LEGAL AND PSYCHOLOGICAL DETERMINANTS OF THE RESOCIALISATION OF JUVENILE OFFENDERS. PSYCHOLOGICAL METHODS USED IN RESOCIALISATION

ABSTRACT

The aim of the article is to draw attention to the issues related to juvenile crime and rehabilitation in Poland. Numerous statistics, the characteristics of centers intended for juveniles, as well as a description of psychological interactions in the social rehabilitation of juveniles manifesting aggressive and self-aggressive behavior were taken into account. The article presents aggression as learned behaviors that can be changed using well-chosen psychological methods, with particular emphasis on methods based on cognitive behavioral therapy. The effectiveness of these therapies has been noted. The article indicates the advantages and disadvantages of this form of interaction along with comments that could be applied in the future. Among the advantages, the structuring of the method was indicated. On the other hand, the disadvantages included among others motivation of participants. An important aspect of the variety of activities was highlighted in order to keep participants motivated.
**Keywords:** resocialisation, juveniles, criminality, therapeutic's influences, psychological's influences

**Introduction**

The modern world is experiencing significant cultural and civilizational transformations that have a significant impact on society. We observe an increasing access to material goods, a reduction in poverty, the growth of women’s emancipation, a shift in family structures from multi-generational to nuclear, as well as greater availability of substances, weapons, and harmful media content driven by commercial motives, often lacking ethical reflection. New generations of young people have greater opportunities, but at the same time, this is accompanied by a crisis in local communities (caused by globalization and mass migrations) and a crisis in the family (high divorce rates and a liberal parenting style that does not provide sufficient parental control to protect against criminal behavior) (Bernasiewicz, Noszyk-Bernasiewicz, 2020, p. 234).

Both in Poland and in the USA, a declining trend in juvenile delinquency can be observed, encompassing both criminal acts and manifestations of demoralization (in the case of the USA, referring to so-called “status offenses”). From 1980 to 2018, the USA recorded a 63.8% decrease in the number of juvenile arrests, while in Poland, during the period from 2000 to 2018, there was a 30% decrease in the number of juvenile defendants (Bernasiewicz, Noszyk-Bernasiewicz, 2020, p. 207).

Aggression, understood as a natural instinct, was necessary for our survival. Now, aggression is considered a habit and one of our emotional responses that manifests itself in anger (Albański, 2010, p.11-12). Aggression becomes violence when is intentional and violates the rights or welfare of another person (Alarcon Arias, Wiechcińska, Paszkiewicz, 2008, p. 10). Juvenile delinquency is a widespread social issue. Since a large proportion of the acts committed by juveniles result from their anger, leading to aggression (acts against someone/something) or self-aggression (acts against oneself, e.g. use of psychoactive substances), it is essential to make an effort to learn how to express this anger in a pragmatic way. Goldstein et al. (2004, pp. 7-8) observe that aggression
manifests in proactive behaviors, which result from perceiving oneself as “the most important and entitled to everything,” and reactive behaviors, which stem from beliefs of low self-worth and the desire to compensate for one's image through aggression. These beliefs are often accompanied by cognitive distortions such as excessive generalization, exaggeration or minimization, dichotomous thinking, and many others (Beck, 1976; cited in: Okun, 2002). The inability to release anger in a constructive manner drives juveniles to commit crimes and then to embark on a criminal lifestyle without possibility of change (most of those who are sent to juvenile reform schools or detention centres return to them at a young age). Adults who have not been punished as juveniles are more likely to experience a more effective resocialisation process (Szymanowska 2003, p. 288-304) For this reason, psychoeducation of children and adolescents and learning how to manage emotions is crucial, allowing them to avoid acts that could result in placement in a juvenile detention centre or reform school. Teachers, educators, psychologists, the police and often also parents perform a range of preventive activities whose goal is to raise the awareness of the concept of crime itself and the related legal and criminal liability. A great deal of juvenile behaviour may constitute a deviation from certain moral or legal norms, constituting criminal acts. Irrespective of whether non-compliance with legal norms constitutes a crime or a petty offence, it is generally regarded as a sign of demoralisation, whose source may be often traced back to childhood experiences and role models among family, including parents, upbringing or material status, likely to lead, for example, to theft, which is a crime under the law. Resocialisation measures for juveniles are intended to shape and develop socially appropriate norms and behaviour.
Juvenile delinquency – legal regulations and statistics

