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Children, Parenting and Education:
Addressing the Causes of Offending

Introduction

Young people and adults who exhibit serious and persistent offending are usually found to have patterns of behaviour dating back to their early years. Findings from longitudinal studies and developments in neuroscience provide robust evidence of factors contributing to negative outcomes. The key to prevention lies in the early years and parents having a good understanding of their role in shaping their children's behaviour. This paper outlines the importance of early intervention and the role of parent education in ensuring that children do not develop negative patterns of behaviour that place them at risk of later offending.

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Characteristics of children and young people who offend

Longitudinal research in this country confirms findings from studies undertaken in Canada, Australia, the United Kingdom and the United States that identify a small but distinct group of children who are in serious difficulty by adolescence and who commit a disproportionate percentage of criminal offences.[1] During childhood these children may attract the label 'severe conduct disorder'. John Werry (2005, p.24) provides the following description:

> From kohanga or kindy on he has defied adults, lied, stolen, maybe set fires, hit other children, is cruel to animals, verbally abuses all who frustrate him, bullies, intimidates peers, siblings, and as we heard recently teachers and other adults as well.

Red flags for such children have been identified as a history of serious antisocial acts, regular use of substances, hyperactivity and impulsivity, a history of aggression, and being male (McLaren, 2007).

Such behaviour does not arise in isolation. These children share histories of exposure to adversity. Research demonstrates, however, that the relationship between adversity and outcome is complex and that negative outcomes are the result of exposure to multiple risk factors, which include:

- socioeconomic adversity;
- parental change and conflict;
- lack of parental supervision;
- lack of warmth and affection within the family;
- parental characteristics, including criminal/antisocial behaviour, substance abuse, young mother, sole parent and unemployment;
- harsh discipline and abuse;
- individual characteristics such as poor vocabulary and communication, lower than average IQ, poor literacy

skills, and a high level of novelty- and thrill-seeking;
- peer rejection;
- deviant peers;
- community norms and levels of crime.

(Fergusson and Horwood, 2003; Leventhal, 2003; McLaren, 2007; Wasserman et al., 2003; Williams et al., 2004)

It is important to note that these risk factors cover multiple domains, including individual, family, school and community. Garbarino (1995) refers to these as 'children's social maps' which provide cultural blueprints of what is normal, what is obvious and what is impossible. When children are labelled as offenders or having severe conduct disorder, they become the problem and the complex factors influencing their behaviour may be overlooked.

Research in three related domains has greatly enhanced our understanding of how risk and protective factors interact to shape outcomes for children: neuroscience, attachment, and resilience.

Lacking secure attachment and trust in adults, these children have no incentive to comply with requests or instructions and may resent and resist any attempts by adults to control them.

Neuroscience

Only the brain stem is fully developed at birth. During the first three years of life the brain develops rapidly, establishing neural pathways which allow the more complex structures of the brain to come into being (Shonkoff and Phillips, 2000; Perry, 1997; Schore, 2001; Thompson, 2001). This brain development is sequential and use-dependent. Different areas of the central nervous system are in the process of organisation at different times and disruptions of experience-dependent neurochemical signals during these periods may lead to major abnormalities or deficits in neurodevelopment. The role of the environment is crucial, and the primary caregiver(s) have been identified as the major provider of the environmental cues necessary to this development (Fonagy, 2003; Perry and Pollard, 1998; Schore, 2001; Siegel, 2001; Thompson, 2001). The early years are critical and the foundations for life are built during this time. Failure to intervene when things go wrong represents a lost opportunity to build these foundations.

Attachment

The quality of the attachment relationship has been linked to different aspects of brain development:
- attaining complexity through the differentiation of specific components and integration into a functioning whole (Siegel, 2001);
- emotional self-regulation (Schore, 2001);
- reflective capacity (Fonagy, 2003).

Attachment relationships provide the context for the development of internal working models that shape the young child's perception of self, others and the world around them. These models incorporate the capacity for self-regulation, the ability to identify and reflect on internal states of self and others, mental representations of self and others, and strategies for managing relationship experiences based on those mental representations. Depending on the attachment experience, these individual capacities vary, and the degree to which they are integrated within the individual also varies (Atwool, 2008).

