support this hypothesis.

Influence of Children Socio-economic Background on Performance

The third characteristic that was interrogated was the children socio-economic background. The study sought to determine whether the rehabilitation centres deal with children from different socio-economic background and whether this influence the performance of the rehabilitation centres. To assess the socio-economic background of the children, a set of eight statements were developed and included in the questionnaire. The children were required to indicate whether the statements are true or false. The responses are presented in Table 7 below.

Table 7: Children Socio-economic Background

Statement	True (%)	False (%)
I lived in a house that is owned by my family before coming to this centre	20.5	79.5
The house I live in is connected to electricity	53.8	46.2
Where I stay, there is land where my family does farming	12.8	87.2
Where I stay, we have a car that we use for transportation	15.4	84.6
I had access to enough food where I stayed before coming here	60.0	40.0
I had access to proper clothing where I lived before coming to this centre	56.4	43.6
My family has the resources to send me to school	51.3	48.7
The place I lived in was connected to tapped water	41.0	59.0

Source: Field Data (2020)

The majority of the children (79.5%) refuted the claim that they lived in a house that is owned by the family before coming to this centre. House ownership is a major indicator of the socio-economic status of household in the country. This finding suggests that the majority of the children came from household that did not own a house. The majority of the children (53.8%), however, indicated that the house that they lived in was connected to electricity. This finding implies that although the majority of the children do not live in family-owned houses, they have quite decent dwellings as marked by electricity connection. The majority of the children (87.2%) refuted the claim that where they stay, there is farm where their family does farming. This finding point to the fact that majority of the children come from families that do not own land. Similarly, the findings communicate the fact that the majority of the children were not from the rural parts of Nakuru County where most family own land and farming is a major economic activity. In addition, this finding suggests that most of the children live in an urban set-up.

About 84.6% of the children dispelled the assertion that in their home, they have a car that they use for transportation. Car ownership is also a major indicator of socio-economic status of households. This finding suggests that the majority of the children come from low socio-economic households. However, 60% of the children supported the statement that they had access to enough food where they stayed before coming to the centre. Also, 56.4% affirmed that they had access to proper clothing while 51.3% admitted that their families had the resources to take them to school. These statistics suggest that although the majority of the children were from low socio-economic household, they had access to basic needs such as food, proper clothing, and education. The findings indicate that the majority did not live in total state of destitution. Nevertheless, 59% of the children indicated that they lived in houses that were not connected to tap water. This statistic further confirms the low socio-economic status of the households where majority of the children live. Views from the Staff that were interviewed endorsed these findings as captured below:

Most of these children come from poor families. Some of them run away from home because of poverty. (Staff2, Interview Guide Data, 2020)

Supporting this narrative one of the staff shared:

Many of the children that come here are from poor background. The circumstances that they live in exposes them to bad behaviours and crime (Staff6, Interview Guide Data, 2020).

Additionally, another member of staff said:

The children in this place come from poor family. There are some who enjoy being here because they can get basic stuffs such as food and decent shelter. (Staff9, Interview Guide Data, 2020).

These findings are also congruent with the study by Sickmund and Puzzanchera (2014), which found that children from low socio-economic communities and families were more likely to engage in delinquent behaviours than children that grow up in affluent communities and families. Consequently, many of the children that are confined in the juvenile rehabilitation facilities are more likely to be from low socio-economic backgrounds. In order to establish how the socio-economic background of the children influence performance of the rehabilitation centre, an aggregate socio-economic score was computed by coding false responses as

(0) and all true responses as (2). The aggregate socio-economic score was then correlated with the aggregate performance score that were computed in section 4.2.4. Results of the correlation analysis are presented in Table 8 below.

Table 8: Association between Children's Socioeconomic Background and Performance

Socioeconomic score	Performance score	
	Pearson Correlation (r)	.371**
	P-value	.013
	N	34

Source: Field Data (2020)

The correlation coefficient ($r=0.371$) is positive indicating that there is a positive association between the children's socio-economic background and the performance of the rehabilitation centre. This implies that centres that take care of children from high socio-economic families are more likely to be successful in the rehabilitation efforts than centres that take care of children from low socio-economic background. The p-value ($p=0.013$) is lower than the 0.05 level of significance indicating that the relationship between children socio-economic background and performance of the centres is statistically significant. Since the descriptive and qualitative data show that the majority of the children in juvenile rehabilitation centres in Nakuru County are from low socio-economic background, the correlation results stress the need for these centres to develop interventions that are tailored to meet the needs of children from low socio-economic communities in order to improve their rehabilitation performance.

