Adolescent Delinquent Girls: An Experimental Treatment

Dennis Walker
Wilfrid Laurier University

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ADOLESCENT DELINQUENT GIRLS: AN EXPERIMENTAL TREATMENT DESIGN

by

Dennis Walker

WATERLOO LUTHERAN UNIVERSITY

Waterloo

1968
INTRODUCTION

This research paper intends to investigate the problem of treatment of adolescent delinquent girls. It intends to explore the theoretical factors relevant to the treatment of this group and to incorporate them within an experimental design for treatment. This treatment design will be set up so that a comparison of relative effectiveness between it and the principal treatment method currently in use in the Children's Aid Societies of Ontario can be made.

Motivation for the investigation came as a result of two work experiences with the Roman Catholic Children's Aid Societies of Windsor and Hamilton, Ontario. During the time spent as a caseworker in these agencies I found that I had a number of questions concerning the treatment of adolescents in general. This major client group, from my clinical observations, appeared to receive largely undifferentiated treatment. By 'undifferentiated' I mean that although diagnosis was based on consideration and assessment of individual factors, treatment was limited by the relatively few methods that were available. Thus, both male and female adolescents were treated by a combination of casework and institutionalization. From my observation these alternatives were insufficient, did not take into account the different needs of adolescents but rather had grown up by a tradition of voluntary service common to the C.A.S.'s of...
Ontario.

In particular the treatment of adolescent delinquent girls appeared to be unscientific and haphazard. It seemed to have not evolved from any specific knowledge base. If one took agency practice as a yardstick there was no real difference in the consideration of male and female delinquents. Any assessment or treatment seemed oriented toward the male delinquent. Female delinquents appeared to be a minor concern; a group to be watched so that they did not "act out sexually"; a group to be assigned a female worker and almost dismissed as an unimportant adjunct to the male delinquent.

Thus it was with: (1) dissatisfaction with the treatment alternatives available for adolescents in general, (2) a dissatisfaction with the apparent lack of knowledge about the female delinquent, (3) a desire to explore the available knowledge to find out if treatment for these girls should be set up differently from males and if so, how?, that I undertook this research. At the same time my feelings about the observed situation were wrapped in a paradox. Society is obviously moving toward equality of role and status of males with females. With equal attention given to the female role, it should become more obvious how this role and its problems differ from that of the male. Thus, recognition of equality should result in differentiation of
treatment, or conversely differentiation of treatment should aid in achieving equality of female with male. This study hopes to aid this movement.

RATIONALE

The rationale for undertaking this study aside from the general reasons given above, can be seen from two perspectives. From an economic point of view alternatives to institutionalization are highly desirable. Cohn, in a study of probation officers' recommendations to juvenile court found that one-half of girls coming before the court were sent to institutions. Cost of institutional treatment is high in comparison to non-institutional treatment. A study of delinquents conducted by the California Youth Authority found that male delinquents responded well to a combined, multi-level method of treatment within the community. Eighteen months after utilizing community treatment as an alternative to institutionalization, the

1Y. Cohn, "Criteria for the Probation Officer's Recommendation to the Juvenile Court Judge" Crime and Delinquency (IX, July 1963) 262 ff.

effectiveness had proved equal and was accomplished at a much lower cost.

Apart from this economic consideration it is becoming obvious that the Children's Aid Societies must move into more experimentally verifiable programs of treatment. In order to determine what types of treatment are effective and to move toward giving clients the most effective service comparisons of program results should be obtained. Agencies in general are becoming aware of this need in relation to the treatment of an increasingly large group of adolescent delinquent girls. The findings of the 1964 Chicago conference on "Girls in Crisis"\(^3\) outlined a number of problems faced by girls. These included the normal problems of heterosexual relationships, changing self image and the special problems of lower income, one parent and minority cultural groups. It expressed concern for the lack of interest in and lack of specialized counselling facilities for adolescent girls. Questions that arose illustrated a need for new treatment methods. Thus selection of appropriate identification models for teen-age girls and programs that raise their self-concept and motivate them to self-fulfillment are needed. If one needs a specific

motivation to establish new types of treatment alternatives if can be noted that the present rate of female to male adolescent suicide has been shown to be 3 : 1.\(^4\) Thus it was with the goal of improvement of services as well as with economic, practical and theoretical goals that this study was undertaken.

**REVIEW OF THE LITERATURE**

**DELINQUENCY THEORY**

In reviewing the literature on delinquency the writer moved from the general to the specific. I first considered the base of theory since treatment is based on theoretical as well as practical considerations. In reviewing theory on delinquency it became clear that until very recently, theory has been male-oriented. The obvious reason is that the ratio of male to female delinquents who come before court is 5 : 1.\(^5\) At first, then, the traditional agency orientation to delinquents as "males" appeared to be a natural one due to their visible over-representation in the population.


