Acknowledgements

**Chief Investigators:** Claudia Vecchiato (Juvenile Justice - JJ) and Devon Indig (Justice Health - JH)

**Co-Investigators:** JJ: Eric Heller, Natalie Mamone, Rodney Beilby, Peter Muir; JH: Una Champion, Claire Gaskin, Gilbert Whitton, Leigh Haysom, Julie Carter, Paul van den Dolder

**Survey team:** JJ: Psychologists, Counsellors and Research Psychologist JH: Clinical Coordinator and Nurses

**Operational support:** JJ: Centre Managers and Youth Officers JH: Nurse Unit Managers

**Funding bodies:** Juvenile Justice, NSW Health (Centre for Aboriginal Health)

**Participants**
Overview

- Background to the 2009 YPiCHS
- Methodology
- Results: This paper focuses on offending behaviour, associated personality traits, mental health, AOD use and intellectual functioning amongst this population
- Discussion

Average daily number in custody

Daily Average Number in Custody from 2003/04 to 2008/09

Note: 1. Data Source: DJJ RPE Standard Statistical Reporting Database.
2. Information regarding admissions to Kariong JCC is excluded from ALL years.
The Baseline Survey

- **N=361** overall participants (N=452 in custody between August and October 2009)
- **Response rate:** 80% all young people; 95% among those invited to participate; N=21 refusals

- **N=311** face-to-face psychological tests

- 8 juvenile justice centres, 1 juvenile correctional centre
- Each participant took approximately 1 day to do all components of the study

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2009 YPiCHS Baseline Survey psychological components

1. Psychometric testing (JJ Psychologists / Counsellors)
   - **IQ testing** (N=295):
     - Under 16: WISC-IV (Australian)
     - 16+ years: WAIS-IV (Australian)
   - **Mental illness** (N=293):
     - 2009 Schedule for Affective Disorders and Schizophrenia for Children - Present and Lifetime (K-SADS-PL)
     - This includes all DSM-IV Axis 1 Disorders
   - **Abuse/neglect** (N=307): Childhood Trauma Questionnaire (CTQ)
   - **Criminal history / Self-reported offending behaviour** (N=308)
   - **Personality Traits** (N=308): Antisocial Process Screening Device (APSD)
• What offences were these young people in custody for?

• What do they say about why they did it?

### Most Serious Offence at testing (%)

<table>
<thead>
<tr>
<th>Offence category</th>
<th>Male (n=319)</th>
<th>Female (n=42)</th>
<th>ATSI (n=174)</th>
<th>Non ATSI (n=187)</th>
<th>Total (n=361)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other acts intended to cause injury</td>
<td>29%</td>
<td>48%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
</tr>
<tr>
<td>Aggravated assault</td>
<td>16%</td>
<td>29%</td>
<td>17%</td>
<td>17%</td>
<td>18%</td>
</tr>
<tr>
<td>Robbery and extortion</td>
<td>17%</td>
<td>5%</td>
<td>10%</td>
<td>20%</td>
<td>15%</td>
</tr>
<tr>
<td>Break and enter</td>
<td>16%</td>
<td>5%</td>
<td>25%</td>
<td>5%</td>
<td>15%</td>
</tr>
<tr>
<td>Homicide</td>
<td>7%</td>
<td>5%</td>
<td>4%</td>
<td>10%</td>
<td>7%</td>
</tr>
<tr>
<td>Other dangerous/negligent acts</td>
<td>5%</td>
<td>0%</td>
<td>5%</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Aggravated and other sexual assault</td>
<td>4%</td>
<td>0%</td>
<td>2%</td>
<td>6%</td>
<td>4%</td>
</tr>
<tr>
<td>Other</td>
<td>6%</td>
<td>10%</td>
<td>6%</td>
<td>6%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Note: 1. Data Source: JJ Client Information Management System (CIMS)
2. Note: Profile includes the whole sample (N=361)
Top 10 self-reported reasons first did crime: YPICHs 2009

1. Needed money for drugs
2. Wanted own money to get things I wanted
3. Hanging out with wrong crowd
4. Don’t know why – it just happened
5. All my friends were doing it
6. It was fun/was easy
7. Peer pressure
8. Boredom
9. Needed money to buy alcohol
10. Runs in my family/my family all do crime

What is correlated with offending behaviour in adolescents?

