

CHARACTERISTICS OF SOCIO-PATHOLOGICAL PHENOMENA AMONG CHILDREN AND YOUTH IN SLOVAKIA

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Abstract: *The paper deals with the problems of school violence and violence in leisure time of youngsters. It points out the types of anti-social behaviour undermining moral principles of the society and state. The paper outlines the origins and the development of school violence. Characteristics of the perpetrators of violent offences and the victims of violent offences are given. The authors list the forms of bullying as the most frequent type of violent behaviour of juveniles both in and outside schools. They also touch upon the issue of violence against children and youth in families. The most frequent reasons for violence by parents against their children and the forms of such violence are listed. The most frequent forms of parental violence, i.e. abuse, neglect and maltreatment of children and youth, are described. Characteristics of family environments in which parental violence takes place most frequently are given. Specific features of primary, secondary and tertiary prevention in primary and secondary schools in Slovakia are outlined.*

Keywords: *violence, anti-social behaviour, moral principles, commit violence, victims, reasons for violence, primary, secondary and tertiary prevention*

Introduction

Social pathology phenomena are studied by a number of disciplines, e.g. sociology, psychology, pedagogy, medicine and law, to name just a few. That is why social pathology as a branch of science is defined in an inconsistent manner. The term social pathology comes from the Greek word *pathos* meaning suffering, and *logos* meaning a science. In literal translation, this would mean that the subject matter of social pathology is the study of suffering. In fact, social pathology is a discipline that studies undesirable, negative or even dangerous phenomena in society. The subject matter of social pathology is to investigate the reasons for the inception of deleterious, pathological phenomena in human society, their intensity, negative impact on human society, and prevention. There are a number of theories on the causes of pathological phenomena that either seek the explanation in a parallel between a disease and social pathology, or, in

the 19th century, in hereditary predispositions, while contemporary theories emphasize the importance of an integrated effect of biological, mental, social and other influences on pathological behaviour of the individual or a group of people.

The problem of defining the subject matter of social pathology lies in the fact that it is very difficult to define what should be considered as normal. If we are to define what constitute the abnormal, we must inevitably define what constitutes the normal. Some antisocial behaviour may fall within some tolerance limits. Rather than considered as pathological, a large segment of the society, may consider such behaviour as liberal, or something like a habit or a custom.

1. Characteristics of socio-pathological behaviour in children and juveniles

Children and youth grow up in a family environment that exists within some subcultural setting, which is differentiated according to its origin and living conditions. In such subcultures, children learn their social roles and also adopt rules of pathological behaviour in exactly the same way as children in subcultures that abide by social norms of behaviour learn the rules of behaviour expected by the society. The above theory of the onset of a pathological behaviour is termed the “differential association” theory in specialist literature.

An explanation of the reasons for the adoption of pathological behaviour by section of child and adolescent populations is also offered by the theory of individual pathology. Genetic preconditions for pathological behaviour are emphasized. The above theory is currently getting increasing support also from some specialists in genetics.

An explanation for pathological behaviour of a segment of society is also offered by the theory of illegitimate opportunities to reach expected goals. The structural organisation of the society does not allow all its members to attain the same goals. For that reason, some of its members resort to illegal means to attain their goals. They do not follow the set rules and norms of behaviour. Pathological behaviour is explained by rational behaviour, awareness of one’s responsibility for one’s behaviour and the possibility to choose one’s behaviour.

The above are just a few of the theories that purport to explain the origins of pathological behaviour in sections of child and adolescent populations. When studying the causes of pathological behaviour of people, it is also important to study the conditions under which the pathological behaviour occurred.

Socio-pathological behaviour of children and youth need to be investigated by integrating the effects of mental, social, biological, cultural and perhaps also other factors.

Among the most frequent pathological phenomena observed among the children and youth are delinquency, drug abuse, gambling, vandalism and truancy.

In this paper, we discuss in some detail criminality (from Lat. “*crimen*”, guilt, offence, crime, charge of crime, accusation) of children and youth. According to WHO, the psycho-social problems of children and youth are on the increase, and they may take on the following forms: “The passive form, which is demonstrated by various escape

responses, truancy, absenteeism, escape to social isolation, alcohol and drugs abuse, escape to passive entertainment and the world of computers, and even an escape from life by a suicidal behaviour. The aggressive form is manifested by child or juvenile delinquency, acts of violence by individuals and gangs, and even extreme acts of vandalism, terrorism and murders. The borderline form is manifested by instability at school, at work and in interpersonal relationships, including sexual promiscuity. A role is also played by an increase in unemployment rates among the young, a loss of the sense of meaning in life. The most severe manifestation of social maladaptation is self-harm which, in its extreme expression, may take up the form of suicide attempts and even completed suicides (Sejčová, 2002).

