

## TEMPORAL PERSPECTIVE AND MENTAL FUNCTIONING OF SOCIALLY MALADJUSTED YOUTH HELD IN CONDITIONS OF INSITUATIONAL ISOLATION

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### Introduction

**P**sychosocial development is an evolutionary process manifested in a series of crises taking place on a number of planes, which individuals face at various stages of development (Erikson, 1968). In this process, adolescence is a critical period with its crisis expressed in difficulties in making choices, and uncertainty as to one's self-image and beliefs. This is the time when teenagers look for answers to a number of key questions, such as: "Who am I?", "What is important to me?", "How am I supposed to behave?". These dilemmas, so intrinsic to this period in the context of adolescents' psychosocial functioning, are part of the process of the structuring one's self-identity. Whether or not the answers are found depends on the skills acquired in overcoming the crises of the previous developmental phases, i.e. infancy, early childhood, pre-school and school. These skills not only play a decisive role in the successful formation of self-identity on the basis of the previous experiences, but also in creating new patterns of social relationships and defining new goals and roles in life.

### Adolescents' psychosocial development – the protective and risk factors

The chances of individuals attaining a mature identity differ from one person to another, depending on the biological, mental and social resources at their disposal. In

the case of young people, the effects of identity formation processes depend on the extent to which their personal and social needs are met, and also on the strength of support received from their significant others, i.e. parents, caregivers and peers (Boyd & Bee, 2014). Research shows that teenagers who maintain positive, safe connections with their parents cope better with the challenges of adolescence, having developed higher self-esteem and more adequate stress-coping strategies; they are also less depressive and less vulnerable when it comes to exposure to negative peer influences (e.g. Armsden & Greenberg, 1987; Moretti & Peled, 2004) and display a higher tendency towards exploratory behaviours based on intrinsic motivation. Moreover, if adolescent needs for autonomy, competency and personal bonds are met, good self-regulation in adult life is much more likely (Carr, 2004).

In adolescence, strong emotional responses and rejection of situations that are found to be restrictive or against expectations often lead to disagreements with or even rebellion against significant adults, whose role begins to diminish. Peer groups become much more influential at the time (Boyd & Bee, 2014), consisting in people who are in many ways similar but who also provide the background for the confrontation of self-perceptions with the perceptions of others. This is why one of the more imperative objectives of adolescence is to establish and secure a position within a peer network (Zwaan, Dijkstra & Veenstra, 2013). Failure of this important integration process may manifest itself in peer rejection (Killen, Mulvey & Hitti, 2013), which reduces an individual's access to group resources, including social support (Wentzel, Battle, Russell & Looney, 2010). Consequently, it may result in an inability to meet the natural "need to belong" (Baumeister, Leary, 1995), resulting in even higher levels of loneliness, anxiety and depression (Prinstein, Rancourt, Guerry & Adelman, 2009; Terrell, Terrell & von Drashek, 2000), lowered life expectations, negative situations in the educational setting or even pre-mature school leaving (Wentzel & Wigfield, 2009). Withdrawal from the family or avoidance of peers or community may play a secondary role in enhancing the feelings of loneliness through negative emotions and feelings of loss or emptiness, e.g. due to a parent dying or divorce, leaving home long-term, changing schools, severing links with the peer group or peer rejection (Heinrich & Gullone, 2006). This may eventually lead to serious adjustment problems, and becoming involved in risky or criminal behaviours. On the basis of long-term research Garbarino (1999) demonstrated that the young offenders who were charged with heaviest crimes felt rejected by their families, peers and society at large.

Situations of intrapsychic and interpersonal conflict, unfulfilled needs, feeling under threat, and lack of role models or adult authority may contribute to a developmental crisis. In adolescence, it is also possible for an individual to linger at a stage of the identity-formation process, be it foreclosure, diffusion or moratorium (Marcia, 1980), revert to one of the previous periods, or miss a phase. Difficulties accompanying the need to cope with the tensions experienced as part of the status of diffusion identity may result in reaching for alcohol or drugs. Yet it is only after going through the phase of moratorium that young people have a chance of attaining a mature identity (Marcia,

1980). For this to be possible at all, mature and adequate support from adults is required, which can be only accepted if the bond between a young person and the adult willing to offer support is already in place (Boyd & Bee, 2014). If the crises resulting from the new requirements imposed on adolescents by an environment are successfully resolved, then the individual's self-identity is formed in a socially desirable way. If proceeding well, the process of psychosocial development of a young person is conducive to achieving a stable outlook on life, manifesting itself in a coherent way of dealing with different situations, regardless of personal transformations or changes in the immediate environment taking place at the time.

