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Submission to the Queensland Parliament's Community Support and Services Committee Criminal Law (Raising the Age of Responsibility) Amendment Bill 2021 Inquiry

November 2021

Executive Summary

Life Without Barriers continues to call on all State and Territory governments to raise the minimum age of criminal responsibility (MACR) to at least 14 and is an active member of the National #Raise The Age Campaign Alliance.

Life Without Barriers has a proven record of delivering diversionary services to young people involved in the criminal justice system and their families in Queensland and New South Wales, including the evidence based Multisystemic Therapy (MST) Program. Life Without Barriers also delivers Out-of-Home Care (OOHC), including Residential OOHC, to over 2,200 young people, including a large number of young people with justice involvement.

Life Without Barriers supports the amendments proposed in the *Criminal Law (Raising the Age of Responsibility) Amendment Bill 2021* and advocates for the following:

- 1) Lifting of the Minimum Age of Criminal Responsibility to 14 years.
- 2) That therapeutic responses be more widely available to young people exhibiting behaviour considered to be antisocial in nature, irrespective of whether these young people are aged below a revised MACR, or above it.

Life Without Barriers advocates for interventions that are underpinned by evidence of effectiveness. Life Without Barriers presents a summary of research on adolescent brain development, which helps explain why offending over the life-course peaks in late adolescence. Life Without Barriers argues that the hormonal, developmental, and environmental factors that contribute to anti-social behaviour by adolescents (whether defined as criminal or not) substantially reduce the culpability of this behaviour. Life Without Barriers also urges a reduction in the use of responses – including punitive sanctions – that have been proven to either entrench offending or achieve no reduction in the rate or severity of future offending. Detention has been conclusively proven to impose long term net costs on society through lower rates of workforce participation, meaning that a rehabilitative focus makes more sense for both the young person individually and for the wider community.

We advocate for additional therapeutic interventions that demonstrate that young people can overcome early traumatic experiences and manage their pain-based behaviours, and which also address their other criminogenic needs. Other criminogenic needs include the absence of adequate parental supervision and attachment, anti-social behaviour, lack of education, literacy or job skills, expressed non-conformist behaviours, values, and attitudes, substance abuse and association with anti-social peers. By addressing these underlying factors, the best success will be achieved in reducing anti-social behaviour and diverting the highest risk young people from a life-long trajectory of recidivism, and from life-long disadvantage and exclusion more generally.

Finally, Life Without Barriers encourages the Queensland Parliament's Community Support and Services Committee to consider the findings of the ACT Government's independent review into raising the MACR headed by Emeritus Professor Morag McArthur. This report outlines ways in which an Australian State or Territory can successfully raise the age.

Brain development, child maltreatment and the MACR

Brain Development

The likelihood of offending peaks at the age of 16 for non-violent offences and tapers rapidly from that point onward, and that violent offending peaks at age 17 to 18, tapering off rapidly from the age of 20¹. Consequently, brain maturity, in combination with environmental factors, influences the propensity of young people to commit crime.

¹ Farrington, D. (1986) Age and crime, in Tonry, M & Morris, N (eds), *Crime and justice: An annual review of research*. University of Chicago Press: 189–250

Harvard University's main medical teaching facility – the Massachusetts General Hospital – has established the “Center for Brain, Law and Behavior” that focuses on understanding how brain functioning impacts on criminal responsibility, competency to stand trial, competency to make or contribute to medical decisions, and testamentary capacity, among other things.

Their research, along with the work of others, has enabled some generalisations to be made about the functioning of adolescent brains relative to mature brains² (with the brain generally considered to have fully matured by the age of 30). Due to immaturity, adolescents:

- are more reactive in emotionally charged situations
- are more impulsive (reducing the likelihood that they can consider all options open to them)
- can often correctly assess risks, but make relatively poor assessments of the trade-off between a risk they've assessed and an anticipated reward
- under-value delayed gratification
- are unlikely have a fully developed capacity for empathy
- have a stronger drive towards sensation-seeking, which contributes to risk-taking.