• Early disruptive behaviour:
  – Disruptive / antisocial behaviour by the young person
  – Early experimentation and use of alcohol and other drugs
When are these behaviours most likely to develop?

- When there is “disengagement” from the social systems surrounding the young person, in particular disengagement from:
  - School
  - Family

Can these be related to brain development?

- Experiences of ongoing abuse or trauma can impact on brain development
- Brain development can impact on disruptive behaviour i.e. adolescents are maturing in cognitive functioning
“Cognitive functioning”? 

- During adolescence, there is continuing development in young people’s skills in: 
  - Regulating emotions 
  - Co-ordination of thinking processes 
    - Planning 
    - Organising information 
    - Problem solving 
    - Considering consequences 
    - Correctly “reading” others’ feelings 

Disruptive / antisocial behaviour 

- Conduct disorder 
- Antisocial traits such as impulsivity, narcissism & callousness 

- Other mental health issues that are disruptive 

- How many young people in detention show these issues?
Mental health (diagnosis) by gender and Aboriginality, YPICHS 2009 (%)

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>ATSI (N=148)</th>
<th>Non-ATSI (N=147)</th>
<th>Male (N=256)</th>
<th>Female (N=39)</th>
<th>Total (n=293)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct disorder</td>
<td>66</td>
<td>53</td>
<td>57</td>
<td>72</td>
<td>59</td>
</tr>
<tr>
<td>Substance abuse</td>
<td>58</td>
<td>42</td>
<td>49</td>
<td>49</td>
<td>49</td>
</tr>
<tr>
<td>Alcohol abuse</td>
<td>45</td>
<td>42</td>
<td>42</td>
<td>54</td>
<td>44</td>
</tr>
<tr>
<td>Substance dependence</td>
<td>47</td>
<td>32</td>
<td>40</td>
<td>36</td>
<td>39</td>
</tr>
<tr>
<td>ADHD</td>
<td>32</td>
<td>28</td>
<td>27</td>
<td>49</td>
<td>30</td>
</tr>
<tr>
<td>Alcohol dependence</td>
<td>21</td>
<td>24</td>
<td>21</td>
<td>33</td>
<td>23</td>
</tr>
<tr>
<td>PTSD</td>
<td>19</td>
<td>22</td>
<td>17</td>
<td>30</td>
<td>20</td>
</tr>
<tr>
<td>Depression</td>
<td>16</td>
<td>18</td>
<td>14</td>
<td>36</td>
<td>17</td>
</tr>
<tr>
<td>ODD</td>
<td>18</td>
<td>7</td>
<td>9</td>
<td>31</td>
<td>12</td>
</tr>
<tr>
<td>Any psych disorder</td>
<td>92</td>
<td>82</td>
<td>86</td>
<td>92</td>
<td>87</td>
</tr>
<tr>
<td>2 or more disorders</td>
<td>79</td>
<td>67</td>
<td>70</td>
<td>92</td>
<td>73</td>
</tr>
</tbody>
</table>


Mental health (diagnosis)

- Disruption in mental health needs amongst this population are also reflected in the higher prevalence of Depression and PTSD
- Mean number of diagnoses per participant:
  - Overall: 3.3 diagnoses
    - Male: 3.1 diagnoses
    - Female: 4.8 diagnoses
    - ATSI: 3.7 diagnoses
    - Non ATSI: 3.0 diagnoses
- Differences between gender and Aboriginality were significant
### Self-harm/suicide (self-report) by gender and Aboriginality, YPICHS 2009