Theoretical consideration of delinquents seems to have been weighted according to this 5 : 1 ratio. The famous study by Sheldon and Eleanor Glueck linking body type, personality characteristics and juvenile delinquency was based entirely on the study of institutionalized boys. Cohen's sub-cultural theory of delinquency, concentrating on the delinquent gang's insulation of itself from frustrating middle class norms was also based on gangs of boys. Cloward and Ohlin's theory that when means of achieving societal goals are blocked juveniles turn to delinquency is more broadly based. At the same time, it has been criticized for omitting the dimension of personality factors and for its omission of the consideration of societal goals and methods in relation to girls. Gisela Konopka has reviewed both Parson's theory that delinquency is a male protest.

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9Konopka, p. 7.

against the female centred family and the Bloch - Niederhoffer\textsuperscript{11} model of delinquency as the result of long postponement of adult roles and criticizes them as being unsatisfactory for understanding and working with the "girl in conflict".

Gisela Konopka\textsuperscript{12} in her study of 181 institutionalized girls, has provided a set of concepts which are relevant to the understanding and treatment of delinquent girls. She outlines several areas which have particular meaning for the adolescent delinquent girl and which separate her out as needing particular treatment consideration. The following are areas which should be taken into account: in the adolescent girl biological changes -- particularly the onset of menstruation -- require both physical and emotional preparation. The stress of these changes, together with the possibility of pregnancy give the girl a greater need for protection and support. When the preparation for biological changes, and support and protection during them are not forthcoming, the girl experiences feelings of isolation and desertion. This is not to deny the importance of the changes in the male, but rather to highlight the

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\textsuperscript{12}Konopka, 118 ff.
\end{flushright}
specific implications that these have for the girl. The second factor which must be taken into account is the complexity of the resolution of the girl's oedipal conflicts. In her situation the girl must direct her love toward males while continuing to identify with the original love object, her mother. The adolescent girl faces a period in which her complex conflicts are re-aroused and, during this time, needs a sustained, warm communication with adults on a non competitive basis. In addition to these particular problems, adolescent girls are faced with fitting into a societal role which is constantly and quickly being redefined. This, Konopka refers to as the impact of cultural change. Any problems that girls have are complicated by changing values and societal contradictions which can cause already alienated delinquent girls to see themselves as outsiders, totally unwanted by society; this can drive them even further unacceptable behaviour. Other factors noted by Konopka include the "intense loneliness" and the demands that "faceless authority" makes upon 'girls in conflict'. These last two factors although having some relevance, seem to be particular to the institutionalized girls that Konopka studied. They are not necessarily factors which are universally relevant to the treatment of all problem adolescents.
TREATMENT METHODS

During the past five years there has been research on particular aspects of treating problem adolescents, both male and female. Some researchers, Konopka for example advance whole theories on how to consider the adolescent girl, others advance observations on particular aspects of treatment.

Meyer, Jones and Borgatta in their book "Girls at Vocational High", conducted a study using experimental and control groups to determine two things. First, they attempted to identify problem girls; then, using the casework method, they attempted to help them. This extensive study found that they were able to identify problem girls but that social casework was not effective in helping them. "Girls at Vocational High" suggested that a type of multiple intervention which utilized the proximate institutions of family, neighbours, friends and employment, might be more effective than one-to-one therapy. This project also

\[13\] Konopka, 118 ff.

raised questions about the goals and value orientations of service programs as well as issues about the evaluation of social work practice. This is an extreme simplification of the findings of the study but the necessity of exploring other alternatives to the treatment of female delinquent adolescents is clearly recognized.

An alternative to the institutionalization of delinquent adolescents was proposed by the California Youth Authority. Using random assignment of delinquents (as defined by the court) to either a community treatment group or an institutionalized control group, the study found that delinquents responded well to a combined program of individual, group and family therapy, school, work and activity programs, foster and group homes, surveillance and temporary detention, in caseloads of eight delinquents to one worker. All youths were tested and diagnosed before being put into one of the alternative community plans. All plans went through three stages of intensity ending with a period in which there was one contact per month. This last period corresponds to parole from an institution and enables accurate comparison and evaluation of plans.

15H.G. Stark, 262 ff.
The connection between parental behaviour and the problems of children is a widely recognized one. In "The Runaway Girl" Robey makes the point that parental interaction plays a major role in shaping adolescent behaviour. The article notes that parents may force roles or demand on girls because of hostility toward their marital partners. Thus, they may attempt to "seduce" their daughters to fulfill their own neurotic needs. In adolescence, girls exposed to this situation often react by running away. This can be seen as a healthy sign and if treatment is to be successful it must include the parents as the original causes of the behaviour.

Peter Hampton has also referred to the necessity of involving parents of problem adolescents in psychotherapy. He proposes group treatment in order to have parental growth parallel and complement that of the adolescent. Using this method parents find the courage to face themselves, gain insight into their behaviour and express feelings and behaviour which may have been contributing to the pathology of the adolescent.