Another consistent message demonstrated by research is that the trajectory of cognitive maturity is highly variable between individual young people, such that generalisations cannot be reliably made about expected minimum cognitive functioning at a particular age. This means that bright-line cut-offs in the justice system have the potential to deliver substantial injustices. A young person may have average cognitive capacity for their age in some cognitive domains but be greatly delayed in other domains. In the absence of a comprehensive cognitive assessment, it can be impossible to understand the drivers behind a young person's anti-social behaviour, or to be certain whether a young person could form *mens rea* for their alleged offence. Indeed, without a proper assessment, it is hard to be certain that a young person can fully comprehend the significance of the court and supervision process to which they are subsequently subject.

Child Maltreatment

Life Without Barriers' observations of the high proportion of young people who have experienced child maltreatment who also have involvement in the justice system, accord with research findings on correlations between the two types of State involvement. The Australian Institute of Family Studies specifically examined the cohort of young people in OOHC, who can be assumed to have been exposed to particularly severe child maltreatment and found that 13% of these young people had also been under a youth justice supervision order at some time over a four year period³. Supervised orders are only imposed on young people who have had multiple contacts with the justice system, or have been found guilty of a serious offence, so are a sub-set of the small group of 2.5% of young people who have a finalised court appearance. We note that the prevalence of justice involvement is even higher among young people in residential care, which is a cohort that has usually experienced the most severe maltreatment. Another study on the effectiveness of police cautions in preventing future offending also found that children who had been maltreated and cautioned were *almost four times as likely to re-offend* than those who have not been maltreated⁴. Further evidence of the link between child maltreatment and offending is presented below in section 5.1.

Richards⁵ assembled a list of factors peculiar to adolescents that appear to be responsible for their higher observed rates of offending, with these factors often interlinking to elevate offending risk. She included some of the factors already mentioned (such as the urge for sensation seeking) but added further

² Cohen, A.O. & Casey, B.J. (2014) Rewiring juvenile justice: the intersection of developmental neuroscience and legal policy. *Trends in Cognitive Sciences*, v.18, pp. 63-65.

³ Australian Institute of Health and Welfare 2019. *Young people in child protection and under youth justice supervision: 1 July 2014 to 30 June 2018*. Data linkage series no. 25. Cat. no. CSI 27. Canberra: AIHW.

⁴ Dennison, S., Stewart, A. & Hurren, E. (2006) *Police cautioning in Queensland: the impact on juvenile offending pathways*. Trends and Issues in crime and criminal justice. No. 306. Australian Institute of Criminology.

⁵ Richards, K. (2011) *op. cit.*

additional factors identified through research:

- Alcohol and drugs have been found to act in a more potent way on minors than adults, offending often occurs under the influence of alcohol and drugs, and regular substance use is a strong predictor of recidivism⁶.
- Intellectual disabilities are more common among minors under the supervision of the criminal justice system than among adults under the supervision of the criminal justice system or among the general Australian population, suggesting an interaction between intellectual disability and immature brain development⁷.
- Mental illness is over-represented among juveniles in detention compared with those in the community, and “in combination with substance abuse, mental disorders do play a part in criminal behaviour for some offenders”⁸. The Young People in Custody Health Survey, conducted in New South Wales in 2005, found that 88 percent of young people in custody reported symptoms consistent with a mild, moderate or severe psychiatric disorder.

Experience supporting young people involved in the justice system

Multisystemic Therapy Program Outcomes - YouthChoices

Life Without Barriers delivers Multisystemic Therapy program in South East Queensland to young people involved in the justice system, working with parents and caregivers to stop reoffending. Life Without Barriers also oversees the delivery of Multisystemic Therapy by other organisations across Australia and New Zealand. Life Without Barriers is the Australasian MST Network Partner licensed by MST Services to support the development and ongoing delivery of MST in Australia and NZ. We currently support 10 agencies (15 teams) in this capacity, including our own teams in QLD.