<table>
<thead>
<tr>
<th></th>
<th>ATSI (N=148)</th>
<th>Non-ATSI (N=147)</th>
<th>Males (N=256)</th>
<th>Females (N=39)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever admitted mental hospital</td>
<td>11</td>
<td>7</td>
<td>6</td>
<td>28</td>
</tr>
<tr>
<td>Ever considered self-harm</td>
<td>20</td>
<td>21</td>
<td>19</td>
<td>35</td>
</tr>
<tr>
<td>Ever self-harmed</td>
<td>18</td>
<td>15</td>
<td>14</td>
<td>35</td>
</tr>
<tr>
<td>Ever considered suicide</td>
<td>17</td>
<td>15</td>
<td>14</td>
<td>28</td>
</tr>
<tr>
<td>Ever attempted suicide</td>
<td>11</td>
<td>9</td>
<td>8</td>
<td>23</td>
</tr>
<tr>
<td>High/very high psychological distress (K10 score &gt;21)</td>
<td>26</td>
<td>30</td>
<td>24</td>
<td>55</td>
</tr>
</tbody>
</table>


### Childhood Trauma Questionnaire (CTQ)

- N = 307: 198 Male; 18 Female

- Results from the Minimisation and Denial Scale suggests under-reporting of abuse, trauma and neglect.
CTQ Results

Experience of some level of:

- emotional abuse = 34%
- physical abuse = 36%
- sexual abuse = 11%
- emotional neglect = 37%
- physical neglect = 34%

Intellectual functioning

- How do our YP compare to the general population in regard to intellectual functioning?
Levels of intellectual functioning

• 77.3% of young people scored 89 or below.
  – The normative standardisation sample expects that only 25% of the population will score in this range

• 13.6% (n=40) scored in the Extremely Low Range of 69 and below
  – This range is consistent with intellectual disability (although an adaptive functioning assessment is also needed)
• What about those antisocial behaviours?

Antisocial traits

• There are multiple causal pathways through which adolescents develop antisocial patterns of behaviour
• Whilst adolescence is a time of maturing cognitive functioning, only a small percentage show antisocial behaviour.
• A range of other life experiences and family circumstances (both positive and negative) impact on a child’s vulnerability or resilience.
Antisocial Process Screening Device (APSD) (Frick & Hare, 2001)

- Measures 3 constructs that place a child/young person at risk of developing antisocial behaviour:
  - Callous / unemotional traits
  - Narcissism
  - Impulsivity

YPiCHS 2009 and APSD

- All 3 traits are present in the population
- Young people reported higher levels of impulsivity than the other traits
- Impulsivity means that young people are more likely to engage in high risk activities
  - Further data analysis showed that impulsivity is predictive of offending behaviour in the YPiCHS sample
Alcohol and Other Drug Use

Ever used drugs by drug type, 2009 YPICHS

Average age of first use

Factors related to first trying drugs by gender and Aboriginality, YPICHS 2009

<table>
<thead>
<tr>
<th></th>
<th>ATSI (N=148)</th>
<th>Non-ATSI (N=147)</th>
<th>Males (N=256)</th>
<th>Females (N=39)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer pressure</td>
<td>66</td>
<td>57</td>
<td>62</td>
<td>54</td>
</tr>
<tr>
<td>Curiosity</td>
<td>56</td>
<td>53</td>
<td>55</td>
<td>54</td>
</tr>
<tr>
<td>For fun</td>
<td>31</td>
<td>32</td>
<td>33</td>
<td>21</td>
</tr>
<tr>
<td>Exciting</td>
<td>20</td>
<td>21</td>
<td>21</td>
<td>15</td>
</tr>
<tr>
<td>It was available</td>
<td>20</td>
<td>21</td>
<td>22</td>
<td>13</td>
</tr>
<tr>
<td>Feel better</td>
<td>20</td>
<td>21</td>
<td>21</td>
<td>23</td>
</tr>
<tr>
<td>Take a risk</td>
<td>8</td>
<td>13</td>
<td>12</td>
<td>5</td>
</tr>
<tr>
<td>Family problems</td>
<td>9</td>
<td>8</td>
<td>8</td>
<td>10</td>
</tr>
</tbody>
</table>