Children and adolescents who have not reached the age of 17 at the time of committing an offense, but have reached the age of 13, are considered minors. In Poland, juvenile delinquency is governed by the Act of June 9, 2022, on the Support and Rehabilitation of Juveniles (Journal of Laws of 2022, item 1700), which replaces the previous Act of October 26, 1982, on Proceedings in Juvenile Cases (Journal of Laws of 1982, No. 35, item 228). The new law is applied in the following areas: proceedings for demoralization – concerning individuals who have reached the age of 10 but are not adults; proceedings for criminal offenses – concerning individuals who have committed such an offense after reaching the age of 13 but before reaching the age of 17 (art. 1 ust. 1 p.2); implementation of educational measures, medical measures, or corrective measures – concerning individuals for whom such measures have been imposed, but not beyond the age of 21, unless otherwise provided in this law (there is a possibility to extend the stay until the age of 24 if there are no rehabilitation results).

The new provisions introduce significant changes to the punishment and rehabilitation system for juveniles (Ośrodek Rozwoju Edukacji, 2022). One of the main changes is the mandatory placement of juvenile offenders of serious crimes in correctional facilities. The previous solutions did not always effectively rehabilitate juvenile offenders, which is why the new law allows for the extension of their stay in the facility if rehabilitation did not yield the desired results. Harsher facilities have also been introduced for juveniles referred by the court, especially for those who are demoralized or run away from educational centers.

Another significant change is the increase in the upper age limit for staying in correctional facilities to 24 years old. The previous age limit was lower, which could lead to situations where juveniles left correctional facilities at an age when they still required support and rehabilitation. The introduction of the new age limit aims to ensure adequate support and education for juveniles who need a longer stay in correctional facilities.

Furthermore, the new law introduces the possibility of assigning students who misbehave to perform school-related tasks. This change aims to teach
juveniles’ responsibility for their actions and redirect their energy towards beneficial activities that contribute to the school community.

The new law also takes into account the needs of minors with health issues by establishing a medical measure commission responsible for selecting an appropriate rehabilitation facility for these young individuals. This step aims to ensure adequate medical and therapeutic care for minors who require specialized support.

Additionally, the new law introduces the establishment of homes for young mothers with children in rehabilitation facilities. This measure aims to provide proper support and care for underage mothers, allowing them to raise their children in suitable conditions while participating in the rehabilitation process.

An important element of the new law is the reinforcement of procedural guarantees for minors, including the right to legal representation from the beginning of proceedings involving a minor. This gives juvenile offenders assurance that their rights are protected and that they are treated fairly in the criminal justice process.

The introduced changes are based on research findings and social consultations. The goal of these changes is to more effectively support and rehabilitate juvenile offenders, taking into account diverse situations and needs. The new law aims to ensure justice, legal protection, and humanization of the rehabilitation system for minors, enabling their social reintegration and preventing further crimes.

Among the unquestionable benefits of the introduced changes, the Senate Chancellery (2022, p. 3) notes several provisions of the law that would require improvement or are controversial. The establishment of the lower age limit (10 years) has been accepted by institutions such as the National Bar Council (NRA) and the Helsinki Foundation for Human Rights (HFPC). However, practitioners, including judges, probation officers, and educators, have expressed doubts and criticized this solution. Appellate courts in Wrocław, Białystok, and Warsaw have pointed out that the adopted age limit of 10 years is too high. The appellate court in Wrocław emphasized that there have been cases of children under the age of 10 exhibiting behavior in school that posed a direct and serious threat to other children (Senate Chancellery, 2022, p. 6). The Ministry of Justice disagreed with the arguments presented by the consulted
entities, stating that there is not sufficient substantive justification for lowering the age limit to 7 years based on psychological and psychiatric knowledge. The ministry believes that appropriate and effective remedial measures for such young children should be taken through parental authority intervention in the form of guardianship orders, in accordance with the Family and Guardianship Code. Practitioners point out that the judicial procedure provided for in the Family and Guardianship Code is slower in situations where immediate action is necessary and often insufficient to protect the child from moral corruption. There is concern that the proposed provisions will effectively prevent any measures from being taken against minors below the age of 10, which may exacerbate their social problems (Senate Chancellery, 2022, p. 7).