Life Without Barriers has delivered the Multisystemic Therapy Program (MST) under QLD government’s Social Benefit Bond initiative, also known as *YouthChoices*, since 2017. This program has demonstrated significant success in reducing offending behaviour and nights in custody, increasing school engagement and pro-social activity amongst a range of other outcomes and is well suited for ongoing implementation across Queensland, including in regional locations.

MST, as developed and governed internationally by MST Services, is unique in addressing the multiple factors related to youth offending across the key settings within which the young person is embedded: their family, peers, school, neighbourhood, community and other support networks. Unlike other therapeutic programs that focus on specific symptoms of young offenders’ antisocial behaviour, MST treats the root causes of these behaviours by addressing key factors in the young offenders’ social environment in which this behaviour originates. The aim of MST is to provide young offenders and their families with the problem-solving and other skills and resources needed to successfully prevent further involvement with the youth justice system.

Since October 2017 Life Without Barriers has delivered MST to the families of young people on supervised court orders across South East Queensland, with the goal of reducing reoffending. Success of the program is measured over 18 months after completion of intervention, to find out whether results are sustained. Impressive results in South East Queensland include:

- MST proved effective with young people who have more charges, higher rates of serious offences & more previous nights in custody than is usual for young people on supervised orders
- The Year 2 cohort of the Bond recorded 43% fewer charges than expected
- Nights spent in detention were 95% lower than expected for young people in the YouthChoices Year 2 cohort, exceeding the 76% result (over 12 months) for Year 1,

⁶ Prichard, J. & Payne, J. (2008) *Alcohol, drugs and crime: a study of juveniles in detention*. Public Policy Series, No. 67. Australian Institute of Criminology. Also Indig, D., Frewen, A. & Moore, E. (2016) Predictors and correlates of re-incarceration among Australian young people in custody. *Australian & New Zealand Journal of Criminology*, vol. 49(1): 73-89.

⁷ Richards, K. (2011) *op. cit.*

⁸ Forsythe, L. & Gaffney, A. (2012) *Mental disorder prevalence at the gateway to the criminal justice system*. Trends & issues in crime and criminal justice no. 438. Canberra: Australian Institute of Criminology.

- Where the Year 2 cohort did reoffend there was an 18% reduction in the seriousness of these offences
- Aboriginal and Torres Strait Islander families were just as likely to agree to referral to MST and were more likely to complete MST – than non-indigenous families

Working with Young People across Australia

The work of Life Without Barriers with sentenced offenders aged 10 to 17 and with young people in OOHHC, provides us with daily insight into the strong link between child neglect and abuse and youth involvement in the justice system. Our observations are consistent with research trends that suggest increased severity of child maltreatment is correlated with increasing frequency and intensity of contact with the justice system.

Life Without Barriers' substantial experience supporting young people with youth justice involvement has given us a strong understanding of the life story and adversities these young people face. Life Without Barriers has observed that most young people with justice involvement experience at least one of the following:

- psychological impacts from past trauma, abuse and/or neglect
- developmental delay (either congenital or stemming from child maltreatment)
- mild to moderate intellectual disability, or another disability (e.g., autism)
- acquired brain injury
- a diagnosed or undiagnosed mental illness
- a substance misuse problem, at times linked to a mental illness or past trauma.

Many young people have several of these challenges that impact on their capacity to understand and therefore make pro-social choices, and significantly contribute to their engagement in offending. Although Life Without Barriers delivers a range of supports to vulnerable young people through the NDIS and through programs funded by State and Territory child safety agencies and health services, the need for support far outstrips funded supply, which has implications for rates of future offending.