### **Developmental crises and the mental functioning of adolescents**

Rebellious behaviour in the teenage years may be a manifestation of depressive disorders experienced by up to 15% of the population of under-25s. (Mojs et al., 2015). These can be rooted in factors that are biological (e.g. hormonal changes), mental (low self-esteem) or stressful/environmental (e.g. traumatic events from early childhood, such as experience of physical or psychological violence or neglect). Without a doubt, one of the main risk factors is the psychological stress of adolescence, hence teenage depression can be explained by the interactive susceptibility-stress model (Seligman, Walker & Rosenhan, 2001). From the very beginning of this developmental period adolescents are exposed to higher stress levels than ever before, due to biological changes occurring in the body in interaction with mental transformations and difficulties in social functioning. The biological component of depression often coexists with various family problems underlying ineffective coping strategies. Previous research demonstrates a cognitive susceptibility of adolescents to depression-stress, promoting an overall tendency to amplify the negative effects of life events. If a young person is cognitively susceptible to depression, they are also more likely to develop the symptoms in the aftermath of negative life experiences (Morris, Ciesla & Garber, 2008), even though, as noted by Wrosch and Miller (2009), in some cases depression can play an adaptive role. Still, a supportive environment is one of the primary determinants of good mental health, and teenagers who are deprived of or excluded from it are more likely to be in danger of developing mental disorders.

### **Temporal perspective**

The development of temporal perspective is also involved in identity formation processes. In Zimbardo's and Boyd's approach (1999, 2008), temporal perspective reflects time-related attitudes, beliefs and values, being one of the most important factors that determine the ability to discriminate and evaluate, but also the quality and intensity of emotional experiences and, consequently, behaviour.

Introducing "meaningful coherence" into events by linking one's experiences and various social encounters with categories related to time is at the essence of the term.

The processing of information about reality involves a focus on one of the temporal horizons between memories (past), plans and possible scenarios of events (future), and current events (present). As a result of innate temperamental mechanisms, and particularly of life experiences (influence of family, education, culture, traumas, etc.), individuals may develop a habitual tendency to focus on one or several time horizons, while never venturing into others (Zimbardo & Boyd, 2008).

In their classic theoretical model, Zimbardo and Boyd (1999) distinguished five basic dimensions of temporal perspective: (1) past-negative, i.e. negative perceptions about the past, resulting either from real experiences of unpleasant or traumatic events or from a current negative reconstruction of neutral events; (2) past-positive, i.e. a positive attitude towards the past, resulting from positive experiences or a positive perception of difficult situations from the past, which affects an individual's current behaviour, emotions and thoughts; (3) present fatalistic, manifested by passive resignation as an attitude to life, a sense of lacking agency and influence on what happens in life; (4) present-hedonistic, i.e. focus on current pleasures, associated with high impulsiveness, an active search for new things and exciting sensations, avoidance of unpleasant experiences and tendency to risky behaviour; (5) future, i.e., focusing on future goals and rewards and ability to defer gratification in the name of higher rewards in the future.

Previous research also demonstrates that temporal perspective is strongly associated with the level of mental well-being (Zhang, Howell & Stolarski, 2013) and emotional functioning (Stolarski & Matthews, 2016). The habitual focus on one of the dimensions of temporal perspective can be linked to various features of emotional self-regulation, such as depressiveness, aggression, diligence, risk-taking, tendency to take drugs and other addictions (Budnikov, 2016; Stolarski, Ledzińska & Matthews, 2013; Stolarski, Zajenkowski & Zajenkowska, 2016; Temple, 2016). It may also consolidate or weaken one's sense of satisfaction with interpersonal relationships (Stolarski, Wojtkowska & Kwiecińska, 2016).

The results of previous analyses indicate that the past-negative perspective correlates negatively with emotional stability (Kairys, 2010) and self-esteem, and positively with depression and anxiety (Zimbardo & Boyd, 1999). The past-positive perspective, on the other hand, correlates positively with self-esteem (Zimbardo & Boyd, 1999) and health-promoting behaviors (Hamilton et al., 2003), and negatively with anxiety, depression and aggression (Zimbardo & Boyd, 1999). As a rule, people with the present-fatalistic temporal perspective are pessimistic and have a defeatist outlook on life; this perspective also correlates positively with neuroticism (Kairys, 2010). People whose temporal perspective is present-hedonistic like to experience intense emotions, and draw pleasure from spontaneous, improvised activities, without giving much thought to the possible consequences of their actions. They appreciate social life and spend their time with people who they consider stimulating (Zimbardo & Boyd, 1999). The future, forward-looking temporal perspective correlates positively with being diligent and negatively with looking for excitement (e.g. Simons et al., 2004).

Research shows that a balanced temporal perspective leads to good quality of life (Stolarski, 2016). This is the perspective dominated by the past-positive outlook, with the present-hedonistic and future perspectives present to a moderate extent, and past-negative and present-fatalistic reduced to a minimum. A balanced perspective of time perception is defined as an ability to effectively switch between the various dimensions of the temporal perspective, which provides for an effective adaptation to the current situation (Stolarski, Wiberg & Osin, 2015). Such a perspective is also associated with realistic self-esteem (Ortuno & Echeverria, 2013) and more adaptive mood profile (Stolarski et al., 2014), lower susceptibility to stress and anxiety (Papastamatelou et al., 2015), and lower severity of post-traumatic stress after exposure to trauma (Stolarski & Cyniak-Cieciura, 2016). Moreover, this kind of perspective fosters health, health-promoting behaviours and well-being (Temple, 2013), greater satisfaction with romantic relationships (Stolarski, Wojtkowska & Kwiecińska, 2016) and the cultivation of healthier leisure pursuits (Garcia & Ruiz, 2015). People whose temporal perspective is balanced get more involved and less worried when performing cognitively demanding tasks, as they experience lesser distress, which results in a significantly higher performance (Zajenkowski et al., 2016). The disturbance of the equilibrium of balanced temporal perspective may be one of the mechanisms underlying the emergence and persistence of mental disorders, e.g. PTSD (Zimbardo, Sword & Sword, 2012).