The extension of a minor’s stay in a correctional facility until the age of 24 – Article 15(6) of the Law – has been criticized and opposed by many consulted entities, such as courts, probation officers, the “Dajemy Dzieciom Siłę” Foundation, and the Helsinki Foundation for Human Rights. The lack of substantive justification for this extension in the context of rehabilitation and combating moral corruption has been raised, as well as the vagueness of criteria allowing the court to extend the stay in the correctional facility. There is a concern that such an extension may transform a rehabilitative measure into a punishment. Furthermore, the existing law applies to individuals who committed a criminal act after turning 13, and the application of the extension could result in a very long period of stay in the correctional facility (10-11 years), inconsistent with the effective impact of educational measures, and rather constitute a “punishment.” Therefore, according to the Senate Chancellery, the repeal of this regulation should be considered (2022, pp. 13-14).

According to the Law on the Support and Rehabilitation of Minors (Journal of Laws of 2022, item 1700), three types of measures can be applied to minors to prevent moral corruption and the commission of criminal acts. The first type is educational measures, which aim to shape appropriate behavior and values in minors. These can take various forms, such as a reprimand, an obligation to follow certain conduct, responsible parental or guardian supervision, supervision by a social organization, supervision by a probation officer, referral to a probation center, or a driving ban. In situations where educational measures are insufficient, a medical measure can be applied. This involves placing
the minor in a medical facility where they receive specialized psychiatric care or treatment for addiction, if necessary. This measure aims not only to provide healthcare but also to prevent further moral corruption. On the other hand, a correctional measure is applied in cases where other measures do not yield the expected results. It involves placing the minor in a correctional facility, where they undergo appropriate corrections and interventions aimed at correcting their behavior and facilitating their rehabilitation. The family court plays a significant role in the implementation of these measures. In the case of a minor being obligated to specific behavior, the court determines the manner and deadline for fulfilling obligations, such as repairing damages, providing compensation, performing community service, or apologizing to the victim. Additionally, the court can also specify the method of monitoring the implementation of the educational measure, and a probation officer may be appointed to supervise this measure and provide reports on its execution. All of these measures aim to protect minors from moral corruption and provide them with support and opportunities for rehabilitation. It is important for the applied measures to be tailored to the individual needs and circumstances of each minor, taking into account their well-being and the restoration of proper social functioning.

When analysing police statistics, it can be noted that in 2018 10,699 juvenile offenders were identified to have committed 25,528 offences, 3.2% of the total. Two years later in 2020, there were 8,287 juveniles, who committed 18,951 acts. This change may have resulted from the pandemic and the related lockdown restrictions, which prevented free interpersonal contact.

In 2018, among juveniles, boys were more likely to commit criminal acts; the percentage shares were as follows: 19.5% were girls (2,090 persons), and 80.5% were boys (8,609 persons). Similarly, in 2020, boys were in the lead (81.4%).

Compared to 2017, 2018 saw a decrease in detected criminal acts among juveniles by 3.4%, i.e. from 26,433 to 25,528. Similarly, 2019 saw a decrease by 4.4% compared to 2018 (36,475 crimes less).

The acts committed by juveniles, according to the 2018 and 2020 statistics, included robbery, theft and extortion – robbery offences (6.1% of the total number of juvenile criminal acts in 2018 and 15.4% in 2020), theft of property (8.7% in 2018 and 10.4 in 2020), burglary (10.4% in 2018 and 9.9% in 2020), damage

In 2018 and 2020, juveniles were most likely to commit criminal offences meeting the criteria of a criminal act, accounting for 95.5% of the total (2018) and 96.8% (2020). In addition, offences under the Anti-Drug Addiction Act and burglary were most prevalent.

Over the years, we have noticed similar tendencies among juveniles to commit certain acts with greater likelihood. It is thus on these offences that prevention and psychological education should focus.

**Resocialisation of juveniles – juvenile detention centres, youth educational centres and youth socio-therapeutic centres**

Juvenile detention centres are intended for juveniles over the age of 13. They can stay there until the age 21, provided that they are not sentenced to imprisonment after the age of 17. When a juvenile commits a criminal offence after turning 17, they can be sent directly to prison, as they can be tried as adults under law. Placing juveniles in juvenile detention centres is a last resort. A decision on placement in a juvenile detention centre can take the form of immediate placement in a juvenile detention centre and placement with conditional suspension (Bojarski, Kruk, Skrętowicz 2014, p.76). This measure, considered the most severe of those included in the catalogue of Article 9 of the Act on Supporting and Rehabilitating Minors. Cases is at the same time treated as a type of educational measure, intended for highly demoralised juveniles requiring educational and pedagogical interventions. The offence committed by a juvenile must be equivalent to a crime. In this case, it is important to take account of conditions that provide for stricter discipline and supervision or prevent moving around (Bojarski 1998, p.104).
The aim of resocialisation is to change the juvenile’s attitude to a more acceptable and socially desirable one. Such assumptions are implemented mainly in the areas of teaching, upbringing, professional training and organisation of leisure time (Drapała, Kulma 2014, p.209). Work with a juvenile is based on an individual resocialisation plan, developed by a pupil in cooperation with an educator, a psychologist and other employees of the institution, at the beginning of their stay in a juvenile detention centre. This plan can be modified if necessary; it specifies the basic operational goals, the stages of work, the expected consequences of partial actions and the changes in the juvenile’s behaviour and their extent (Pytka 2001, p. 212). Resocialisation activities and those which are intended to activate juveniles include voluntary service, sports activities, art therapy, activities to broaden one’s knowledge and interests (Drapala 2012, p. 8-15).