Our experience working with young people at risk includes:

1. At-risk youth:

- *Out of Home Care (OOHC)*: Life Without Barriers is one of Australia's largest OOHHC providers, operating in every state and territory. In 2020, we supported 4,573 young people through our network of 2,911 foster and kinship carers
- *Youth Advocate Program (YAP)*: Supported 43 Young People. Personalised and structured mentoring program to help young people transition out of home, back to home, or to a new home
- *Transition from Care (TFC) Program*: Practical assistance for young people aged 15-18 years who are transitioning from care, with a focus on building life skills and helping achieve education/training and employment goals
- *Next Step Plus (QLD supported 900 young people, of which 200 were Indigenous)*: Practical advice and support for young people leaving care focusing on managing finances; accessing housing, legal advice, training and employment; as well as support maintaining safe, strong and healthy relationships

2. Education, training and employment:

- *Young People's Employment Pathways (Young PeopleEP) WA and NSW*: Offered by Life Without Barriers and Joblife Employment. Specifically designed to support young people with disability to gain job-ready skills and experience and find meaningful employment. Together we provide a range of pathways including open, supported and self-employment
- *School Leaver Employment Supports (SLES) WA and NSW*: Supports young people to develop work readiness skills, build confidence, become independent travellers, understand a workplace, type of work they would enjoy. Focus is on practical hands-on work experience
- *NISS Employment Mentoring Program NSW*: Provides employment support to clients within our National Immigration Support Services Program

- *EdGE Program*: Mentoring support and outreach for young people to help them re-engage with school and develop a positive connection with education
3. Mental Health and Homelessness:
- Residential programs providing community-based homeless young people who show signs and symptoms of mental illness while homeless or at risk of homelessness. The service provides medium-term accommodation and clinical support with a strong focus on overcoming social disadvantage and enhancing social inclusion
 - *#synergy*: Youth Mental Health Program providing support for Young People with significant mental health challenges through psychological assessment, intervention and case management
 - *Alcohol and Other Drug (AOD) Treatment*: Life Without Barriers administers several AOD programs including voluntary counselling, assertive outreach, police drug diversion and remand group counselling

Evidence on the effect of policing and criminal sanctions on future youth offending

It is worth commenting on which elements of the existing youth justice system are serving the community well. Elements of the existing system should remain if they are proven to reduce frequency or severity of offending, or lead to complete desistance, whilst going some way towards meeting community expectations.

A number of studies have analysed the effectiveness of various elements of the justice system in reducing the incidence of crime, including repeat offending (recidivism). Criminological analysis of the effectiveness of justice responses tend to examine one or both of the following aspects:

- a. Deterrence effect, i.e. how effectively an element of the justice system shifts the risk-reward balance away from offending and towards lawful behaviour.
- b. Rehabilitation effect, i.e. how effectively a justice response addresses the root causes of offending so pro-social behaviour becomes the natural path.

A Noetic Solutions review, commissioned by the NSW Government, reviewed the literature and all available interventions that had been reported to successfully reduce youth offending. They concluded the following:

Empirical studies conducted in Australia, the USA, New Zealand and Europe clearly show that traditional penal or 'get tough' methods of reducing juvenile crime, such as juvenile incarceration, overly strict bail legislation, trying juveniles in adult courts, 'scared straight' programs and so on, are not effective. Traditional penal or 'get tough' approaches are ineffective due to the stigmatising effect of labelling young offenders, reinforcement of offenders' criminal behaviour resulting from the collective detention, lack of pro-social influences and failure to address the underlying behaviour behind the offending behaviour. Not only do these methods tend to be ineffective in reducing recidivism among young people, but they are also amongst the most costly means of dealing with juvenile crime due to high immediate costs and ongoing long-term costs to the juvenile justice system due to continued contact with the criminal justice system.⁹

It is broadly agreed that a police presence is effective in reducing crime committed in public places but does not change rates of crime committed in private (such as domestic and family violence)¹⁰. Dennison, Stewart and Hurren from Griffith University examined the impact of police cautioning on future youth offending on a birth cohort from 1984, controlling for key risk factors¹¹. They found that young people

⁹ McGinness, A & McDermott, T. (2010) *Review of Effective Practice in Juvenile Justice. Report for the Minister for Juvenile Justice*. Noetic Solutions, Canberra.

