Hello
I am writing to make a brief submission to the above enquiry on behalf of myself and Professor Martine Powell (School of Psychology, Deakin University).

Over the last 12 years, we have been conducting research on the oral language (everyday talking and listening) skills of young male offenders. This research has been funded by nationally competitive bodies, such as the Australian Research Council and the Criminology Research Council. We have produced the largest number of research outputs in this area internationally (please see selected references below).

**Notable findings emerging from this research are as follows:**

- 50% of young male offenders, whether on community-based, or custodial orders, have a clinically significant, yet previously unidentified oral language impairment – i.e. deficits in both receptive (comprehension) and expressive (spoken) language;
- These language impairments cannot be accounted for on the basis of IQ, developmental disability or mental health status;
- Young people with more serious offence histories (i.e. involving interpersonal violence) are particularly likely to have a language impairment;
- Two thirds of young people who enter the custodial setting with a history of out-of-home care have a clinically significant language impairment;
- More than half of the young people identified as language impaired in the youth justice system report some form of early intervention (e.g. special assistance with reading) in the early school years, however two thirds have departed school by Year 8.

**Implications of these research findings span five key domains:**

- *Early intervention for “high-risk” boys* – those displaying both learning and behaviour difficulties in the early years of school. Our research indicates that the co-existence of such problems should be seen as a “red flag” that an underlying, but as yet unidentified oral language deficit may be present.
- *Forensic interviewing of young people* as witnesses, suspects, or victims - Young people being interviewed by police and court personnel are inherently vulnerable, and the existence of unidentified language impairment only serves to magnify this. Language impairments can “masquerade” as rudeness, low motivation, disinterest, and/or low IQ, further compromising the young person’s passage through the justice system.
- *Restorative Justice Conferencing* – This is a relatively new form of therapeutic jurisprudence that requires the offender to sit down in a formal conference with victim(s) and express remorse. It is an inherently conversational, and thus highly verbal process, hence our research calls into question its suitability for all young offenders (and by extension, their victims).
- *Psychological interventions* for young people in the justice system – All forms of counselling are highly verbal (hence the term “talk therapies”) and as such, their effectiveness with the young offender population may be diminished if suitable modifications to the language demands are not made.
- *Literacy interventions* in youth justice centres – Given the close nexus between oral language competence and the transition to literacy, our research provides a powerful argument that underlying oral language deficits need to be addressed in order for these young people to benefit from literacy interventions offered in the justice system.
We therefore consider that there is a significant group of young males who need to be identified and targeted for language-based intervention during the early-mid primary school years, as a way of promoting academic achievement and reducing the risk of early school disengagement. We also provide evidence that indicates that literacy programs that are provided to offenders in the justice system need to be based on psycholinguistic evidence that links linguistic competencies to literacy skills. Language competence also needs to be considered in relation to the demands of therapeutic interventions offered to offenders.

Some of this thinking is summarised in the attached paper.

Publications


We would be happy to provide any further information you may require.

Kind regards

Pam

-----------------------------------
Pamela Snow, PhD, FSPAA, MAPS
Associate Professor
School of Psychology and Psychiatry
Bendigo Regional Clinical School
Monash University