Notably, methods of supporting the development of desirable time perception, and helping individuals balance the various dimensions of their temporal perspective through educational and preventive activities, are already in place (Ishii, 2016; Tokarska, 2016; Tucholska & Tylikowska, 2016). Despite the relative persistence of temporal perspectives, various studies have demonstrated (James & Woodsmall, 2011; Sword et al., 2014; Zimbardo, Sword & Sword, 2013) that temporal competences can be modified in a therapeutic or training process.

### Social maladjustment

When a young person finds difficult life situations overwhelming, and coping becomes too demanding, they are labelled socially maladjusted, even though in some situations the behaviours deemed inappropriate may be the only form of adaptation to adverse living conditions that ensures their survival (Ziółkowska, 2005). Then again, we should bear in mind that rebellious behaviors in adolescence are part of an important life experience, playing a vital role as an expression of needs, changes in perceptions of the world, and experience of dilemmas and adversities. Risky behaviours, for instance alcohol drinking or drug use, are common and may even be considered adaptive in the process of identity formation in the moratorium phase, helping young people achieve approval in their peer groups, gain autonomy and deal with anxiety (Boyd & Bee, 2014).

The likelihood of the occurrence and intensity of maladaptive behaviours escalates with the number of biological, psychological or social risk factors which affect

individuals, while the resources available to them are too weak to compensate. The process can also be exacerbated by low self-esteem, an inadequate style of socialization in the family, particularly troubled communications or conflicts, use of violence, child neglect or parental failure, but also social stigmatization, a deficit of positive role models and a lack of reinforcement of positive coping strategies (Ziółkowska, 2005). After all, maladjusted behaviours serve the purpose of the gratification of needs in situations when no other means are available. Coping strategies used by young people, including non-constructive ones such as drug use, can be reinforced positively (temporary relief, increased confidence) or negatively (fear of peer rejection).

### **Institutional isolation**

Further to the Act on Juvenile Proceedings of October 26, 1982, a family court has a wide range of educational measures at its disposal that can be used in relation to a child or adolescent threatened by demoralization or the commission of punishable acts. These are divided into two groups: (i) measures that do not involve changes in the offender's natural environment, but rely on enhanced educational interventions in the open setting (e.g. supervision of a probation officer or probation centre); (ii) interventions that involve a change of educational environment and living arrangements which includes social rehabilitation facilities such as youth education centres and correctional facilities. These are only used as the last resort and are applied when other educational measures are insufficiently promising, or have failed altogether, or when the minor's family shows every sign of high dysfunctionality. When deciding on the choice of the measure, the family court is guided by the best interests of the child, aiming to achieve positive changes in personality and behaviour while also taking into account the public interest. Youth education centres are intended for socially maladjusted children and teenagers who require special care, methods and organization of education. These facilities provide social rehabilitation and, for children and adolescents with a mild intellectual disability, resocialization and revalidation. The objectives of youth education centres include elimination of the causes and symptoms of social maladjustment, as well as preparing offenders for their future lives in accordance with applicable social and legal norms (Act of 26 October 1982 on Proceedings in Juvenile Cases, Journal of Laws 2002 No. 11, item 109 with amendments).

However, the extensive literature of the subject suggests that the isolation of adults held in detention centres reduces the level of social support available to inmates (Stewart & Lovely, 2017), decreases their sense of belonging (Baumeister & Leary, 1995) and increases the feelings of loneliness (de Smet et al., 2017), which has serious negative consequences, both intrapsychic (e.g. low self-esteem, severity of depressive symptoms) and interpersonal (e.g. aggression towards oneself and others), lowering the chances of the successful resocialization and effective re-adaptation of inmates who have served their sentence (De Claire & Dixon, 1991).

Yet while the negative consequences of institutional isolation for the accumulation of psychosocial resources and resocialization process are quite well-acknowledged in the case of adult offenders (prisoners), they remain virtually unrecognized in children and teenagers who are held against their will in youth education centres. There are grounds for thinking, however, that the restriction of the psychosocial resources available to young people living in these centres may seriously impede the process of their social rehabilitation.

## Method

### Objectives

The aim of the study was to determine whether the temporal perspective of adolescents held in conditions of institutional isolation, pursuant to the decision of a family court to place a child or teenager in a youth education centre against their will, is associated with their mental functioning (stress, depression, loneliness). No previous research involving this social group, on the terms set by the present study, has been identified, which makes this a pioneering project.