¹⁰ Johnson, B. (2019) *Do Criminal Laws Deter Crime? Deterrence Theory in Criminal Justice Policy: A Primer*. Minnesota House Research Department. <https://www.house.leg.state.mn.us/hrd/pubs/deterrence.pdf>

¹¹ Dennison, S., Stewart, A. & Hurren, E. (2006) *Op. cit.*

who received cautions were significantly less likely to reoffend than young people who appeared in court instead.

This is compelling evidence that a less intrusive youth justice response has a positive impact on future propensity to commit crimes. This study did not consider the option of police picking up a young person and taking them home instead of issuing a caution. But it appears possible that the issuance of a caution had a positive effect. We note that Aboriginal and Torres Strait Islander young people were less likely to receive a police caution than appear in court, which appears likely to be one of the causes of higher rates of repeat contact with the justice system for this group.

Youth detention is the most expensive youth justice response by a large margin, yet has remained largely unchallenged despite clear evidence in Australia and elsewhere to show that it does not reduce recidivism. A robust study that controlled for key risk factors¹² compared reoffending outcomes for young people in NSW who received custodial and non-custodial sentences, and showed reoffending was higher in the custodial group. Their findings lend further weight to the argument that more compassionate responses to youth offending seen in continental Europe are likely, on balance, to better serve both the young person who has offended *and* the wider community. In contrast to Australia, the usual focus of European courts that deal with young people with anti-social behaviour is on imposing orders to achieve increased participation in education and the delivery of other therapeutic interventions, not punitive measures.

The above review indicates that there appears to be no clear evidence that court processes and sanctions applied through the youth justice system are effective in reducing offending. This suggests that there will be no noticeable increase in offending should the use of sanctions be reduced and attention and resources instead be directed to interventions that specifically target criminogenic needs.

Overview of evidence-based interventions that reduce youth offending

What interventions have the strongest evidence of effectiveness?

The Washington State Institute of Public Policy constantly reviews the evidence base for youth justice programs. Their latest inventory of evidence-based interventions released in December 2019¹³ lists nine interventions in their top tier of programs with the strongest current evidence of effectiveness in preventing or reducing youth offending. Six of the nine interventions are family-focused (marked with an “F”):

- Multisystemic Therapy-Family Integrated Transitions (MST-FIT) - F
- Multisystemic Therapy (MST Standard) for court-involved or post-release youth - F
- Adolescent Diversion Project for court-involved youth
- Coordination of Services (COS) for court-involved youth with a low risk of reoffending - F
- Diversion generally for youth with no prior criminal history (when compared with a court appearance pathway)
- Functional Family Therapy for youth post-release from detention - F
- Volunteer mentoring for youth post-release from detention
- Other family-based therapies for court-involved youth - F
- Parenting with Love and Limits (PLL) for court-involved or post-release youth - F.

The second-strongest group of interventions (the “research based” category) is listed below, and we

¹² Weatherburn, D., Vignaendra, S. & McGrath, A. (2009) *The specific deterrent effect of custodial penalties on juvenile reoffending*. Australian Institute of Criminology (AIC) Reports, Technical and Background Paper no. 33.

¹³ Evidence Based Practice Institute (2019) *Updated Inventory of Evidence-Based, Research-Based, and Promising Practices: for Prevention and Intervention Services for Children and Juveniles in the Child Welfare, Juvenile Justice, and Mental Health Systems*. Washington State Institute for Public Policy.

note that four of the twelve listed are family-focused:

- Dialectical Behaviour Therapy (DBT) for youth in state institutions
- Multisystemic Therapy (MST Standard) for court-involved or post-release youth - F
- Multisystemic Therapy-Problematic Sexual Behavior for court-involved youth - F
- Multisystemic Therapy-Substance Abuse for court-involved youth - F
- SAFE-T (Sexual Abuse Family Education and Treatment Program) for court-involved youth - F
- Adolescent Diversion Project for post-release youth (vs simple release into the community)
- Multi-Dimensional Treatment Foster Care for court-involved youth (vs residential OOHHC)
- Teaching-Family Model Group Homes (vs other residential OOHHC) for court-involved youth
- Education and Employment Training (EET) for court-involved youth (noting that Australia has the existing Transition to Work program that can be accessed)
- Equipping Youth to Help Each Other (EQUIP) for youth in state institutions
- Vocational and employment training for court-involved youth
- Expedition-style wilderness adventure therapy (average duration 37 days) for court-involved youth
- Therapeutic Communities (residential substance addiction treatment program)
- Other substance abuse treatment programs for court-involved youth or for youth in state institutions.