Disengagement from school and family systems

Social disadvantage
Disengagement from school

YPiCHS 2009: Family experiences

- 45% of young people have had a parent in prison
- 10% currently had a parent in prison
- 12.5% had a deceased parent
- 8% had a child of their own
YPiCHs 2009: Accommodation

- 6% of young people reported being unsettled or having no fixed place of abode (prior to custody)
- The majority (80%) of young people reported living in the family home prior to custody
- Young women were more likely than young men to have moved 4 or more times in the 6 months prior to custody
- Aboriginal young people more likely to have moved four or more times in the 6 months prior to custody

YPiCHS 2009: Out of home care experience

27% of young people reported being placed in out of home care before 16 years of age
- 43% said they were placed in care before age 10
- 64% placed into care once; 27% 3 or more times
- Majority were placed into either Foster Care placements (46%) or with other family members (28%)
- Further data analysis showed that being in OOHC is predictive of offending behaviour in the YPiCHS 2009 sample
YPiCHS 2009: Peer Influence

75% of young people took their close friends’ opinions into account when they made a decision

- This was so more for non-Aboriginal (82%) than Aboriginal young people (67%)
- Young women (78%) were more likely to indicate their friends pushed them to succeed and do interesting things that they would not do by themselves than were young men (61%)
- By contrast, 41% reported that their close friends sometimes push them to do foolish or stupid things.
- There were no significant differences by gender or Aboriginality about the negative influence of close friends to encourage young people to do foolish things.

YPiCHS 2009: Violent behaviour

- Nearly two in three (64%) young people had been in a physical fight in the past six months
- 25% had been in a fight **four or more times** in the past six months – for both genders
- Of those who had been in a fight:
  - for 46%, it was with a friend or someone they knew
  - for 39%, it was with a stranger
- 14% of young men and 10% of young women needed treatment by a doctor or nurse as a result of the fight.
YPiCHS 2009: Education history

• Only 38% were going to school prior to custody
• Average age of leaving school was 14.4 years
• 82% were going to school whilst in custody

Education history (cont.)

• 88% had been suspended from school at least once
  – 66% reported three times or more
• Nearly half had been excluded from school (47%)
• 58% had missed or skipped class five or more times
• 41% had attended a special class or special school
Conclusions

Young people who enter custody present with complex and multiple risk-taking behaviours and are a group of young people with high needs:

• They have early experiences of abuse, social disadvantage and disruption in the family and education systems
• They show a high prevalence of mental health disorders and experiences of ongoing abuse

Conclusions, cont.

Young people in custody also show:

• personality traits that leave a young person more prone to antisocial and criminal behaviours
• These traits are combined with the various negative environmental factors
What about brain development?

• Adolescence is a time when we refine our abilities to co-ordinate thought processes, regulate our emotions and consider consequences
• All of these brain processes are impacted on by negative experiences

Conclusions

In order to improve criminal justice interventions, there needs to be a focus on family/education systems and on conduct disorder.

Juvenile Justice is building a suite of programs that:
• For under 15 year olds, can assist the parents/carers
• For older adolescents, can assist young people to best develop thought processes and counter antisocial thinking
Where do I find the full report: 2009 YPiCHS

- Baseline survey
  - Baseline report complete:
    - Scroll down to “Research”
    - Or: google “jj nsw”
    - Journal articles / Conference presentations

- Follow-up survey (3, 6 and 12 months)
  - Follow up interviews completed
  - Follow up report to be written

Any questions?

Thank you,

[Natalie.mamone2@dhs.nsw.gov.au](mailto:Natalie.mamone2@dhs.nsw.gov.au)