Based on previous research, it was assumed that the perception of temporal perspective differentiates adolescents in institutional isolation in terms of their mental functioning (H1). A habitual focus on one of the dimensions of temporal perspective is linked to a less satisfying mental functioning of young people in conditions of institutional isolation (H2). A balanced perspective of time perception promotes good mental functioning (lower levels of anxiety and depression, better relationships with parents and peers) and more effective adaptation to the current situation in institutional isolation (H3).

### Participants

327 adolescents, aged 13–18, deemed socially maladjusted and placed in youth education centres in the Świętokrzyskie Province, were recruited to participate in the study. Eventually, 311 of them participated (38 female and 273 male). All participants were intellectually able. The respondent group had the following profile: 14.1% were 13-year-olds, 4.8% were 14-year-olds, 8% were 15-year-olds, 21.5% were 16-year-olds, 24.8% were 17-year-olds and 26.8% were 18-year-olds. The average length of stay in a JDC was  $M = 26.48$  ( $SD = 21.40$ ) months. The minimum stay in a JDC was 1 month and the maximum 124 months. The distribution of length of stay in a JDC was as follows: most of the young people, i.e. 60.5%, were held for up to 24 months and 15.4% for over 48 months. Most (30.5%) came from medium-sized towns (20–100,000 inhabitants) and from rural areas (24.1%), followed by large cities (over 100,000 inhabitants – 23.3%) and small towns (up to 20,000 inhabitants – 22.2%). Prior to being placed in their institution, the majority of the respondents lived in full families (37%), fewer with their mother only (31%) and fewer still with their father only (5.5%). A large percentage (25.7%) grew up outside of a family environment (e.g. foster family, adoptive family, orphanage, grandparents). 40% of the parents of the surveyed teenagers had full parental

authority, 50% had limited rights, and 10% were altogether deprived of parental rights. The reasons behind the family court's decision to place a teenager in a youth education centre varied between demoralization (68%) and criminal acts (39.2%). In the first group, most detainees were held in a centre due to frequent truancy and consequently the discontinuation of compulsory elementary education (68%). Some failed to be promoted to the next school grade more than once (27%). In the second group, most of the respondents used and traded in legal highs (42%), followed by those who participated in robberies and thefts under the influence of narcotics (23%) and those who traded in legal highs and drugs (27%). Of all respondents (311), as many as 16% thought that their parents were not interested at all in their upbringing.

### Measures

**ZTPI questionnaire;** PS-ZTPI – the Polish short version of the Zimbardo Time Perspective Inventory by Zimbardo and Boyd (1999). The tool, which consists of 4 parts, each containing 5 items, was used to capture the respondents' temporal perspective. The answers to each statement were marked on a 5-point scale, where "1" stood for "very untrue", and "4" for "very true". As per the procedure for the interpretation of results, answers were then assigned to each of the 4 perspectives: *past-negative* (diagnostic answers: 50, 34, 36, 54, 4), *present-hedonistic* (diagnostic answers: 23, 42, 31, 8, 44), *future* (diagnostic answers: 40, 13, 10, 21, 45), *past-positive* (diagnostic answers: 20, 7, 11, 2, 49).

**The Major Depression Subscale** (short version: 5 items) from the Revised Child Anxiety and Depression Scale (RCADS) (Chorpita, Yim, Moffitt, Umemoto & Francis, 2000). The tool was used to determine the severity of depressive symptoms experienced in the examined group. The respondents were asked to mark their answers on a 7-point scale, where "1" meant "definitely agree" and "7" meant "definitely disagree".

**The Perceived Stress Scale** – PSS-10 (Cohen, Kamarck & Mermelstein, 1983) in the Polish adaptation by Juczyński and Ogińska-Bulik (2009). The tool consists of 10 items and its purpose is to determine the respondent's subjective impressions regarding the experiences, thoughts and feelings related to the events of the previous month, on a 5-point scale, where "0" means "never" and "4" means "very often".

**De Jong Gierveld Loneliness Scale (DJGLS) (de Jong-Gierveld & Kamphuls, 1985)** is a partially balanced instrument consisting of 11 items: 5 positive and 6 negative. The word "loneliness" itself does not feature in the statements. The scale is characterized by good reliability and accuracy (de Jong-Gierveld & Kamphuls, 1985; de Jong-Gierveld & van Tilburg, 1999; Dykstra & de Jong-Gierveld, 2004; van Tilburg & Leeuw, 1991). The respondents were asked to mark their answers on a 4-point scale, where "1" means "yes" and "4" stands for "no". After the re-coding of the "negative" items, the total higher score is interpreted as a higher intensity of experienced loneliness.

**Family loneliness** – LLCA (family part – items only) the part investigating the experience of loneliness in the family (L-PART) of the Louvain Loneliness Scale for Children and Adolescents (Marcoen, Goossens & Caes, 1987), consisting of 12 items. Adolescents marked their answers to the statements on family relationships on



a 5-point scale, where “1” meant that the statement was not true for the subject, and “5” meant that the statement described the situation very well.

