



Risk-Need-Responsivity: Moving from Paper to Practice

Kelly Van Develde

Associate Director

Colleen Gibbons

Senior Program Manager

Recovery and Reform, National Technical Assistance

Center for Justice Innovation

Center for Justice Innovation (The Center)

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Our **RECOVERY AND REFORM** team provides hands-on, expert assistance to reformers around the world, including judges, attorneys, justice officials, community organizations, and others. Having launched dozens of innovative justice initiatives, we know how to get a new project off the ground. Experts from the Center for Justice Innovation are available to help plan, implement and evaluate new policies, practices, and technologies. Our assistance takes many forms, including help with analyzing data, facilitating planning sessions, and hosting site visits to our operating programs in the New York City area.



Goals for This Session

- Recognize how to identify appropriate target populations
- Examine the background and appropriate use of RNR tools, identifying strengths and weaknesses of tool development and use
- Understand best practices for high-risk/high-need populations in therapeutic courts
- Examine the application of tracks in therapeutic courts

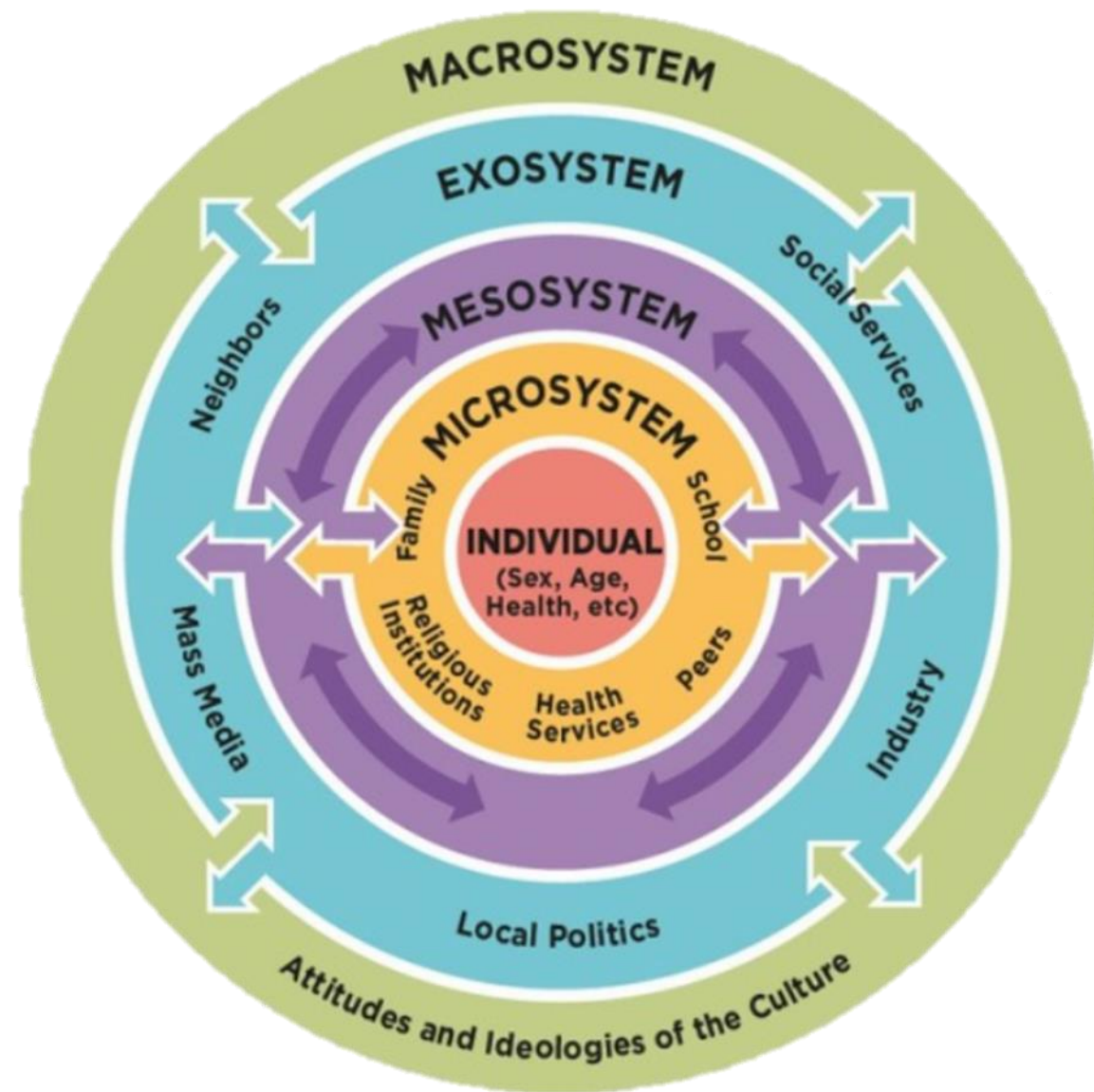
Foundations – the System

Family System

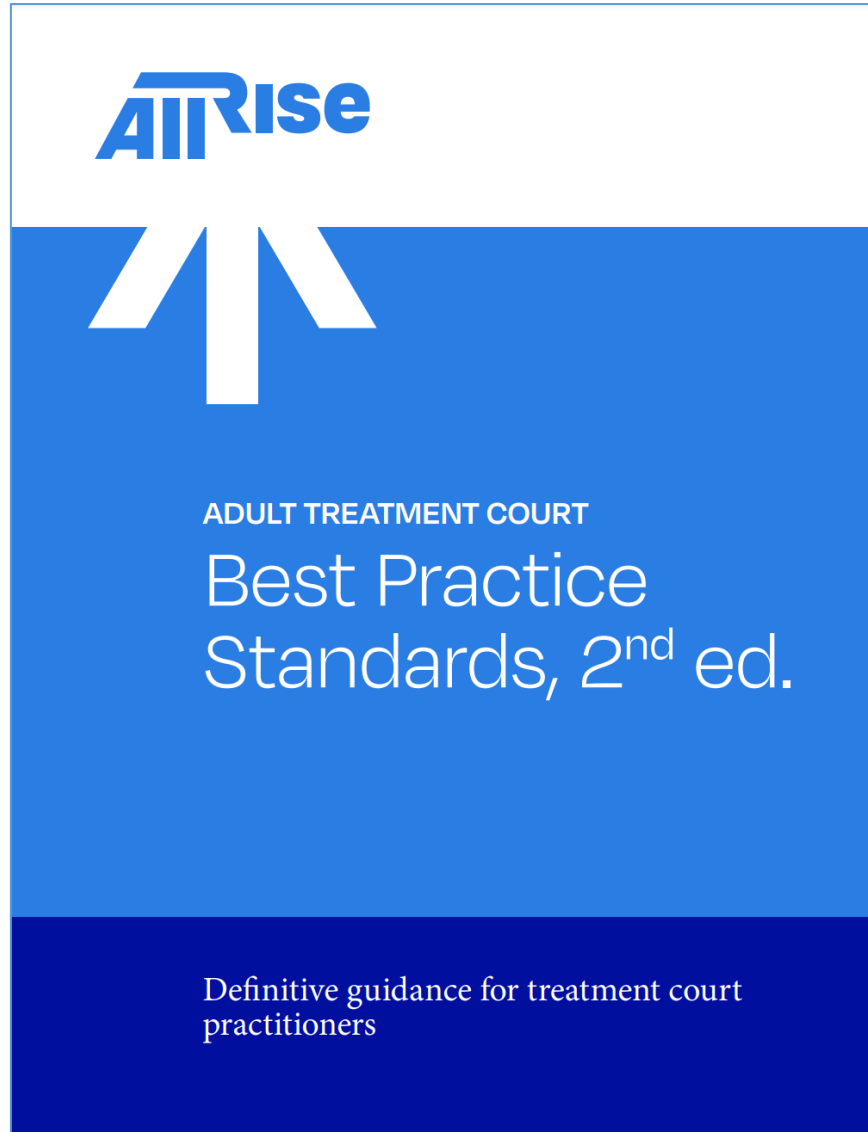
Criminal Justice System

Child Welfare System

Family Court System



Foundations – the Standards



Definitions – RCW 2.30.020

(1) "**Emerging best practice**" or "**promising practice**" means a program or practice that, based on statistical analyses or a well-established theory of change, shows potential for meeting the evidence-based or research-based criteria, which may include the use of a program that is evidence-based for outcomes other than those listed in this section.