A study which considers some of the theoretical aspects of treating female delinquents has been done by Marvin Hersdo. Hersdo sees delinquency as the method that some female adolescents use to give themselves a sense of identity. These delinquents are usually not motivated for treatment and, lacking a reliable ego, require a particular type of therapy. He sees group psychotherapy, with limited, reality and present oriented goals as the best method for treatment. The group provides a situation in which freedom of expression and maintenance of status are possible, particularly when the focus is on current interpersonal relationships. Thus, the group provides a non-threatening but optimal anxiety level situation, in which the delinquent girl can identify and gain support from fellow group members. The writer points out that the therapist in this situation must be more directive than with adult groups, pointing out acceptable ways of acting, while remaining aware of resistances, manipulation and testing out, during therapy. In calling for individual therapists who have worked out their own sexual identifications and adolescent aggressive drives, Hersdo also expresses concern about the dangers of countertransference.

The following chart contains a summary of most of the concepts already reviewed. It can be noted that the review of the literature has emphasized two themes. The first is that of the theoretical concentration on male oriented delinquency. The second is that of the treatment methods indicated by the studies that have concentrated on girls. Konopka's work as both an attempt to understand the etiology of 'girls in conflict' and a recommendation for treatment procedures is a part of both themes.
## Review of Literature: Summary and Implications

<table>
<thead>
<tr>
<th>FOCUS OF ARTICLE OR BOOK</th>
<th>FINDINGS OR HYPOTHESES</th>
<th>CRITICISM</th>
<th>TREATMENT IMPLICATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Juvenile Delinquency Causation</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Cohen:</td>
<td>Subculture theory:</td>
<td>-theories are almost exclusively male oriented</td>
<td>-treatment must be aware of multiple causation</td>
</tr>
<tr>
<td>Glueck:</td>
<td>Body type and Personality</td>
<td>-no one theory adequately explains all delinquency</td>
<td>-do not automatically treat females as males because theory does not support this</td>
</tr>
<tr>
<td>Cloward &amp; Ohlin:</td>
<td>Blockage of means to goals causes delinquency</td>
<td>-females do not fit patterns; have not been researched</td>
<td>-multiple causation needs multiple level intervention</td>
</tr>
<tr>
<td>Parsons:</td>
<td>Female centred family structure major cause</td>
<td></td>
<td></td>
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<tr>
<td>Bloch &amp; Niederhoffer:</td>
<td>Delinquency the result of postponement of adult roles</td>
<td></td>
<td></td>
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<tr>
<td><strong>Problems Peculiar to Girls</strong></td>
<td></td>
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<tr>
<td>Konopka:</td>
<td>Biological Psychological Identification Processes Changing cultural position Authority conflicts Loneliness of rejection</td>
<td>-theory is based on an institutionalized population</td>
<td>-treat personalities not delinquency</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-too general and too subjective</td>
<td>-treatment staff warm, outgoing, represent values</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>-accept adolescent conflicts</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>-individualization, small groups</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>-provide self-fulfillment and employment</td>
</tr>
<tr>
<td><strong>Treatment Methods</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meyer &amp; Borgatta:</td>
<td>Casework inadequate Problem Girls can be identified Reassess goals of treatment Community treatment can replace institutional treatment</td>
<td>-need to explore further and experimentally other treatment methods for girls</td>
<td>-multiple intervention -use of control groups -small caseloads -involvement of parents -reality oriented group psychotherapy</td>
</tr>
<tr>
<td>Cohn: (C.Y.A.)</td>
<td>Parental patterns are relevant to delinquency</td>
<td>-male oriented not empirically tested</td>
<td>-mature identification models are needed</td>
</tr>
<tr>
<td>Hampton</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hersdo</td>
<td>Group treatment for girls can be effective</td>
<td></td>
<td></td>
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</tbody>
</table>
TREATMENT DESIGN

This study design is set up so that a comparison might be made between treatment methods which incorporate the findings of the literature review and those methods which are currently in use in the C.A.S.'s of Ontario for the treatment of delinquent adolescent girls.

Although little research has been done into the problems of female delinquency there are indications that it is a particular problem with identifiable treatment implications. Some of these implications are as follows: need for multiple intervention, need to provide suitable female identification models, the use of group methods, opportunities for self fulfillment and use of parents or parent surrogates as well as the limiting of caseload size. Not all these can be tested at once. In this study concentration is on comparison of the use of group foster home and therapy methods which will provide structured opportunity for identification, peer group participation and self fulfilling activities, with individual foster home and therapy methods. The design is one which can be used in a C.A.S. in Ontario and one which uses control and experimental groups and which attempts to minimize through matching the influence of extraneous variables. (see treatment procedure)
GENERAL HYPOTHESIS

Adolescent delinquent girls treated by group methods will achieve a better social and personality adjustment than those treated by casework methods alone.

EXPERIMENTAL HYPOTHESIS

Social and personality adjustment of adolescent delinquent girls will vary directly with the number of group methods used in their treatment.

DEFINITION OF TERMS

"Adolescent delinquent girls" will be defined as those girls between the ages of 11 and 16 (inclusive) who are made wards of the Children's Aid Society for a period of at least one year as a result of their own behaviour, under the terms of the Child Welfare Act of Ontario (1965).

"Group methods" refers to the use of group psychotherapy and activity groups and/or group foster home placement.

"Social adjustment" refers to positive change as measured by the "Social Adequacy Rating Scale"19 (See Appendix).