Two thirds of the programs with the strongest research evidence focus on improving parenting, which has not traditionally been a focus of youth justice systems in Australia, but should be in future.

We also note Australian longitudinal research by Turning Point on the efficacy of drug and alcohol treatment programs that found convincing evidence of their success with both single and poly-substance users (albeit with adults), regardless of whether the treatment program used an outpatient or residential model¹⁴. We note that drug and alcohol treatment programs for young people are difficult to access nearly everywhere in Australia due to long waiting lists, despite drugs and alcohol being implicated in a large share of youth offending and also being associated with substantially increased risk of chronic offending.

What interventions work for Aboriginal and Torres Strait Islander young people?

Allard *et al.*¹⁵ noted that Aboriginal and Torres Strait Islander young people are less likely to receive diversionary services. They also noted that there is limited evidence for what works with Australia's Indigenous peoples to prevent or reduce offending and further reported claims that most programs will not have the necessary cultural appropriateness to succeed with this group. They suggested that mentoring is the existing intervention most likely be capable of cultural adaptation.

Since about 49% of all young people under youth justice supervision are Aboriginal and/or Torres Strait Islander¹⁶, the cultural suitability of any prevention or diversion programs *must* be considered, and efforts made to embed culturally appropriate modifications that are likely to be consistent with maintenance of program fidelity. In addition, it is vital that research is funded to learn which interventions are most culturally compatible and effective with this important group.

Conclusions

It is necessary to have a range of treatment options available to fit the circumstances of particular young people at risk of entering the justice system or who have already engaged with it. For example, Multisystemic Therapy is an excellent treatment choice for young people with a caregiver who is willing to commit to working with a clinician to break the young person's cycle of offending. However, there will

¹⁴ Lubman, D., Manning, V., Best, D., Berends, L., Mugavin, J., Lloyd, B., Lam, T., Garfield, J., Buykx, P., Matthews, S., Lerner, A., Gao, C., Allsop, S., Room, R. (2014). *A study of Patient Pathways in Alcohol and Other Drug Treatment*. Patient Pathways National Project. Final Report. Commonwealth of Australia.

¹⁵ Allard, T., Ogilvie, J. & Stewart, A. (2007) *The Efficacy of Strategies to Reduce Juvenile Offending*. Griffith University.

¹⁶ Australian Institute of Health and Welfare (2019) *Youth justice in Australia 2017-18*. Cat no. JUV 129 AIHW.

not always be a caregiver who is available or willing to do this, so options need to be available to fit that situation, and Multidimensional Treatment Foster Care might be the better option as an alternative to incarceration to address serious anti-social behaviour.

Life Without Barriers' recommendations for a MACR regime informed by evidence

Recommendation 1 - Lift the MACR to 14 years

The evidence presented above points to a conclusion that many young people who offend will have at least one factor that increases their likelihood of committing an offence, and that decreases their likelihood of having been able to appreciate the seriousness of the behaviour they engaged in.

Life Without Barriers fully supports the Criminal Law (Raising the Age of Responsibility) Amendment Bill 2021 and proposes that the MACR be raised to 14 years. If these amendments were to successfully pass through the Queensland Parliament, any child aged under 14 years who engages in behaviour deemed antisocial would receive a compassionate, evidence-informed social work response, not punishment through the traditional measures of:

- being held in watchhouses unsuitable for children
- being remanded or sentenced to detention in a youth detention centre
- a criminal charge
- a court appearance, or
- a supervised sentence or fine.