**Peer loneliness** – the short version of the Social and Emotional Loneliness Scale for Adults – SELSA-S; Social Loneliness Subscale (DiTommaso & Spinner, 1993, 1997), consisting of 5 items. Adolescents marked their answers regarding peer relationships on a 7-point scale, where “1” meant “I definitely disagree” and “7” means “I strongly agree” with the statement.

The survey used a socio-demographic questionnaire, on the basis of which the study group was described above at the beginning of the section “respondents”.

### **Procedure**

The research recruitment procedure commenced with the publication on the Education Development Centre website of information about the planned research and requests to conduct it at Polish youth educational centres. In response to the announcement, heads of six facilities (YEC) declared their readiness to cooperate. All pupils who consented participated in the research.

The research was conducted using the CAWI technique. Every respondent completed a battery of tests individually on the computer in the presence of a trained interviewer/instructor. Some of the data was also acquired on the basis of document analysis of individual pupil files. The material collected concerned the psychosocial functioning of youths from the period preceding their placement at a youth educational centre, which provided valuable information on their families, peer and school environment. The documents included: (1) psychologists’ assessment issued upon school referral to specify the norm vs. deviations from an intellectual norm; (2) results of interviews conducted by a social services worker within family environment (types of dysfunctions or pathologies in the educational environment, parents’ addictions, evaluation of the fulfilment of parental obligations, child-rearing styles, relations with parents and siblings, living and economic conditions, parent-school cooperation, youths’ behaviours towards their parents, siblings, peers, neighbours) and school environment (headteacher’s opinion regarding behaviour and academic achievements, timing and duration the occurrence of problems, and their types, types of interventions undertaken); (3) assessments by court-appointed guardians. These documents provide the basis for a Family Court to issue an order for an individual to be placed in a youth educational centre.

## **Results**

### **Data analysis**

Data analyses were carried out using IBM SPSS Statistics version 25. Compliance with the normal distribution was checked using the Kolmogorov-Smirnov test. The analysis showed that all variables were slightly deviated from the normal distribution (K-S test results were significant  $p < 0.001$ ), while the skewness value did not exceed the threshold of 0.8, meaning that the deviation was not significant (George & Mallery, 2016).

In order to determine the relationships between the different temporal perspectives, an analysis of Pearson's  $r$  correlation was performed. Due to the gender imbalance in the respondent group and in order to determine gender differences for the temporal perspective, a non-parametric Mann Whitney U test was carried out. This was followed by a two-stage cluster analysis to extract the profiles of participants in terms of temporal perspectives. With the help of the Kruskal Wallis test, the distinguished clusters were then compared with each other in terms of the level of intensity of depression, stress and also generalized, family and peer loneliness.

### Dimensions of temporal perspective – intercorrelations

Next, the analysis of correlations between the dimensions was carried out with the use of Pearson's coefficients  $r$ . The results are presented in Table 1.

**Table 1**

*Correlations of temporal perspective dimensions*

		Hedonistic-present	Future	Past-positive
Hedonistic-present	$r$	1	–	–
	$p$	–	–	–
Future	$r$	0.555	1	–
	$p$	< 0.001	–	–
Past-positive	$r$	0.554	0.776	1
	$p$	< 0.001	< 0.001	–
Past-negative	$r$	0.657	0.573	0.484
	$P$	< 0.001	< 0.001	< 0.001

$p$  – significance level;  $r$  – correlation value

The analysis demonstrated that in the surveyed group of young people, the hedonistic-present correlated strongly with the dimensions of future, past-positive and – most strongly – with the past-negative perspective. The *future* temporal perspective strongly correlated with positive and past-negative, but the relationship with past-positive was stronger.

These results have also revealed an interesting relationship; in the shortened Polish version of the Time Perspective Inventory (Przepiórka, Sobol-Kwapińska & Jankowski, 2016), the past-negative correlated negatively with the past-positive perspective and was unrelated to other dimensions, while in Stolarski's et al. (2017) study the positive correlation between the two dimensions was found in male but not in female subjects.

## Temporal perspectives – intergender differences

The Mann Whitney's test analysis was performed to compare male and female respondents in terms of their time perspectives. The results are presented in Table 2.

**Table 2**

*Intergender differences in the adopted temporal perspectives*

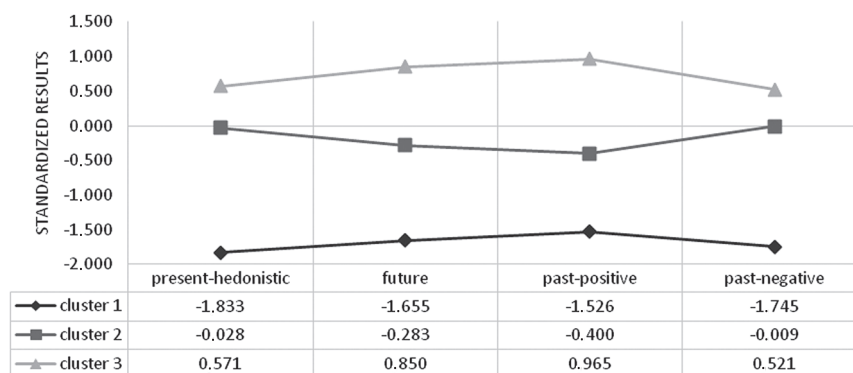
	Female ( <i>n</i> = 38)		Male ( <i>n</i> = 273)		<i>U</i>	<i>p</i>	$\eta^2$
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Present-hedonistic	14.87	3.74	14.74	4.80	5106.0	0.875	< 0.001
Future	14.47	4.09	14.51	4.87	5162.0	0.961	< 0.001
Past-positive	15.00	5.34	14.85	5.48	5072.0	0.825	< 0.001
Past-negative	16.00	5.22	14.81	4.79	4492.0	0.179	0.006