Bruce Perry (1997) has clearly documented the impact of trauma on the developing brain. During trauma the brain adapts to a state of fear-related activation, leading to adaptations in emotional, behavioural and cognitive functioning to ensure survival. Persistent trauma results in hypervigilance, anxiety, elevated heart rate, elevated levels of stress-related hormones and impulsivity.

Disorganised attachment

Four patterns of attachment have been identified: secure, avoidant, ambivalent (Ainsworth, 1979) and disorganised (Main, Kaplan and Cassidy, 1985). Secure attachment provides the optimal environment for development; avoidant and ambivalent patterns provide the infant and young child with a way of managing sub-optimal environments; while disorganised attachment develops in the context of neglect and/or abuse. These internal working models of attachment continue to influence us throughout life and there is evidence of inter-generational transmission (Fraiberg, Adelson and Shapiro, 1980; Main and Goldwyn, 1984; Ricks, 1985). A link between unresolved attachment issues in parents and the abuse of children has also been established (Call, 1984; Fraiberg, Adelson and Shapiro, 1980; Main and Goldwyn, 1984; Schmidt and Eldridge, 1986). Research has identified a strong association between disorganised attachment and behavioural difficulties in childhood and later life (Allen, Hauser and Bormen-Spurrell, 1996; Carlson, 1998; Lyons-Ruth, 1996; Rosenstein and Horowitz, 1996; van Ijzendoorn, 1997).

Children with disorganised attachment are unlikely to trust adults. Their failure to internalise any of the rules that govern daily existence means that their behaviour is determined by reaction to external cues. Lacking secure attachment and trust in adults, these children have no incentive to comply with requests or instructions and may resent and resist any attempts by adults to control them. Their behaviour may fluctuate, and, as Perry (1997) notes, they may be labelled ADHD: suffering from attention deficit hyperactivity disorder. Short attention span, high levels of activity and limited social skills present major obstacles to learning. Perry argues that when children have experienced abuse in the early years, these behaviours result from hyper-arousal and this must be lowered before the children are accessible to intervention. Decreased arousal levels are unlikely to occur until the child has developed a sense of security.

By adolescence, those with disorganised attachment are frequently in serious difficulty. Significantly increased rates of psychopathology and violent crime have been found in longitudinal studies of infants classified as disorganised in infancy (Carlson, 1998; Rosenstein and Horowitz, 1996; van Ijzendorn, 1997).

Link with resilience

Longitudinal research has demonstrated that children 'at risk' do not all fare badly (Werner and Smith, 1982), and similar findings have resulted from research exploring biological, developmental and environmental risk factors (see Garmezy, 1993; Garmezy, Masten and Tellegren, 1984; Haggerty et al., 1994; Rutter, 1981). Resilient children were found to have an easy temperament, high self-esteem, an internal locus of control and a sense of autonomy. They had a supportive family environment and a supportive person or agency outside the family (Brown and Rhodes, 1991; Compas, 1987; Garmezy, 1994). More recently, an international research project across ten communities in seven different countries has identified the importance of cultural connection (Ungar, 2003, 2005). The most resilient children and young people have access to all four components, but any one can make a difference. It is clear that resilience is not an isolated individual characteristic and it is difficult to see how any of these protective factors could be acquired outside the context of secure and consistent attachment.

Children with a history of secure attachment are clearly at an advantage when presented with challenges. They have positive expectations of themselves and others, access to supportive adults, and connections that extend beyond the family, creating a sense of belonging in the community. Such characteristics are likely to enhance resilience. Children with avoidant and ambivalent attachment patterns may lack self-confidence, have low self-esteem and may have some difficulties negotiating relationships. They do, however, have coping strategies with which to respond to challenges. Although they may not be as resilient as securely attached children, they will be more resilient than those with a history of disorganised attachment, who are the most vulnerable.

Attachment patterns become entrenched when the internal working models formed in the early years are reinforced by children's experiences in the world beyond home. Children with insecure and disorganised patterns are likely to encounter rejection and censure from peers, teachers and other adults they encounter in the community. Negative outcomes are not inevitable and there is good evidence that change is possible. During childhood, however, change must be facilitated through the experience of relationships that provide different experiences to those that gave rise to insecure and disorganised attachment patterns. Early and effective intervention is the key.