"Personality adjustment" refers to change as measured the Eysenck Personality Inventory20 (See Appendix).

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20 H. J. and S., Eysenck, "Eysenck Personality Inventory" (1963) Educational and Industrial Testing Services (British Edition: University of London Press Ltd.)
"Social casework methods" refers to individual client therapy within an individual foster home placement.

TREATMENT DESCRIPTIONS

The alternative forms of treatment to be considered will consist of three types. Experimental Method A will involve the use of group home placement group psychotherapy and structured group activity. This is the maximum use of group methods and will be expected to produce the maximum social and personality change. Method B will involve the use of single foster home placement and group psychotherapy and is expected to produce a greater social and personality change than Method C. Method C - the control method - is the one which is in common use in the Children's Aid Societies of Ontario and involves single foster home placement and individual casework therapy.

EXPERIMENTAL METHOD VARIABLES

The variables for which the experimental and control groups will be matched include age (11-16), sex, general problem-delinquency personality ratings (as measured by the Eysenck Personality Inventory), worker and foster home placement as well as length of treatment (one year).

The criterion variables by which the change in the mean amount of group adjustment (personality and social) will be measured by the Eysenck Personality Inventory as
tested before and after treatment and the Social Adequacy Rating Scale as tested at two times during treatment and once after.

The independent variables which will affect the outcome of the treatment differentially are group psychotherapy and group activity programs and/or group foster home placement.

SAMPLE: DELINQUENTS

The adolescent girls to be treated will be obtained from those referred to a C.A.S. in Ontario between the ages of 11 and 16, generally termed "incorrigible" and who will be under wardship for a period of at least one year.

Girls should be selected and then held either in the receiving home or in foster homes until there are enough girls so that three groups may be selected, each matched according to the Eysenck Personality Inventory. Each group should contain a normal distribution according to the E.P.I., that is two girls from each of the four categories Normal/Introvert, Neurotic/Introvert, Normal Extrovert, Neurotic Extrovert should be in each group.

Once the groups are selected and matched foster home placement and treatment will begin simultaneously and last for one year. Thus treatment time will be uniform, starting and discontinuing at the same point.
WORKER SAMPLE

From a group of professional, female social workers who are able to undertake both group and individual therapy, two workers who most closely match according to the Minnesota Multiphasic Personality Inventory should be chosen. Optimum age should be approximately twenty-eight years.

FOSTER HOME PARENTS

This group in reality cannot be matched on many factors. A general description would put them in the thirty-five to forty-five age range. Preliminary procedure should include a weekend seminar in which they are made aware of some of the principles of treatment which are going to be used with the children they have in their homes. No mention of the comparative nature of the experiment should be made. Foster home rates should be in line with agency policy but adequate and flexible so that no parents be forced to leave the study because of inadequate finances.

TREATMENT PROCEDURE

As the girls are now arranged in three sections for treatment according to methods A, B, C (control) the following methods will be used:

METHOD A: All members will live in the same group home, set up and designed to accommodate eight girls and one set of group home parents.
All members will be assigned the same social worker - Miss X - who will conduct one group therapy hour weekly with the whole group; sessions should remain reality and present oriented and concentrate as far as possible on interpersonal relationships.

All members will be expected to participate in an activity program during one other hour a week. It will be conducted by the same worker, include all members and be 'task oriented'. The 'task-orientation' of this group might be initiated by the process of selection of activities to be undertaken.

**METHOD B:** All members will be assigned to separate foster homes. All members will be assigned to the same social worker - Miss Y - who will conduct twice weekly group psychotherapy hours, again present and reality oriented and concentrating on interpersonal problems. No group task oriented activity.

**METHOD C:** All members will be assigned to (control) separate foster homes. The group will be divided into two sections containing four girls each, and with each section (C1, C2) containing each of the four personality types according to the E.P.I.

Worker X will undertake individual therapy on a twice weekly basis with one section of the control group - C1. Worker Y will conduct individual therapy on a twice
weekly basis with the other members of Group C - Section C2.

OTHER PROCEDURES

All foster home parents will be given one hour consultation sessions in their homes each week.

The following chart is a summary of the experimental design.
### Experimental Method A

<table>
<thead>
<tr>
<th>Foster Home</th>
<th>Group placement all girls in same foster home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy</td>
<td>Group psychotherapy once per week</td>
</tr>
<tr>
<td></td>
<td>Activity group once per week</td>
</tr>
<tr>
<td>Worker</td>
<td>Miss X</td>
</tr>
<tr>
<td>Qualifications</td>
<td>M.S.W. female group/caseworkworker</td>
</tr>
</tbody>
</table>

### Experimental Method B

<table>
<thead>
<tr>
<th>Foster Home</th>
<th>Individual placement all girls in individual foster homes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy</td>
<td>Group psychotherapy twice per week</td>
</tr>
<tr>
<td>Worker</td>
<td>Miss Y</td>
</tr>
<tr>
<td>Qualifications</td>
<td>As in &quot;A&quot;</td>
</tr>
</tbody>
</table>

### Control Method C

<table>
<thead>
<tr>
<th>Foster Home</th>
<th>Individual placement (four girls)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy</td>
<td>Individual therapy twice per week</td>
</tr>
<tr>
<td>Worker</td>
<td>Miss X</td>
</tr>
<tr>
<td>Qualifications</td>
<td>As in &quot;A&quot;</td>
</tr>
</tbody>
</table>

**Total 8 Girls**

**NOTE:**

A. Each method is applied to group containing distribution of E.P.I. Method C has two sections with each worker treating one section in order to neutralize the effect the worker might have on the control group. For measuring purposes sections C1, C2 will be combined.