*M* – mean; *SD* – standard deviation; *U* – Mann Whitney test results; *p* – significance;  $\eta^2$  – effect size

Detailed data analyses failed to reveal any significant differences between genders in terms of adopted temporal perspective, which means that, regardless of gender, the teenagers held in JDC's showed similar results for each of the perspectives.

## Temporal perspectives found among adolescents held in JDC's – cluster analysis

In order to further explore the issue of temporal perspectives adopted by adolescents held in JDCs, a two-stage cluster analysis was conducted to determine the most similar groups. In the next step, a series of analyses was performed which compared the distinguished clusters in terms of the severity of depression, stress, family and peer loneliness. Figure 1 presents standardized values for the clusters obtained.



**Figure 1.**

*Cluster analysis for the participant's temporal perspectives*

Three different groups were distinguished in the analysis. Compared to other groups, the first, smallest group ( $n = 35$ ) scored significantly lower in every dimension of temporal perspective. In the second cluster ( $n = 156$ ) the participants scored higher in hedonistic presence and past-negative, and in the third cluster ( $n = 120$ ) there were higher scores for future and past-positive. Table 3 presents the means for each of the clusters.

**Table 3.**

*Means and standard deviations for the dimensions of temporal perspectives, taking into consideration their clustering*

	cluster 1		cluster 2		cluster 3	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Present-hedonistic	6.17	1.87	14.62	3.27	17.43	3.65
Future	6.60	2.14	13.15	2.84	18.57	3.19
Past-positive	6.54	1.88	12.69	3.07	20.13	3.11
Past-negative	6.49	1.92	14.91	3.44	17.48	4.16

*M* – mean, *SD* – standard deviation

### Psychological characteristics of the groups distinguished on the basis of cluster analysis

In the next part the researchers focused on the characteristics of the groups of adolescents determined on the basis of their adopted temporal perspectives. Using the Kruskal Wallis test (a non-parametric equivalent of one-way analysis of variance), a number of analyses were performed comparing the three clusters in terms of the severity of experienced depression, stress, family and peer loneliness. The results are presented in Table 4.

**Table 4.**

*Comparison of clusters in terms of the selected psychological variables*

	cluster 1		cluster 2		cluster 3		<i>H</i>	<i>p</i>	$\eta^2$
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Depression	16.09	5.62	20.09	6.14	17.86	5.78	18.5	< 0.001	0.06
Stress	17.34	5.87	20.35	6.34	18.71	6.66	7.56	0.023	0.02
Peer loneliness	13.09	5.59	17.90	6.01	14.61	6.82	31.01	< 0.001	0.10
Family loneliness	22.46	9.41	28.06	9.21	20.15	9.19	50.21	< 0.001	0.16
Generalized loneliness	21.43	6.67	26.59	6.87	22.93	8.40	22.04	< 0.001	0.07

*M* – mean, *SD* – standard deviation

The analysis revealed several significant differences in psychological variables in relation to their belonging to a cluster. It was only in respect of positive affect that no significant

differences between the groups were observed. In order to check the nature of these differences, an additional Dunn-Bonferoni test was carried out, comparing the results in pairs.

The adolescents in cluster 1 ( $p = 0.001$ ) and cluster 3 ( $p = 0.004$ ) exhibited significantly lower levels of depression than those in cluster 2. Also, the level of experienced stress was significantly different between cluster 1 and cluster 2 ( $p = 0.027$ ). Cluster 1 showed lower levels of stress than cluster 2. In cluster 1 ( $p = 0.002$ ) and cluster 3 ( $p < 0.001$ ) the scores were significantly lower for the levels of experienced loneliness, so these teenagers felt less lonely than those in cluster 2. Analogous results were found in reference to peer and family loneliness. In these cases cluster 1 ( $p < 0.001$ ;  $p < 0.001$ ) and cluster 3 ( $p < 0.001$ ;  $p = 0.004$ ) showed lower levels of loneliness.

In summary, adolescents who scored significantly lower in each temporal perspective seem to have been experiencing lower levels of loneliness, depression and stress. Interestingly cluster 2, which displayed a higher level of the hedonistic-present and past-negative in the profile, showed higher-intensity depression, stress, and sense of loneliness than the other clusters. The participants in cluster 3 seemed most balanced in terms of the psychological variables measured. It is worth noting that the strongest effect occurred in relation to peer and family loneliness, which means that the differences for these variables are the largest.