The resocialisation of juveniles also takes place in other centres, such as youth educational centres (Polish: MOW) and youth socio-therapeutic centres (Polish: MOS). Placement in a youth educational centre depends on the degree of demoralisation of a juvenile, which manifests itself primarily in violating the rules of social conduct, committing a criminal act and evading the obligation to attend school or vocational training. Other forms of educational measures, such as admonishment or probation supervision, are more frequently applied to juveniles. It can be noted that over the years, according to statistics, “the percentage of referrals to youth educational centres decreased from 3.8% in 1999 to 3.2% in 2008. However, in absolute numbers there was an increase from 1,635 in 1999 to 2,107 in 2009” (Kozłowski 2010, p. 105). Youth educational centres (Polish: MOW) admit maladjusted children and adolescents and those who have been placed there under a court decision. Common factors influencing referral to a youth educational centre include the consequences of faulty socialisation, which cover phenomena beyond the control of the juveniles themselves, most importantly neglect in terms of education and upbringing, low parental educational competence, family dysfunction (addictions, violence, mental disorders, criminality, serious health problems or material poverty) (Kaniowska 2015, p. 14). Youth educational centres have schools at different levels of education – primary schools, basic vocational schools, general secondary schools and technical
schools. Juveniles stay in youth educational centres until attaining the age of majority. For pupils who attain the age of majority without having completed the required stage of education, suitable conditions are created so that funds can be provided, as part of the procedure to allow them to lead an independent life, for the continuation of education under the provisions of the Social Assistance Act.

The most common reasons for placing juveniles in youth educational centres (Polish: MOW), according to a survey conducted by the Department of Resocialisation and Sociotherapy of the Education Development Centre in September 2014, include the following (Kaniowska 2015, pp. 13-17): failure to fulfil the schooling or study obligation (83.8%), violation of the rules of social conduct (62.7%), use of psychoactive substances (59.8%), committing criminal and punishable acts (51.3%), aggression and violence (46.2%), running away from home, vagrancy (42.1%).

Juveniles placed in youth educational centres are subject to social resocialisation with a system of activities based on three functions (Mudrecka 2004, p. 24). The first of these is the therapeutic function, involving the accurate and reliable diagnosis of disorders, dysfunctions as well as individual and social activities of the pupils, specific modifications of motivation and attitudes and application of appropriately selected somatic and psychological treatment measures. Another function, i.e. caring function, is understood as satisfying the pupils’ basic needs (e.g. the need for security) and arousing higher-order needs such as the need for respect, recognition and self-fulfilment. The last didactic and educational function includes preparation of the pupils to properly fulfil their social roles and participation in dedicated activities.

A mention should be made also of youth socio-therapeutic centres (Polish: MOS), intended for children and adolescents with behavioural disorders that make it difficult for them to function socially in a group of peers, school or environment (Kaniowska 2015, pp. 13-17). In this case, children and adolescents are admitted to youth socio-therapeutic centres at the request of their parents and based on a decision on need for special education issued by a psychological and pedagogical counselling centre. The main task of youth socio-therapeutic centres is, apart from preparation for life in accordance with social and legal norms, elimination of the causes of behavioural disorders and their manifestations. The forms, methods and duration of psychological
and pedagogical assistance provided are considered in the individual educational and therapeutic programme (IPET), developed separately for each juvenile with a decision on the need for special education.

**Psychological methods applied in the process of resocialisation of juvenile offenders**

Juvenile detention centres, youth educational centres and youth socio-therapeutic centres apply educational and preventive programmes that are included in the list of recommended programmes available in the Bank of Preventive Programmes. The most frequently implemented programs include “Aggression Replacement Training According to A. Goldstein”. There are also original programmes, mostly for prevention of aggression and violence among juveniles, and government programmes such as “Safe and Friendly School 2014-2016”, “Drug Prevention Programme 2012-2015” and “National Mental Health Programme 2011-2015” (Kaniowska 2015, p. 14).