From the available departmental evidence and from observations with the clients we work with, Life Without Barriers has observed that young people aged 13 or younger are less likely to be placed on a supervised order, but this is far more common from the age of 14 upwards. A large share of the explanation for this could be the natural age-crime curve. However considering that around 36% of young people involved in the justice system had their first contact between the age of 10 and 13¹⁷, and that this group represents much less than the same proportion of all young people appearing in court, we believe that *doli incapax* is likely to be playing a part in keeping some young people inside the welfare system where they are more likely to receive a therapeutic response, instead of in the justice system where the primary response is imposition of that do not have the deterrent effect that is intended, and at worse can severely impact life quality for the minor in the future.

In most Australian jurisdictions, young people who receive a supervised court order will have their criminogenic needs identified through use of the Youth Level of Service/Case Management Inventory (YLS/CMI). The difficulty is that there are few evidence-based programs then available to courts or to youth justice officers to address those identified criminogenic needs.

Life Without Barriers suggests that when a child or young person below the MACR engages in serious or persistent anti-social behaviour (that would be treated as a criminal act if they were above the MACR), a thorough assessment should be conducted of their risk of repeated anti-social behaviour, and factors driving that risk. The findings of that assessment should be used to determine the appropriate intensity of response. The existing YLS/CMI is a reasonable existing tool to use to conduct this risk assessment, but could be further improved for the purpose of identifying an appropriate social services response.

For children and young people with lower-end risk of future serious anti-social behaviour, short-term case management and on-referral is likely to be a sufficient response, ideally incorporating referral to a mentoring program utilising volunteers.

Life Without Barriers proposes that a model of Family Group Conferencing be made available for handling

¹⁷ Jesuit Social Services (2010) *Thinking Outside. Alternatives to remand for children*. Research Report. Jesuit Social Services. p. 39

of young people aged 10 to 13 (or preferably 10 to 15) who are engaging in persistent and/or serious anti-social behaviour. In New Zealand this model has proven able to accommodate Maori cultural traditions and has improved family accountability for responses to offending. We believe there is scope to make this model culturally appropriate for Aboriginal and Torres Strait Islander families and communities. We note that we are not advocating that Family Group Conferencing only be available if a young person admits responsibility for their actions, as is the case in the New Zealand model.

Recommendation 2 - Select and fund new therapeutic, developmentally and culturally appropriate interventions that address the spectrum of criminogenic needs

The interventions funded and delivered should be selected based on their suitability to the developmental age of young people who have police contact. For example,

“Work on violence prevention suggests that:

- young children (under 8) might benefit most from programs emphasising emotional regulation and parent-child interaction;
- children in middle childhood (8 to 11) should attend programs focusing on social competence; and,
- early (12 to 14) and middle (15 to 18) adolescents should attend programs that address the development of pro-social peer groups, conflict resolution and work/job skills (Farrell et al. 2001).”¹⁸

Life Without Barriers notes that the most common range of criminogenic needs observed by staff working with young people who offend are:

- inadequate parental supervision, improved through support for parents to set and enforce boundaries for their children, including measures that address association with anti-social peers
- support for young people to re-engage in education, which includes learning support to address developmental delays and minimise the challenges associated with brain-based disabilities
- risky drug and alcohol usage, and habitual use in particular.

Life Without Barriers believes that the intensity of intervention provided should be appropriate to the apparent severity and persistence of offending. It is a poor use of public money to deliver a high cost intervention to young people whose anti-social behaviour is likely to be very transitory.

More broadly, Life Without Barriers endorses the conceptual approach of Day *et al.*¹⁹ to the structuring of a youth justice system, i.e. focus on addressing dynamic risk factors that are known to be correlated with offending, calibrate the intensity of intervention to the intensity of offending, select and tailor an intervention to support learning by the young person, maintain program integrity for evidence-based interventions, and leave some scope for use of professional discretion to enable a good fit between a young person and the intervention selected.

¹⁸ Day, A., Howells, K. & Rickwood, D. (2004) *Current Trends in the Rehabilitation of Juvenile Offenders*. Trends Issues in Crime and Criminal Justice. no. 284. Australian Institute of Criminology.

¹⁹ *Ibid.*