



Cover feature

Psychological responses to antisocial behaviour

Language competence: A hidden disability in antisocial behaviour

By Associate Professor Pamela Snow MAPS, School of Psychology and Psychiatry, Monash University

Let's consider the known risk factors for involvement in youth crime – male gender, early maltreatment, being raised in a low socio-economic status community, chaotic and/or coercive parenting, learning and/or behaviour difficulties at school, school exclusion and early school departure, being raised in single-parent households, and parental mental health/substance misuse histories (Stephenson, 2007). Now consider these same risks through a different lens – their implications for language development, both in early childhood and into adolescence and beyond. You may not have previously considered that all of the risks for antisocial behaviour and offending are also significant threats to the development of expressive and receptive language skills, that is, everyday oral language competence.

What is 'oral language competence'?

Oral language competence is the ability to both express and understand verbal messages. Language is comprised of a range of subskills, including semantics (vocabulary), syntax (grammatical rules for expressing different and increasingly complex meanings), phonology (rules of the sound system in a given language), morphology (rules pertaining to the structure of words), and pragmatics – the ability to modify language usage in a wide range of socially and culturally appropriate ways, ensuring that social conventions are observed (often referred to as social skills). Not surprisingly, given the complexity of the language skills that need to be mastered by early adulthood, language competence is vulnerable to a range of developmental threats.

Why does oral language competence matter?

Oral language competence has obvious importance for the development of everyday interpersonal skills, being the means by which we negotiate the business of everyday life. Its role in forming and maintaining interpersonal relationships makes it central to mental health across the lifespan. However it has an additional but sometimes overlooked developmental significance – as the basis of the transition to literacy in the first three years of school. The psycholinguistic research is clear that learning to read is fundamentally a linguistic task, drawing heavily on children's receptive language (comprehension) skills, narrative skills, vocabulary, and phonological and morphological 'knowledge'. Hence literacy researchers (e.g., Stanovich, 1986) have invoked the so-called 'Mathew Effect', a biblical reference to the idea that 'the rich get richer and the poor get poorer'. Considered in relation to the transition to literacy, this axiom holds that children who enter school with well developed oral language skills are ready to 'cross the bridge' from talking and listening to the more biologically unnatural reading and writing.

Children with poorly developed oral language skills on school entry will lag behind their more verbal peers, but will come to attention by the fourth year of schooling (if not before), when

there is a subtle but important change of gear, from *learning to read*, to *reading to learn*. When such students are male, and come from backgrounds characterised by some of the risks outlined above, they are likely to earn a label that is some variant of 'behaviour problem'. Indeed, Cohen and co-workers (1993) have observed that children enter the service delivery system by virtue of key adults' perceptions of the primary handicapping condition. In the case of young people at risk of antisocial behaviour, this is likely to be conduct disturbance rather than suspected language impairment. Learning problems and behaviour difficulties are often comorbid in the primary school years, but until recently, language competence has not been closely considered as a 'missing link' for young people at risk for antisocial behaviour, nor as a factor to consider in the context of intervention.

Oral language competence and young offenders

In the 1990s, international researchers in both speech pathology and psychology began to document the high cross-over between youth offending and oral language deficits. Australian researchers (see Snow & Powell, 2011a for review) have shown that young male offenders face a high risk (46-52%) of clinically significant, yet undiagnosed language impairments. On the one hand, such statistics are not surprising; young offenders exit school early and typically lack social skills. But what is the common factor underlying both the transition to literacy and the development of pro-social interpersonal skills? Language competence.

In our most recent study of 100 young males completing custodial sentences (Snow & Powell, 2011b), the prevalence of language impairment increased to 62 per cent in those who had a history of out-of-home care placement – in itself a marker of extreme vulnerability, but in many cases a missed early intervention opportunity. Young people who have experienced stressful early social-emotional environments are likely to be hypervigilant to the risk of interpersonal threat and have poorly developed social cognition skills. Coupling these risks with low socioeconomic status (overwhelmingly the case for young people in the youth justice system) creates a set of developmental conditions in which language development cannot flourish.

Implications of poor oral language skills

Processing of young people in the justice system

An unidentified language impairment places young people at particular disadvantage in their interface with the law. Every step of the forensic process is highly verbal, from answering initial questions from police at the scene of an alleged crime, to taking part in a forensic interview, being informed of one's rights, being formally cautioned, briefing a solicitor, and of course the experience of going to court and understanding the conviction/warning/bail conditions that arise from a court appearance.