The method of Aggression Replacement Training according to A. Goldstein is used with good results in juvenile resocialisation processes. Developed in the late 1970s by Arnold Goldstein, this method applies cognitive and behavioural techniques (Pawilczuk, Łobodda, Nowińska 2015, p. 34) and social learning theories, targeting aggression, understood as a learned behaviour, through observation or direct repeated experience of it. In Poland, the Aggression Replacement Training started to be used in 1996 on the initiative of Ewa Morawska and Jacek Morawski. Due to the hostile attitude of psychologists to modern behavioural techniques, the method initially did not enjoy great popularity. However, after having been empirically tested, it proved to be quite successful. As a result, it was approved in 2004 in the National Programme for the Prevention of Social Maladjustment and Delinquency among Children and Adolescents, adopted by the Council of Ministers. Training on the application of the programme in Poland is conducted by the KARAN Catholic Anti-Drug Movement Association and the Amity Institute (Pawilczuk, Łobodda, Nowińska 2015, p. 34). The programme is treated as an intervention programme, whose primary goal is to change aggressive and undesirable
behaviour with a view to reducing violence among children, adolescents and adults. Focused on teaching and practising new, definitely more constructive attitudes, it involves learning to make responsible decisions, considering their consequences. The method is applied particularly in work with violent individuals, at risk of delinquency, young adults neglected by their environment and drug addicts with deficits in social competences. Initially administered to people placed in juvenile detention centres, it was later adjusted to the needs of other institutions, including educational institutions (MOW, MOS).

Aggression Replacement Training captures aggression in a behavioral way and recognizes that behaviors are learned, so it is also possible to unlearn these behaviors (Morawski, 2007, p. 41-45). The Aggression Replacement Training has three major components:

- social skills training – behavioural techniques are based on modelling correct behaviour through role-playing in scenarios based on the participants’ experiences. In this way, the trainee learn the correct rules of behaviour, which are called skill steps. Cognitive techniques are based on performance feedback on the role play from the other participants. The aim is to analyse a given situation from an alternative perspective. Discussions are held during the meetings to examine the potential consequences of the role-played behaviour;

- anger control training – it makes it easier to understand what to do and what not to do when experiencing a provocation or situation that triggers anger. The participants present events from their own lives. They learn to analyse a given situation in behavioural terms by identifying external triggers of anger (A), their own aggressive behaviour (B) and the potential consequences of such behaviour (C). The physiological functions, i.e. bodily sensations (Rf), which are cues for anger, are also recognised and identified in this way. During the training, the participants learn relaxation techniques to reduce tension, such as deep breathing or imagination techniques. Their attention is directed towards automatic thoughts accompanying anger. They should be first discussed to be able to create prompts (alternative thoughts) with a view to reducing the level of arousal and modifying thinking, thus reinterpreting the experienced situation. Such thoughts could be,
for example, “I could do it” or “I won’t let myself be provoked”. Anger control training uses modelling procedures, role-playing and practising newly acquired skills in everyday life. Participants monitor their progress in anger control and reward themselves through pleasurable activities and automatic thoughts, such as “I did great with that”, “I got through it!” “I’m good at this” and other similar thoughts with positive overtones. It is necessary to emphasise the significance of learning to identify cognitive errors, which make a participant who misinterprets a situation more likely to react angrily;

- moral reasoning training is the module aimed at developing skills in moral reasoning and ethical decision-making. It is based on the theory that socially maladjusted individuals experience a prolonged egocentric period, often resulting from authoritarian upbringing. This state leads to specific cognitive impairments that form the basis for aggressive behavior (Borzucka-Sitkiewicz, 2006, p.105). The program focuses on developing the ability to identify, analyze, and resolve moral dilemmas, as well as enhancing the skill of distinguishing between appropriate and inappropriate attitudes and actions. Participants engage in various exercises and discussions designed to enhance their moral awareness, empathy, responsibility, and the ability to make decisions in accordance with moral values. The training deals with various moral dilemmas. The participants are asked to propose solutions. This type of moral reasoning helps to reinterpret a situation, teaching respect for the rights and needs of others and fostering moral sensitivity. This form of intervention helps the participants to understand their own value-based decisions. A moral problem is discussed not to solve a dilemma, but to analyse the situation and look at it from different perspectives. A variety of techniques are used during the discussions, such as Socratic dialogue, which involves an in-depth analysis of a given problem, with various inconsistencies. Such activities allow the participants to discover the motives behind their actions in the various situations discussed and to identify their stage of moral development. When selecting participants for groups, it is important to ensure that the group includes individuals at different stages of moral development. Thanks to this diversity,
varied arguments and answers can be expected when dealing with moral dilemmas. There is a good chance that people at a lower stage of moral development will look at a given dilemma in a different way under the influence of people at a higher stage, thus achieving a higher level of development (Pawilczuk, Łobodda, Nowińska 2015, pp. 33-37).