Disruptive behaviour disorders among children and youth may even result in a dissocial personality disorder characterized by “behaviour disorders in family relationships”. They are not oppositional and conflict relationships, defiance, but, rather, abnormal behaviour towards a parent (verbal and physical aggressiveness, running away from home, destructive behaviour, thefts from flats). Non-socialized behaviour disorder is manifested by a reclusive, aggressive behaviour and lack of involvement with peer groups. Socialized conduct disorder is apparent in group leadership, group delinquency, in offences in gangs, and various dissocial activities” (Blusková, Szorád, Stempelová, 1996).

From the point of view of the extent to which it violates legal norms, children’s behaviour may be classified as dissocial, asocial and antisocial. Youth with dissocial behaviour acquired socially inappropriate competences.

Asocial behaviour does not conform to social ethics.

Antisocial behaviour damages the society. Youth exhibiting antisocial behaviour demonstrates the highest degree of moral maladjustment.

Typology of criminal behaviour in children and youth. We define the childhood period as a development period ending at the age of fifteen. We will define the next period between 16 and 20 years of age as adolescence. From the criminology point of view, children are considered as minors between the age of 6 and 14 that cannot be criminally prosecuted. The youth are persons between the ages of 15–18 years, and they may be criminally prosecuted. Persons between 18 and 20 years of age are considered persons close to the age of the adolescence from the criminological point of view and can be criminally prosecuted in full for an infringement of legal norms.

The most frequent types of juvenile delinquency in Slovakia are property and violent offences. In 2006, 755 juvenile delinquents were sentenced for property offences. The most frequent form of offence against property were thefts, embezzlement and fraud (Statistical Year Book, Slovak Republic, 2007). The number of property offences committed by Slovak youth has been on the decrease. In 2002, 1323 offenders were sentenced. A large part of property offences committed by juvenile delinquents consisted of car burglaries, stealing bicycles, shoplifting, theft from flats, and stealing from home and schools. In the case of theft from vehicles, we may assume that it is a type of juveniles delinquency which is organized by adults. Both adults and children often bank on the fact that offenders below the age of 14 cannot be seriously punished. A specific type of violent offences of juvenile delinquents is vandalism. Vandalism can be described as destruction of property and cruelty to live animals just for the sake of enjoyment derived

from doing it. Vandalism may also be considered a lifestyle of some young people. Vandalism is a destructive behaviour that brings no material gain to the perpetrator.

The second most frequent types of delinquency among children and youth are violent offences. The most frequent types of this type of criminal activity include wilful bodily harm, and 88 juveniles were sentenced for this offence in 2006. Eighteen adolescents were sentenced for rape and sexual abuse, and five were sentenced for murder. As a rule, violent offences are committed in peer groups. The causes of offences of violence are problems of the offenders in their families, schools, jobs and peer groups. In schools, the most frequent forms of violent offences also include bullying. It can be described as an aggressive behaviour aiming at restricting the victim's personal freedoms, or characterized by blackmail towards an individual or a group of people. Bullying may also have the goal in downgrading the person being bullied, and may be a kind of "entertainment" for the bullies. Because it is dangerous, bullying is attracting the specialists' attention. The growth in juvenile aggressiveness is manifested not only in bullying but also in disorderly conduct. The disorderly conduct is committed by not only youth but also by children.

The numbers of children and youth among perpetrators of criminal offences show a decreasing trend. In the past decade, their number peaked in 1997, when juvenile delinquency accounted for 28.3 % of solved criminal offences. In 2002, children and youth committed 9 187 of a total of 107 373 offences. In 2006, children and youth committed 6 887 of a total of 115 152 solved cases of criminal offences (Statistical Year Book, Slovak Republic, 2007).