B. All foster home parents are given one consultation session per week.
TESTING METHODS AND DATA COLLECTION

PERSONALITY CHANGE

As noted all girls will be tested and ranked according to the Eysenck Personality Inventory. When they are sorted so that each group or section contains a normal distribution of scores the mean group score will be recorded. (Time 1) At the end of twelve months the E.P.I. will again be administered and the mean group score recorded. The E.P.I. will be administered at both times by a psychologist.

SOCIAL ADJUSTMENT CHANGE

All girls in all treatment sections will be given the Social Adequacy Rating Scale after one month (Time 2) in their foster home placements after six months (T3) and again after twelve months (T4). The S.A.R.S. is to be filled out by the therapist and jointly by the foster home parents.

The following is a partial list of comparisons of treatment methods according to the treatment design which will be available.

Comparing Worker Performance:

Worker X : Method A - Method C1
Worker Y : Method B - Method C2

Comparing Methods:

Full Section : A - B  Full to Partial A - C1,C2  C1-C2
B - C  B - C1,C2
A - C  C - C1,C2
All of the above can be compared according to E.P.I. scores at Time 1, Time 4.

All of the above can be compared according to S.A.R.S. scores of both foster parents and therapists at T2, T3, T4.

MEAN GROUP SCORES AVAILABLE FOR COMPARISON

<table>
<thead>
<tr>
<th>METHOD A</th>
<th>METHOD B</th>
<th>C1 METHOD C2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time 1</td>
<td>E.P.I.</td>
<td>E.P.I.</td>
</tr>
<tr>
<td>Time 2</td>
<td>S.A.R.S.</td>
<td>S.A.R.S.</td>
</tr>
<tr>
<td>Time 3</td>
<td>S.A.R.S.</td>
<td>S.A.R.S.</td>
</tr>
</tbody>
</table>

METHODS OF ANALYSIS

The design is set up so that the use of group methods falls along a three point continuum. Highest use of group treatment is in method A, medium use is with section B and lowest (no use) in the control group section C. Thus with other relevant variables matched or controlled scores on the S.A.R.S. and E.P.I. will enable comparison of the change in the mean performance of all three groups being treated. Also individual scores on each of the tests can be compared. Comparisons can also be made between the foster parents and therapists S.A.R.S. ratings.

The use of the Eysenck Personality Inventory to select the composition of the groups and to test personality change is an arbitrary and perhaps limiting method. The advantage is that it provides an index of personality which
can be applied easily to the sample prior to the experiment without extensive observation. It may restrict generalization of the changes in personality to the larger population. It must be noted that change, will also be measured by the Social Adequacy Rating Scale. Optimum results would produce high correlation between the relative amounts of change as measured by both the E.P.I. and S.A.R.S. For this study emphasis is placed in the relative change in the mean group scores of the group treated by method A and the control group (method C) as measured by the S.A.R.S. at time 2 and time 4 and the E.P.I. scores at time 1 and time 4.

The use of only two workers in the design and the division of treatment method C into two groups was done so that individual worker influence on treatment could be controlled. This method, in addition, allows comparison of the success of the workers with both individual and group treatment. If the results obtained by Method A were significantly better than those of Method C then a comparison of Method A is again more effective than Method C1. If the reverse is true some consideration of the individual worker as the influencing variable in this experiment would be necessitated.

Thus:

IF Method A results are better than Method C

Method A results should also be better than Method C1.
CONCLUSIONS

This experimental design was set up so that a comparison of methods of treatment of adolescent delinquent girls could be made within the structure of a Children's Aid Society of Ontario.

The design, rather than attempting to isolate the etiological factors of delinquency and to specifically focus on them, concentrates on the methods that the literature seemed to indicate as more effective focuses of treatment. The design was set up to incorporate these methods into treatment. Thus the jump was made from the general theories of delinquency which are present but do not necessarily cause female delinquency, to methods of treatment. The assumption that it is possible to move from general theory to specific treatment because of (A) the lack of unified theory on causation of female delinquency and the lack of any specific relationships between social psychological and biological factors with particular types of delinquency, and (B) the practical and economic necessities governing research within the structure of an agency in which treatment of clients is of primary importance.

The expectation is that the hypothesis would be supported and that an analysis of variants on the large amount of data available would validate this support. In this case agencies might immediately begin movement toward
group methods in this treatment area. It is obvious that the economic saving in utilizing group rather than individual therapy would be the first benefit. More importantly clear indications of an experimentally effective form of treatment would provide the type of service to clients which justify the expense and emotional trauma of taking temporary wardship of delinquent girls. Finally agencies would have moved toward utilization of alternative forms of treatment rather than remaining in any rigid casework oriented pattern of service.

