



Leading Psychological Factors Affecting Juvenile Delinquency

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DESCRIPTION

Research shows that emotional factors such as anxiety and low self-esteem are associated with juvenile delinquent behaviour. Within some experimental models, the emotional factors of anxiety and self-esteem are considered to be a contributing factor to delinquent behaviour. Furthermore, many of the problems associated with these emotional influences are often related to the use of maladaptive coping strategies under stressful situations. Emotional Intelligence (EI) represents an individual's skill or ability to perceive, understand, and utilize affective information in order to exert control over his or her emotional life. Research demonstrates a relationship between higher Emotional Intelligence and higher self-esteem and a relationship between higher Emotional Intelligence and less anxiety yet, it is not clear what mediating effect coping strategies may play on these relationships. Furthermore, although previous research has demonstrated the influence of maladaptive coping strategies on self-esteem and levels of anxiety, little research exists examining the influence of these strategies within a juvenile delinquent population. Essential to the similar relationships discovered in the literature between self-esteem and anxiety to both Emotional Intelligence and specific coping styles, is the potential for Emotional Intelligence to influence the use of specific coping styles.

Therefore, this study examined the mediating influence of coping styles on the relationship between Emotional Intelligence with both self-esteem and anxiety within an adolescent population of juvenile delinquent males. Extensive studies examining the relationship between self-esteem and delinquency have demonstrated that engagement in delinquent behaviour is associated with low self-esteem. While some researchers have contested this finding with a suggestion that unrealistically high self-esteem is positively correlated with aggression and

delinquency, this disagreement ultimately seems to hinge on a differing conceptualization of self-esteem. One side of the argument is that increasing levels of self-esteem represent a healthy self-regard and the other side of the argument is that self-esteem is viewed on a continuum between low self-esteem and narcissism. There is evidence found that it is possible to draw a distinction between healthy self-regard and narcissistic self-views. Their studies indicated that the effect of low self-esteem on aggression and externalizing behaviours was independent of narcissism and when healthy self-regard was disentangled from narcissism, the relation between low self-esteem and aggression became even stronger.

The measure and identification of anxiety in situations where anger represents a separate response to the specific strain seems predisposed to exclude anxiety from strong correlations with deviant behaviour. These studies seem to view anger and anxiety as completely separate types of emotional response and therefore treat them as separate predictors of deviant behaviours. On the other hand, when anxiety and anger are viewed as linked affective states that create internal pressure for corrective action, one can quickly recognize that anxiety may often be masked by the more overt manifestations of anger.

CONCLUSION

Some psychologists divide Juvenile period into 3 stages: 1- Pre-Juvenile stage that starts at 10 and ends at 12 years old. 2- Primary Juvenile stage from 13 to 16 years old. 3- Secondary Juvenile stage from 17 to 20 or 21 years. Research indicates that juvenile delinquency is a serious and growing problem in the United States, and that a substantial relationship exists between youth diagnosed with an emotional or behavioural disorder and juvenile delinquency.

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