Delivery of verbally-mediated psychological interventions

Many young offenders have comorbid mental health problems and their interface with youth justice services often triggers a referral for psychological services (this may be mandated, e.g., for sex offenders, or young people needing assistance with anger management or substance abuse). While interventions such as CBT and motivational interviewing have been shown to be efficacious with a wide range of high prevalence mental health/substance abuse disorders, these are talk therapies – that is, they rely on highly verbal interchanges and often operate at a meta-level (e.g., thinking about ones' own thinking). It is common in the course of psychological therapies too, for clinicians to use metaphors and analogies, which further draw on language and verbal reasoning abilities. While skilled practitioners may intuitively 'titrate' their language use in the therapeutic setting, it is likely that many young offenders struggle with the demands of these verbally-based interventions, and may, as a consequence, appear to be poorly engaged in the therapeutic relationship.

Restorative justice conferencing

In recent years there has been a move away from punitive/adversarial approaches to justice administration for young people, towards restorative conferencing – a formally facilitated discussion between a young offender (who must have pleaded guilty) and the person(s) affected by the offence. Restorative conferencing reflects a welcome shift towards therapeutic jurisprudence, and is aimed at restoring victims' sense of wellbeing and a young person's sense of belonging in the community. It is, however, a highly conversational process that draws on the young person's verbal processing skills and their ability to put their own thoughts, ideas and narrative into words, all the while conveying a sense of genuineness and authenticity. It remains to be seen what impact undetected language deficits have on victims' sense of satisfaction with the conferencing process and the extent to which 'restoration' actually occurs.

Delivering literacy interventions in the youth justice system

Many young people with unidentified language deficits failed to make the transition to literacy in the early school years, and have simply grown into adolescents with 'learning disabilities' and in many cases, comorbid mental health/behavioural problems. If their underlying oral language skills are still deficient, it is unlikely that they will show great benefit from literacy interventions that fail to address psycholinguistic precursors to literacy, particularly in the context of years of failure and other negative experiences in the school setting.

Opportunities for intervention

Perhaps children with suboptimal language skills would do better to arrive at school mute; this is difficult for adults to overlook. Instead, children with language impairments tend to have a

repertoire of basic social scripts, with which they get by. They also become proficient at avoiding interpersonal exchanges that put their verbal skills in the spotlight (e.g., Show'n'Tell in the early years). Avoidance comes in many guises, including disruptive and uncooperative behaviour. Behaviour is, after all, simply another form of communication, and children with unidentified language impairments may be trying to communicate messages such as "I am not fully understanding the complex, multi-stage commands the teacher is giving me".

Classrooms are very verbal environments, so it's hard to imagine how stressful and tiring it is for children with

unidentified language impairments to try to stay on task for six to seven hours a day (not to mention coping with the vicissitudes of friendships and the ever-changing social barometer in the playground). Cohen and co-workers (1993) completed formal language assessments on boys with externalising

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behaviour difficulties referred by primary schools to local child and adolescent mental health services, and found that one third had clinically significant but previously unsuspected language impairments. When primary school staff encounter boys with both learning and behaviour problems, they should be seeing 'red flags' that signal the need for a developmental assessment – ideally by both a speech pathologist and a psychologist.

As well as early intervention in the primary school years to treat at-risk children, there are opportunities to ameliorate the impact of oral language deficits on young offenders within the justice system through language-based interventions to specifically target communication difficulties. These include employing speech pathologists in youth justice settings, a practice which is well established in the UK and has recently been adopted at the Parkville Youth Justice Centre in Melbourne. (Interested readers can consult the 'Sentence Trouble' resource created by the UK Communication Trust at www.sentencetrouble.info/.)

Conclusions

Language deficits are not only invisible, but tend to masquerade as low IQ, or as behavioural phenomena such as rudeness, disinterest or poor motivation, all of which may harm a young person's education and/or passage through the justice system. Early evidence is emerging that language competence is a modifiable variable for young offenders, so it must be closely assessed to ensure that a potential intervention lever is not overlooked. ■

The author can be contacted at
pamela.snow@monash.edu

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