## Discussion

As previously indicated, the purpose of the analyses was to determine whether the temporal perspectives adopted by the socially maladjusted adolescents held against their will in institutional isolation may be linked to their mental functioning. It has been determined that the temporal perspectives of these young people are of great relevance to their mental status, and therefore their psychosocial development. In addition, we have confirmed that in conditions of institutional isolation, the adopted temporal perspective differentiated these adolescents in terms of their mental functioning (H1).

The results also supported H2, according to which a habitual focus on one of the time perspectives was related to the less satisfying mental functioning of young people held in conditions of institutional isolation. As many as half of the socially maladjusted teenagers were characterized by a negative attitude towards their past, either as a result of actually experienced unpleasant or traumatic past events, or of the present negative reconstruction of neutral events experienced in the earlier development periods. A negative vision of the past entails lower trust in relationships, while it also promotes the development of non-adaptive behaviours aimed at obtaining approval and care from others; it is also associated with making intuitive and spontaneous and not always well-thought-out decisions (Mello & Worrell, 2015; Molinari, Speltini, Passini & Carelli, 2016). This might be a reason why the respondents with a past-negative perspective tended towards current pleasures associated with the present-hedonistic perspective, linked with high impulsiveness, an active search for new and exciting sensations, and the avoidance any forms of distress as well as the tendency to engage in risky behaviours, which is typical of people who have difficulties in everyday life (Franken & Muris, 2005).

Despite this, the results clearly show that institutional environment is conducive to experiences of higher-severity depression and stress, as well as loneliness. This seems to be consistent with the findings of Zimbardo and Boyd (1999) and Kairys (2010), and also confirm the findings of other researchers (Budnikov, 2016; Stolarski, Ledzińska & Matthews, 2013; Stolarski, Zajenkowski & Zajenkowska, 2016; Temple, 2016) to the effect that a habitual focus on one of the temporal perspectives is related to such features of emotional regulation as depression, risk appetite, use of stimulants and addictive substances, and aggression. It can be also safely assumed that among the adolescents held in the conditions of institutional isolation, there are individuals with post-traumatic stress disorder, which was the subject of study by Stolarski and Cyniak-Cieciura (2016). The PTSD variable was not included in the present study but it is highly recommended that it be included in future investigations, particularly with the aim of reviewing Zimbardo's and Sword and Sword's conclusions that deviations in temporal perspective may be one of the mechanisms underlying the emergence and persistence of PTSD.

Only approximately 11% of the surveyed teenagers seemed to be experiencing lower levels of loneliness, depression and stress, while at the same time having significantly lower scores in all temporal perspectives. This data needs to be clarified in further research on a wider group of adolescents who live in institutional isolation. A positive attitude to one's past, which affects current behaviors, emotions and thoughts, as well as the focus on future goals and rewards and the ability to defer gratification in the name of a greater reward in the future, seems to be most conducive to the balanced mental functioning of as many as 39% of the adolescents participating in this study. These findings confirm the conclusions reached by Zimbardo and Boyd (1999), that the past-positive perspective is linked to less severe anxiety and depression. The fact that the teenagers who scored highest in the past-positive and future temporal dimensions turned out to be most balanced in terms of the psychological variables measured again speaks in favour of the significance of a balanced temporal perspective for a quality of life (Stolarski, 2016), including for adolescents who are held in institutional isolation. These results also support hypothesis 3, i.e. the assumption that a balanced temporal perspective promotes good mental functioning (lower anxiety and depression, better relationships with parents and peers) and more effective adaptation to the circumstances of being institutionalised, which was also consistent with research by Stolarski, Wiberg, Osina (2015).

In the present research, the strongest effect was observed in reference to peer and family loneliness, which confirms the importance of maintaining safe, positive and supportive bonds with significant others, particularly parents and peers (Baumeister & Leary, 1995; Boyd & Bee, 2014), and also of social support (Wentzel et al., 2010) in the proper formation of self-identity and, consequently, good psychosocial development. This, in turn, confirms the findings (of Heinrich & Gullone, 2006; Prinstein et al., 2009; Terrell, Terrell & von Drashek, 2000) that the failure of social integration in the period of adolescence enhances anxiety, depression and a sense of loneliness, which can be clearly observed among the adolescents remaining in institutional isolation. It seems that satisfying the need for close bonds, which is one of the most important human needs, not only favours the formation

of a balanced temporal perspective, but also helps teenagers cope with the challenges of adolescence. Interestingly, the functioning within a peer community of comparable status, while being separated from other basic (external) ecosystems, has not been yet the subject of in-depth analyses in the context of the formation of personal resources. In the future, therefore, it would be advisable to explore and recognize which resources are conducive to the formation of this time perspective among the socially maladjusted teenagers who are exposed to biological, psychological and social risk factors in adverse living conditions. Moreover, future studies should attempt to find out which of adolescents' psychosocial resources modify their chances of effective resocialization in the youth education facility followed by successful re-adaptation after leaving it.