2. Violence against children and youth committed by the parents

The origins of juvenile delinquency are very often in the families of the delinquents. In previous decades, criminologists already pointed out that juvenile delinquents were themselves victims of criminal activity before they themselves committed an offence. We may therefore assume that criminal offences against children and youth may be the cause of their criminal behaviour in the future. The most frequent types of offences against children and youth in the home include cruelty against children and youth and their neglect and abuse.

Cruelty against children and youth and their abuse and neglect affect physical and mental health of children and youth and their and social development. In the family, they may suffer physical or emotional cruelty. Physical cruelty may take the form of a cruel treatment of children that causes them mental anguish and physical agony. Emotional cruelty is considered as a concentrated attack of a parent against his or her child. Emotional cruelty harms the child's self-esteem and has a negative effect on the social development of youth. Child neglect may take on the form of health, social, physical or emotional neglect. Health neglect is manifested as insufficient care of parents for the health of their children. Social neglect consists in insufficient interest of the parents in the upbringing of their children, and/or their isolation from their peers. Physical neglect in families is manifested by insufficient nutrition and hygiene. Emotional neglect is committed by parents who refuse to give their parental love and affection to their children. Abuse of children takes most frequently the form of sexual abuse. Sexual abuse in the family takes the form of an improper exposure of children to sexual contacts and

sexual excitement. Children are also abused by their parents when forced to perform excessive physical work.

Among the most frequent causes of parental violence against their own children are the parents' inherited aggressiveness, drug addition of the parents, the parents' life in constant stress caused by employers and the threat of unemployment. Violent behaviour of a smaller part of parents against their children stems from their adherence to various types of rituals.

3. Prevention in juvenile delinquency

Prevention is implemented by the state, school and the family. Effective forms of prevention implemented by the state include the situational crime prevention. The basis of the situational crime prevention is the reduction of opportunities to commit crime. The greatest role in situational prevention is played by the police and local governments. An emphasis is given to improvements in the information system, which is open for the general public. School-implemented prevention may take the form of extra-curricular programmes and school programmes. Such programmes focus on the acquisition of the principle of good behaviour, the acquisition of assertive behaviour, and problem resolution through compromises. Extra-curricular activities in special-interest groups provide situational crime prevention because they not only keep adolescents occupied during their leisure time but they also have educational and social roles.

Prevention in families draws on the model role of the parents. The existence of stimulating family environment is important for all children, but it is especially important for children with poor academic achievement, hyperactive children and children with some other special educational needs.

Conclusions

Juvenile delinquency is a serious problem facing contemporary society. For that reason it must be in the interest of both state, community and school authorities to help the parents to create conditions for children upbringing in the optimum environment. The state is able to positively influence the stability of families by its social policies. Community bodies can create conditions for a meaningful use of leisure time for the youth in towns and villages. By organizing their leisure time and providing education emphasizing the principles of positive social intercourse among people in their education, schools can exert positive influence over the behaviour of children and youth.

ŠPECIFIKÁ SOCIÁLNO-PATOLOGICKÝCH JAVOV DETÍ A MLÁDEŽE V SLOVENSKEJ REPUBLIKE

Abstrakt: Príspevok sa zaoberá problematikou násilia v školách a voľnom čase mládeže. Poukazuje na protispoločenské správanie, narušajúce morálne základy spoločnosti a štátu. Obsahom príspevku sú otázky vzniku a priebehu násilia v škole. Popísané

sú osoby páchajúce násilie a obeť násilnej činnosti. Uvedené sú formy šikanovania ako najčastejšie formy násilia realizovanej v podmienkach školy a mimoškolského prostredia. Autor sa v príspevku zaoberá aj problematikou násilia realizovaného v rodinnom prostredí detí a mládeže. Uvedené sú najčastejšie príčiny násilia realizovaného rodičmi na deťoch a formy násilnej činnosti. Popísané sú najčastejšie spôsoby správania sa rodičov v oblasti zneužívania, zanedbávania a týrania detí a mládeže. Popísané sú špecifiká rodinného prostredia, v ktorom sa násilná činnosť rodičov najčastejšie realizuje. Uvedené sú špecifiká primárnej, sekundárnej a terciárnej prevencie v podmienkach základných a stredných škôl Slovenskej republiky.

Kľúčové slová: násilie v školách, protispoločenské správanie, morálne základy, osoby páchajúce násilie a obeť násilnej činnosti, príčiny násilia, spôsoby násilného správania, špecifiká primárnej, sekundárnej a terciálnej prevencie