Early intervention is an investment

Early intervention to give children the very best start in life is cost-effective in terms of economic investment and has the added advantage of creating a safer and inclusive society. There are good arguments to support a focus on early intervention:

The World Bank hosted an international conference at the turn of the century titled 'Investing in our children's future'. The conference participants reviewed the state of knowledge on the benefits and effectiveness of early interventions and summarised the economic gains. Their report offers a thorough analysis of the literature substantiating the importance of early child development to the social and economic development of nations.

Pedro Carneiro and James Heckman (2003), Nobel Peace Prize-winning economists, have demonstrated the benefits also of early intervention.

Rob Grunewald and Art Rolnick, an economic analyst and the senior vice-president of the Federal Reserve Bank of Minneapolis, argue that the evidence is clear that investment in early childhood development for at-risk children pays a high

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public return (Grunewald and Rolnick, 2005). For example, a 2004 follow-up study on the Perry Preschool Program 40 years after its inception calculates the total benefit–cost ratio at $17 for every dollar invested.

Implications for parenting and parent education

Children begin their lives entirely dependent on adults for survival. The behaviour of those who care for them, however, contributes to far more than their physical survival. The quality of children's relationships with those who care for them provides the framework for the exponential development and learning that occurs in the early years. Given the overwhelming evidence supporting early intervention, it makes sense to consider the role that parent education may be able to play.

It is important that parents are aware of the significance of the early years and the benefits available to children from responsive, consistent and stable care arrangements. In particular, information about the impact on brain development and the foundational nature of early experience has significant implications for parental decision making about childcare and employment. Given that parenting is not generally considered productive in the same way that employment is, such information may also be validating for parents, encouraging them to place priority on making

intensive investment in their children's development. Parent education of this type is likely to be most beneficial if readily available to all parents (Allen and Smith, 2008; Early Years Commission, 2008; Tremblay et al., 2008). Universal support services such as Plunket and Parents Centres make a significant contribution, but currently these are most likely to be accessed by motivated parents and such services need to be supplemented by outreach to marginalised families.

Parents also need access to education about the different challenges that come as their children grow, especially when children's behaviour is cause for concern (Tremblay et al., 2008). When children behave in challenging ways their behaviour becomes the focus of attention. All too often the emphasis is on management and control, with relatively less attention given to the causes of such behaviour. Children's behaviour is a form of communication. When that behaviour is of concern adults sometimes forget to look beyond the presentation and inquire about what is being communicated. Such information can be made more accessible through provision of family support centres or service hubs (Early Years Commission, 2008).

More focused programmes are needed for those families in greatest difficulty. Many of the children at risk for negative outcomes fall into the gaps that exist between education, health and welfare. Access to specialist services depends on how their behaviour is labelled and there may be different pathways depending on the perception of parents, teachers and professionals that they encounter. Service provision varies with location and children outside main centres face additional barriers. All of the research points to the importance of early intervention and yet too often this opportunity is overlooked (Fonagy et al., 1997; Perry, 1997; Wasserman et al., 2003; Williams et al., 2004). Provision of home visiting services such as Family Start have much to offer, but more intensive services with the capacity to provide in-home support and education are also needed (Allen and Smith, 2008; Early Years Commission, 2008).

Conclusion

Parent education is not, however, the magic bullet that can solve all problems. What is needed is an integrated approach to improving the social and economic circumstances of children and families, a close working relationship between criminal and social policy and early intervention in the lives of children as an investment in their future (Asquith, 1996). Failure to provide this increases the risk that the criminal justice system ends up punishing those who are themselves the victims of social and economic circumstances.

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1   For New Zealand studies see Fergusson, Horwood and Lynskey, 1994; Moffitt et al., 2002; for Canadian research, Tremblay, Boulerice and Harden et al., 1996; Australian research, Bor et al., 2007; UK research, Bowen, Heron and Steer, 2008; US research, Lipsey and Derzon, 1998; Loeber et al., 1995.

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