Recognizing the temporal perspectives of young people who are socially maladjusted and held in resocialization facilities in conditions of institutional isolation is a crucial element of increasing the effectiveness of pedagogical work and expanding the pedagogical practice aimed at successfully completing the process of the social re-adaptation of deviant youth. This is particularly important in view of previous research which confirms that it is possible to modify an individual's temporal competences through educational and preventive interventions (Ishii, 2016; Tokarska, 2016; Tucholska & Tylikowska, 2016), therapeutic or training (James & Woodsmall, 2011; Sword et al., 2014; Zimbardo, Sword & Sword, 2013). What is more, the results of the present research are not supportive of the current social rehabilitation practice of work with socially maladjusted youth, consisting in forced social isolation in youth education centres.

Considering the fact that there are few studies in which the temporal perspective of adolescents has been analysed, whereas the authors failed to identify any such previous studies conducted in the population of adolescents held in conditions of institutional isolation, it seems important to replicate this type of research in order to verify these results and conclusions.

### Conflict of Interest Statement

The author(s) declare no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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## Abstract

**Introduction:** The aim of the research presented was to determine whether the temporal perspective of socially maladjusted adolescents, held against their will in conditions of institutional isolation, can be linked to the level of their mental functioning.

**Method:** The researchers applied standardized psychological tests in a survey of a group of 311 adolescents (38 females, 273 males), aged 13–18, who were held in a youth education center (YEC) following family court rulings.

**Results:** After a psychological characterization of three groups of adolescents with different temporal perspectives, distinguished on the basis of cluster analysis, it was proven that the temporal perspective of adolescents held in institutional isolation is crucial to the quality of their mental functioning. The participants who scored significantly lower in all dimensions of temporal perspective seemed to be experiencing lower-intensity loneliness, depression and stress. Those, on the other hand, whose perspective was of the present-hedonistic or past-negative types felt lonelier, lived under more stress and suffered from more severe forms of depression. The teenagers whose temporal perspective was past-positive and future-oriented turned out to be most balanced in terms of the investigated psychological variables, which may confirm the importance of a balanced temporal perspective for good quality of life.

**Conclusions:** The strongest effect was found in relation to peer and family loneliness, which indicates the importance of family and peers in the teenagers' psychosocial development. These findings promote further reflection on the legitimacy of institutional measures used in the rehabilitation of socially maladjusted youth to date, and the search for new, effective kinds of social rehabilitation intervention.

**Keywords:** temporal perspective, depression, stress, loneliness, socially maladjusted youth, institutional isolation

## PERSPEKTYWA TEMPORALNA I FUNKCJONOWANIE PSYCHICZNE MŁODZIEŻY NIEDOSTOSOWANEJ SPOŁECZNIE PRZEBYWAJĄCEJ W WARUNKACH IZOLACJI INSTYTUCJONALNEJ

### Abstrakt

**Wstęp:** Celem prezentowanych badań było ustalenie, czy perspektywa temporalna nieprzystosowanych społecznie adolescentów przebywających wbrew swojej woli w warunkach izolacji instytucjonalnej wiąże się z ich funkcjonowaniem psychicznym.

**Metoda:** Badania przeprowadzono w grupie 311 osób (38 dziewczynek, 273 chłopców) w wieku 13–18 lat przebywających w młodzieżowym ośrodku wychowawczym wskutek decyzji sądu rodzinnego za pomocą standaryzowanych testów psychologicznych umożliwiających pomiar badanych zmiennych.

**Wyniki:** Po dokonaniu charakterystyki psychologicznej wyodrębnionych na podstawie analizy skupień trzech grup adolescentów zróżnicowanych pod względem perspektywy temporalnej dowiedziono, że perspektywa temporalna adolescentów przebywających w warunkach izolacji instytucjonalnej ma duże znaczenie dla ich funkcjonowania psychicznego. Adolescenci, którzy uzyskali znacząco niższe wyniki we wszystkich wymiarach perspektywy temporalnej, wydają się charakteryzować niższym poziomem nęczenia odczuwanej samotności, depresji i stresu. Ci zaś, których charakteryzuje perspektywa terażniejsza hedonistyczna oraz przeszła negatywna, czują się bardziej samotni, doświadczają większego stresu i cierpią z powodu depresji. Najbardziej zrównoważeni pod względem mierzonych zmiennych psychologicznych wydają się ci nastolatki, którzy koncentrują się na pozytywnej przeszłości i przyszłości, co może potwierdzać znaczenie zrównoważonej perspektywy czasowej dla dobrej jakości życia.

**Wnioski:** Najsilniejszy efekt stwierdzono w odniesieniu do samotności rówieśniczej i rodzinnej, co wskazuje na znaczenie tych dwóch grup społecznych dla prawidłowego rozwoju psychospołecznego badanych nastolatków, a także sprzyja refleksji nad zasadnością dotychczas stosowanych rozwiązań instytucjonalnych wobec młodzieży niedostosowanej społecznie i poszukiwaniem nowych, skutecznych sposobów oddziaływań resocjalizacyjnych.

**Słowa kluczowe:** perspektywa temporalna, depresja, stres, samotność, młodzież niedostosowana społecznie, izolacja instytucjonalna