Of the hypothesis is either refuted or unsupported other areas of exploration in treatment methods may be indicated. Utilizing a similar review of the literature researchers might find it advisable to undertake study of intensive group oriented service to delinquents while keeping them in their nuclear family. Research into more preventative aspects of female delinquency through the establishment of multi level (school, family, peer group) intervention might be indicated. At the very least the study will have provided a basis of comparison of the effectiveness of present treatment methods with a method which is logically empirical.

In summary it is expected that the study as it moves from the theoretical and practical literature will
provide a logical comparison of treatment which structurally gives opportunity for meaningful relationships and activity as well as peer group and surrogate parent support with two other treatment methods that are structured in this manner to a lesser extent.
APPENDIX

I Eysenck Personality Inventory
II Social Adjustment Rating Scale
BIBLIOGRAPHY


Cohn, Y., "Criteria for the Probation Officer's Recommendations to the Juvenile Court Judge", Crime and Delinquency, IX, July 1963.


1. Do you often long for excitement? Yes No
2. Do you often need understanding friends to cheer you up? Yes No
3. Are you usually carefree? Yes No
4. Do you find it very hard to take no for an answer? Yes No
5. Do you stop and think things over before doing anything? Yes No
6. If you say you will do something do you always keep your promise, no matter how inconvenient it might be to do so? Yes No
7. Does your mood often go up and down? Yes No
8. Do you generally do and say things quickly without stopping to think? Yes No
9. Do you ever feel "just miserable" for no good reason? Yes No
10. Would you do almost anything for a dare? Yes No
11. Do you suddenly feel shy when you want to talk to an attractive stranger? Yes No
12. Once in a while do you lose your temper and get angry? Yes No
13. Do you often do things on the spur of the moment? Yes No
14. Do you often worry about things you should not have done or said? Yes No
15. Generally do you prefer reading to meeting people? Yes No
16. Are your feelings rather easily hurt? Yes No
17. Do you like going out a lot? Yes No
18. Do you occasionally have thoughts and ideas that you would not like other people to know about? Yes No
19. Are you sometimes bubbling over with energy and sometimes very sluggish? Yes No
20. Do you prefer to have few but special friends? Yes No
21. Do you daydream a lot? Yes No
22. When people shout at you, do you shout back? Yes No
23. Are you often troubled about feelings of guilt? Yes No
24. Are all your habits good and desirable ones? Yes No
25. Can you usually let yourself go and enjoy yourself a lot at a gay party? Yes No
26. Would you call yourself tense or "highly-strung"? Yes No
27. Do other people think of you as being very lively? Yes No
28. After you have done something important, do you often come away feeling you could have done better? Yes No
29. Are you mostly quiet when you are with other people? Yes No
30. Do you sometimes gossip? Yes No
31. Do ideas run through your head so that you cannot sleep? Yes No
32. If there is something you want to know about, would you rather look it up in a book rather than talk to someone about it? Yes No
33. Do you get palpitations or thumping in your heart? Yes No
34. Do you like the kind of work that you need to pay close attention to? Yes No
35. Do you get attacks of shaking or trembling? Yes No
36. Would you always declare everything at the customs, even if you knew that you could never be found out? Yes No
37. Do you hate being with a crowd who play jokes on one another? Yes No
38. Are you an irritable person? Yes No
39. Do you like doing things in which you have to act quickly? Yes No
40. Do you worry about awful things that might happen? Yes No
41. Are you slow and unhurried in the way you move? Yes No
42. Have you ever been late for an appointment or work? Yes No
43. Do you have many nightmares? Yes No
44. Do you like talking to people so much that you would never miss a chance of talking to a stranger? Yes No
45. Are you troubled by aches and pains? Yes No
46. Would you be very unhappy if you could not see lots of people most of the time? Yes No
47. Would you call yourself a nervous person? Yes No
48. Of all the people you know are there some whom you definitely do not like? Yes No
49. Would you say you were fairly self-confident? Yes No
50. Are you easily hurt when people find fault with you or your work? Yes No
51. Do you find it hard to really enjoy yourself at a lively party? Yes No
52. Are you troubled with feelings of inferiority? Yes No
53. Can you easily get some life into a rather dull party? Yes No
54. Do you sometimes talk about things you know nothing about? Yes No
55. Do you worry about your health? Yes No
56. Do you like playing pranks on others? Yes No
57. Do you suffer from sleeplessness? Yes No

PLEASE CHECK TO SEE THAT YOU HAVE ANSWERED ALL THE QUESTIONS.
SOCIAL ADEQUACY RATING SCALE

Explanation - The component parts of this scale are designed for rating the individual client's behaviour as indicated by his ability to function responsibly and appropriately in relation to himself and others. Each trait is measured on a five-step scale. A Confidence Scale is added to the Trait Scale to reflect the rater's confidence in his rating from the records available. The basic Trait and Confidence Scales are as follows:

1. SOCIAL ADEQUACY - Usually functions in a responsible and appropriate manner.

2. BORDERLINE SOCIAL ADEQUACY - Frequently functions in a responsible and appropriate manner.

3. INTERMEDIATE SOCIAL ADEQUACY - Sometimes functions in a responsible and appropriate manner.

4. MINIMUM SOCIAL ADEQUACY - Very occasionally functions in a responsible and appropriate manner.

5. SOCIAL INADEQUACY - Seldom functions in a responsible and appropriate manner.

X. UNKNOWN: No information on which to base a rating.

Confidence in Rating:

1. I am very confident of this rating.
2. I am doubtful about this rating.
3. I have no confidence whatsoever in this rating.