Influence of Family Support on Performance

Another child-specific characteristic that was examined was family support. The study presumed that centres that deal with children with greater family support are more likely to be successful in their rehabilitation efforts than centres that handle children with little family support. Family support was assessed by asking the children to indicate whether they had received any support from their family during their stay at the centre. This was a yes-or-no answer question. The majority of the children (62%) said that they did not receive any support from the family during their stay at the centre. This finding is consistent with the study by Burke *et al.* (2014) who observed that while family support and involvement is essential to the juvenile rehabilitation process, it is very difficult to integrate this element. Garfinkel (2010) also observed that many families do not understand how they can get involved in their children rehabilitation process. Some of the respondents that were interviewed indicated that there was little family support in the juvenile rehabilitation centre. For instance, one said that:

Many parents bring their children to the centre and leave only to show up when their children are being released. Some children are arrested in the streets and their families do not bother to look for them. The children officers have to do the difficult work of looking for their families. (Staff3, Interview Guide Data, 2020).

In support of the above view, another Staff attributed lack of family support to poor parenting skills as the narrative below indicates:

Many parents view this centre as a place where they bring children whom they are unable to live with and control. Most leave their children here and do not bother to follow-up on the progress. (Staff7, Interview Guide Data, 2020).

In order to examine whether there is a statistically significant association between family support and performance of the rehabilitation centre, the mean performance score of children who received family support was compared to the mean performance score of children who did not receive family support. This was carried out utilising the independent sample t-test. The performance scores were computed from the children recidivism status, skill acquisition, and attitude change as described in section 4.4.4. Results of the analysis are presented in Table 4.19 below.

Table 4.19: Association between Family Support and Performance

Category	N	Mean Performance	Mean Difference	DF	T	p-value
Family support	15	15.76	4.62	37	7.689	.043
No family support	24	11.14				

Source: Field Data (2020)

Children who received family support had a mean performance score of 15.76 while those who said that they received no support from the family had a mean performance score of 11.14. The difference in the mean performance score of the two groups was 4.62 in favour of children who received family support. These findings suggest that family support tends to improve rehabilitation outcomes leading to better performance by the rehabilitation centres. The t-test gave a p-value ($p=0.043$) that was less than 0.05 suggesting that the difference between the mean performance score of children who received family support and that of children who did not receive this support was statistically significant. This finding indicates that family support has a statistically significant influence on the performance of the juvenile rehabilitation centres. Consequently, centres need to develop strategies and methods of involving families in the rehabilitation of children in order to increase the success of their rehabilitation programmes.

Conclusions

Findings of this study lead to the following conclusions that the juvenile rehabilitation centres in Nakuru County have performed above average in terms of preventing recidivism among rehabilitated children. Equally, that they have imparted skills and cultivate the attitude that the children need to avoid delinquency. In addition, the study establishes that the performance of the centres is significantly associated with the socio-economic background of the children and family support. Findings revealed that most of the children at the centre are from low socio-economic backgrounds and receive little family support. This could have an adverse effect on the performance of the centres. The study also established that the age and gender of the children do not have a significant influence on the centre's performance. Additionally, the findings have established that the majority of the children being rehabilitated at the centre are from low socio-economic background, which has a negative implication on rehabilitation outcomes.

In view of the above findings, this study recommends that, in order to improve the performance of the centres, the management of the centres and Child Welfare Officers should design rehabilitation programme that address the socio-economic challenges of children in the centres. Further, the management of the rehabilitation centres should find methods and strategy of increasing families' involvement in their children rehabilitation process. The management should educate parents regarding the role that they can play in the children's rehabilitation and the impact that their support can have on rehabilitation outcomes. Equally, they should enhance effective communication between welfare officers and/or counsellors and parents. Parents should also receive counselling on how to handle their children during the stay at the centre and after they are released to join communities. Communities where the children go back should be willing to accept the rehabilitated children and subject them to stigma.

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