The use of the above method in the process of juvenile resocialisation involves the acquisition of new social skills. It is highly effective, helping to reduce recidivism rates (in the period of 4-12 months after the study, after a 10-week programme, they were 13-15% as compared to 40-52% in the control group (Glick and Goldstein 1987, pp. 356-362). Progress was made also by those who had committed serious crimes – felonies. There was a significant decrease in violent behaviour among youth, compared to the two control groups. The programme participants coped better and acquired more social skills (Pawilczuk, Łobodda, Nowińska 2015, p. 36). It was noted that the number of aggressive behaviours among the programme participants was reduced by 50% or more. There was no increase in rates of such behaviours (Pawilczuk, Łobodda, Nowińska 2015, p. 36). The training participants were found to be punished with disciplinary penalties far less frequently and to have changed their types and expressions of aggressive behaviours (Wójcik, Drapała, Więcek-Durańska 2015, p.130). The method supports the controlled manifestation of aggression and reduces the frequency and strength of aggressive behaviours.

The effectiveness of the method is due to its structure. All parts are closely interconnected and integrated, while the way the programme is implemented and its sequence must be strictly adhered to, or else it may prove to be ineffective (Majcherczyk 2013, p.195-211). The positive features of the programme are well and clearly developed and formulated rules and procedures, which are essential for the proper conduct of the programme and its effectiveness (Wójcik, Drapała, Więcek-Durańska 2015, p.128). It is also important to keep records to ensure that the quality of the meetings conducted by the trainers is assessed (Wójcik, Drapała, Więcek-Durańska 2015, p.129). The method gives the best results when the duration of the entire training is respected (no less than 30 h), the participants’ progress and motivation to change are evaluated (measurement of achievements), and the group is composed of between 5 and 12 participants.
Moreover, the acquired skills are verified (homework). The trainer should ensure that the groups are carefully managed to prevent a significant reduction in effectiveness. Staff of youth educational centres or youth socio-therapeutic centres and individuals with functions (e.g. as educators) in youth detention centres, youth educational centres or youth socio-therapeutic centres or those supporting trainers may be involved in the application of the method.

Since problems with the trainees’ motivation may arise beyond the trainer’s control, the activities need to be attractive, involving activation in the form of games or group work with less time devoted to lectures (Pawilczuk, Łobodda, Nowińska 2015, p. 36). The solution in this situation is to use extrinsic motivation in the form of diplomas for completing a part of the training or prizes for role-playing (Pawilczuk, Łobodda, Nowińska 2015, p. 36). Thanks to such activities, juveniles are more likely to complete the entire training and thus to benefit fully from it. It also appears to be important to make the participants aware of the benefits of the method (reduction of the negative consequences of their impulsive behaviour) and to convince them that they have all the necessary resources within themselves but do not make full use of them.

**Summary**

Aggression control is an essential element of work with juveniles, having an influence on whether they commit crimes. The resocialisation methods based on cognitive and behavioural techniques help to model appropriate behaviour. The demoralisation of juveniles can be often attributed to bad role models experienced by children and adolescents. Traumatic events often exert a lasting influence that can lead to disorganised behaviour and unconscious repetition of the acquired mechanisms (Drapała 2012, p.12). It is important to help juveniles to build an adequate and coherent self-image. Such activities force in-depth self-reflection and help to set goals that the participant would like to achieve. Loneliness is one of the key threats to the mental health and well-being of an individual (Rzepka – Boryczkowska, Skwarek, 2012, p. 223-234) so it is crucial to teach juveniles how to function properly in society and to improve their
interpersonal skills. As the feeling of loneliness increases, the level of aggression increases (Rzepka – Boryczkowska, Skwarek, 2017, p. 158).

Due to the high proportion of drug-related offences among juveniles, prevention and programmes addressing addictions play a major role. Placement in juvenile reform schools and detention centres gives juveniles the chances to complete their education, gain professional qualifications and take part in various interesting programmes that focus on developing new skills or interests.
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