Instructions - Draw an X in the box on the scoring sheet containing the number of the step in each scale which you think best describes the client whom you have just interviewed. Then draw a circle around the number in the Confidence Scale according to your conviction about your rating.

Adapted from - Louis E. Pinchak and Glen W. Rollins, Social Work Service, Veterans Administration Hospital, Vaco, Texas, Library of Congress Photoduplication Service ADI 6148.
Responsibility for Use of Money: The extent to which the individual is realistically responsible about his money, its source and its use.

<table>
<thead>
<tr>
<th>Social Adequacy</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Social Adequacy</td>
<td>Shows responsibility for control of money and uses it with general good judgment.</td>
<td>1</td>
</tr>
<tr>
<td>2. Borderline Social Adequacy</td>
<td>Shows frequent responsibility and good judgement for use of money with irregular exception.</td>
<td>2</td>
</tr>
<tr>
<td>3. Intermediate Social Adequacy</td>
<td>Shows some responsibility for use of money with frequent exceptions.</td>
<td>3</td>
</tr>
<tr>
<td>4. Minimum Social Adequacy</td>
<td>Shows occasional responsibility for spending, but uses money reluctantly or uses with poor judgement.</td>
<td>4</td>
</tr>
<tr>
<td>5. Social Inadequacy</td>
<td>Shows very little responsibility for money, uses without recognition of its value or purpose.</td>
<td>5</td>
</tr>
<tr>
<td>X. Unknown</td>
<td>No information on which to base a rating.</td>
<td>X</td>
</tr>
</tbody>
</table>

Confidence in Rating Trait A.

<table>
<thead>
<tr>
<th>Confidence Level</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I am very confident of this rating.</td>
<td>1</td>
</tr>
<tr>
<td>2. I am doubtful about this rating.</td>
<td>2</td>
</tr>
<tr>
<td>3. I have no confidence whatsoever in this rating.</td>
<td>3</td>
</tr>
</tbody>
</table>
**B. Personal Appearance**: The extent to which the individual maintains his personal appearance; e.g., dressing, general hygiene, grooming, etc., in conformity with those of others in his environment.

<table>
<thead>
<tr>
<th>1. <strong>Social Adequacy</strong>: Shows responsibility for appropriate personal appearance.</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Borderline Social Adequacy</strong>: Shows frequent responsibility for appropriate personal appearance with only irregular exceptions.</td>
<td>2</td>
</tr>
<tr>
<td>2. <strong>Intermediate Social Adequacy</strong>: Shows some responsibility for personal appearance with frequent exceptions.</td>
<td>3</td>
</tr>
<tr>
<td>3. <strong>Minimum Social Adequacy</strong>: Shows occasional responsibility, but generally his personal appearance is inappropriate.</td>
<td>4</td>
</tr>
<tr>
<td>4. <strong>Social Inadequacy</strong>: Shows very little responsibility for personal appearance.</td>
<td>5</td>
</tr>
<tr>
<td><strong>X. Unknown</strong>: No information on which to base a rating.</td>
<td>X</td>
</tr>
</tbody>
</table>

Confidence in rating Trait B.

| 1. I am very confident of this rating. | 1 |
| 2. I am doubtful about this rating. | 2 |
| 3. I have no confidence whatsoever in this rating. | 3 |
C. Personal Habits: The extent to which the individual maintains the standards of his immediate environment as to etiquette, conduct and customs.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1. <strong>Social Adequacy</strong>: Shows responsibility for conforming appropriately.</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2. <strong>Borderline Social Adequacy</strong>: Shows frequent responsibility for conformity with only irregular lapses.</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3. <strong>Intermediate Social Adequacy</strong>: Shows some responsibility for conforming with some lapses.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4. <strong>Minimum Social Adequacy</strong>: Shows occasional responsibility, but is usually inconsistent in conforming or is exaggerated and unrealistic.</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5. <strong>Social Inadequacy</strong>: Shows no responsibility for conforming to immediate environment.</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>X. <strong>Unknown</strong>: No information on which to base a rating.</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Confidence in Rating Trait C.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I am very confident of this rating.</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2. I am doubtful about this rating.</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3. I have no confidence whatsoever in this rating.</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>
D. Vocational Responsibility: The extent to which the individual has been able to maintain continuing responsibility for productive work, (when appropriate apply this scale to fulfilling household duties).

1. Social Adequacy: Shows responsibility for regular employment.

2. Borderline Social Adequacy: Shows frequent responsibility for work but shifts jobs without status improvement.

3. Intermediate Social Adequacy: Shows some responsibility for getting employment, but fails to hold steady employment.


5. Social Inadequacy: Shows no responsibility for getting employment and is rarely employed.

X. Unknown: No information on which to base a rating.

Confidence in Rating Trait D.

1. I am very confident of this rating.

2. I am doubtful about this rating.

3. I have no confidence whatsoever in this rating.
E. Social Group Attendance: The extent to which the individual maintains appropriate social, recreational, religious, and avocational activities.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Social Adequacy</strong>: Shows responsibility for attendance.</td>
<td>1</td>
</tr>
<tr>
<td>2. <strong>Borderline Social Adequacy</strong>: Shows frequent responsibility for attendance with only irregular withdrawal.</td>
<td>2</td>
</tr>
<tr>
<td>3. <strong>Intermediate Social Adequacy</strong>: Shows some responsibility in activities though not on a sustained basis.</td>
<td>3</td>
</tr>
<tr>
<td>4. <strong>Minimum Social Adequacy</strong>: Shows occasional responsibility or over-emphasizes attendance in at least one activity.</td>
<td>4</td>
</tr>
<tr>
<td>5. <strong>Social Inadequacy</strong>: Shows no responsibility for attending.</td>
<td>5</td>
</tr>
<tr>
<td><strong>X. Unknown</strong>: No information on which to base a rating.</td>
<td>X</td>
</tr>
</tbody>
</table>

**Confidence in Rating Trait E.**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I am very confident of this rating.</td>
<td>1</td>
</tr>
<tr>
<td>2. I am doubtful about this rating.</td>
<td>2</td>
</tr>
<tr>
<td>3. I have no confidence whatsoever in this rating.</td>
<td>3</td>
</tr>
</tbody>
</table>
F. Social Group Participation: The extent to which the individual is able to appropriately interact in a social group.

1. Social Adequacy: Regularly shows reasonable responsibility for entering into emotional interaction of social group.

2. Borderline Social Adequacy: Shows frequent responsibility for involving self in group interaction with only irregular participation or minor expression of hostility.

3. Intermediate Social Adequacy: Shows some, but not sustained, responsibility for attempts to involve self in group interaction usually needing support; expression of hostility, usually does not threaten group.

4. Minimum Social Adequacy: Shows occasional responsibility for involving self in group interaction when supported or with hostility so controlled as to be tolerated by group.

5. Social Inadequacy: Shows no responsibility for emotional interaction in a social group by avoiding group or is too hostile to enter into group.

X. Unknown: No information on which to base a rating.

Confidence in Rating Trait F.

1. I am very confident of this rating.

2. I am doubtful about this rating.

3. I have no confidence whatsoever in this rating.
### Responsibility for Family and Immediate Associates

The extent to which the individual shows responsibility for the rights and well-being of members of family and immediate associates in his environment.

<table>
<thead>
<tr>
<th>1. Social Adequacy: Regularly shows reasonable responsibility for rights and well-being of members of family and associates.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Borderline Social Adequacy: Shows frequent responsibility for rights and well-being of members of family and immediate associates with only irregular inconsiderate acts or failure to act.</td>
</tr>
<tr>
<td>3. Intermediate Social Adequacy: Shows some responsibility for the rights and well-being of members of family and immediate associates.</td>
</tr>
<tr>
<td>4. Minimum Social Adequacy: Shows occasional responsibility for rights or well-being of family and immediate associates.</td>
</tr>
<tr>
<td>5. Social Inadequacy: Shows no responsibility for the rights and well-being of family and immediate associates.</td>
</tr>
<tr>
<td>X. Unknown: No information on which to base a rating.</td>
</tr>
</tbody>
</table>

#### Confidence in Rating Trait G

<table>
<thead>
<tr>
<th>1. I am very confident of this rating.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. I am doubtful about this rating.</td>
</tr>
<tr>
<td>3. I have no confidence whatsoever in this rating.</td>
</tr>
</tbody>
</table>
Interpersonal Relationships: Extent to which the individual maintains sustained relationships with others, on a person-to-person basis, demonstrating personal-emotional involvement.

1. **Social Adequacy**: Shows responsibility for sustained and meaningful person-to-person relationships.

2. **Borderline Social Adequacy**: Shows frequent responsibility for personal-emotional involvement with only irregular seclusion or over-aggressiveness.

3. **Intermediate Social Adequacy**: Shows some responsibility for person-to-person relationships.

4. **Minimum Social Adequacy**: Shows occasional responsibility, does not withdraw from offered contacts, although prefers seclusion, or enters without appropriate regard for time, place, or person.

5. **Social Inadequacy**: Shows no responsibility (withdrawal), or over-exaggerates.

X. **Unknown**: No information on which to base a rating.

Confidence in Rating Trait H

1. I am very confident of this rating.

2. I am doubtful about this rating.

3. I have no confidence whatsoever in this rating.