(2) "**Evidence-based**" means a program or practice that: (a) Has been tested in heterogeneous or intended populations with multiple randomized, or statistically controlled evaluations, or both; or one large multiple site randomized, or statistically controlled evaluation, or both, where the weight of the evidence from a systemic review demonstrates sustained improvements in at least one outcome; or (b) may be implemented with a set of procedures to allow successful replication in Washington and, when possible, is determined to be cost-beneficial.

(5) "**Research-based**" means a program or practice that has been tested with a single randomized, or statistically controlled evaluation, or both, demonstrating sustained desirable outcomes; or where the weight of the evidence from a systemic review supports sustained outcomes as described in this subsection but does not meet the full criteria for evidence-based.

Identifying Appropriate Target Populations

Vignette #1

Meet Spencer...

Is Spencer a candidate for Adult Drug Court?

Who Do We Serve?

The treatment court serves **high-risk** and **high-need** individuals.

These are individuals who:

- 1) are at significant risk for committing a new crime or failing to complete less intensive dispositions like probation, *and*
- 2) have a moderate to severe substance use disorder that includes a substantial inability to reduce or control their substance use, persistent substance cravings, withdrawal symptoms, and/or a pattern of recurrent substance use binge episodes (i.e., use often substantially exceeds the person's intentions or expectations).

**Adult Treatment Court Best Practice Standards: I. Target Population; C. High-Risk and High-Need Participants

What Is a “Risk Need Assessment Tool”?

Risk and needs assessment instruments typically consist of a series of items used to collect data on behaviors and attitudes that research indicates are empirically related to the risk of recidivism.

How Do We Know Who Meets the Criteria?

Screening

Assessment

Evaluation

Tool

Instrument

How Do We Know Who Meets the Criteria?

Terms such as “screening,” “assessment,” and “evaluation” are often used imprecisely and interchangeably in the treatment and criminal justice systems, thus causing confusion about how information derived from different tools should be used to guide program entry decisions, treatment planning, and outcome evaluations.

Broadly speaking, treatment courts administer four types of assessments that serve different aims.

**Adult Treatment Court Best Practice Standards: I. Target Population; D. Valid Eligibility Assessments

How Do We Know Who Meets the Criteria?

Eligibility Assessments: whether a candidate meets treatment court criteria for being high risk and high need

Treatment Planning Assessments: a comprehensive and in-depth evaluation of participants' treatment needs and are used to develop a treatment plan in collaboration with the individual

Screening Assessments: other treatment and social service needs that may interfere with their recovery and maintenance of treatment

Outcome Assessments: improvements in participants' health, adaptive functioning, social service needs, and recovery capital or resources

**Adult Treatment Court Best Practice Standards: I. Target Population; D. Valid Eligibility Assessments

Roles and Responsibilities for Felony-Level Therapeutic Courts

... as they relate to RNR

Who Needs to Know RNR?

- **All team members** involved in therapeutic courts should have a baseline knowledge of RNR.
- Better outcomes when assessment and case planning performed by a professionally credentialed clinical case manager (psychologist, social worker, or specially trained supervision officer, etc.).
- Treatment courts should ensure that their assessors are appropriately trained and proficient in test administration and interpretation and receive at least **annual booster training** to maintain their competence and remain current on advances in risk and need assessment and case planning.

What About Professional Judgment?

Treatment court staff should exercise considerable caution before overriding risk-assessment results. **Professional judgment** in predicting a person's risk for recidivism or likelihood of success in community corrections is **little better than chance**, whereas **standardized risk-assessment tools** are typically accurate about **65% to 85% of the time**.

Professional judgment can be negatively influenced by a host of confounding factors, including implicit bias and inadvertent cognitive errors in decision making.

Biasing factors may include:

- Decision fatigue (relying on invalid cognitive shortcuts when staff are tired or overworked)
- Confirmation bias (paying greater attention to facts that support one's preexisting beliefs)
- Saliency bias (remembering surprising, upsetting, or impactful events more clearly than routine events)

**Adult Treatment Court Best Practice Standards: I. Target Population; D. Valid Eligibility Assessments

What About Professional Judgment?

- Studies have consistently determined that the use of standardized risk-assessment instruments significantly reduced racial and ethnic disparities in probation conditions and detention decisions compared with professional judgment alone.
- Taking standardized test information into account in team decision making, while thoughtfully considering possible cultural limitations of the instruments, helps to counteract misconceptions and logical errors and reduce implicit biases.
- In all cases, staff should have a specific and articulable rationale for overriding assessment results.

Risk-Need-Responsivity Theory

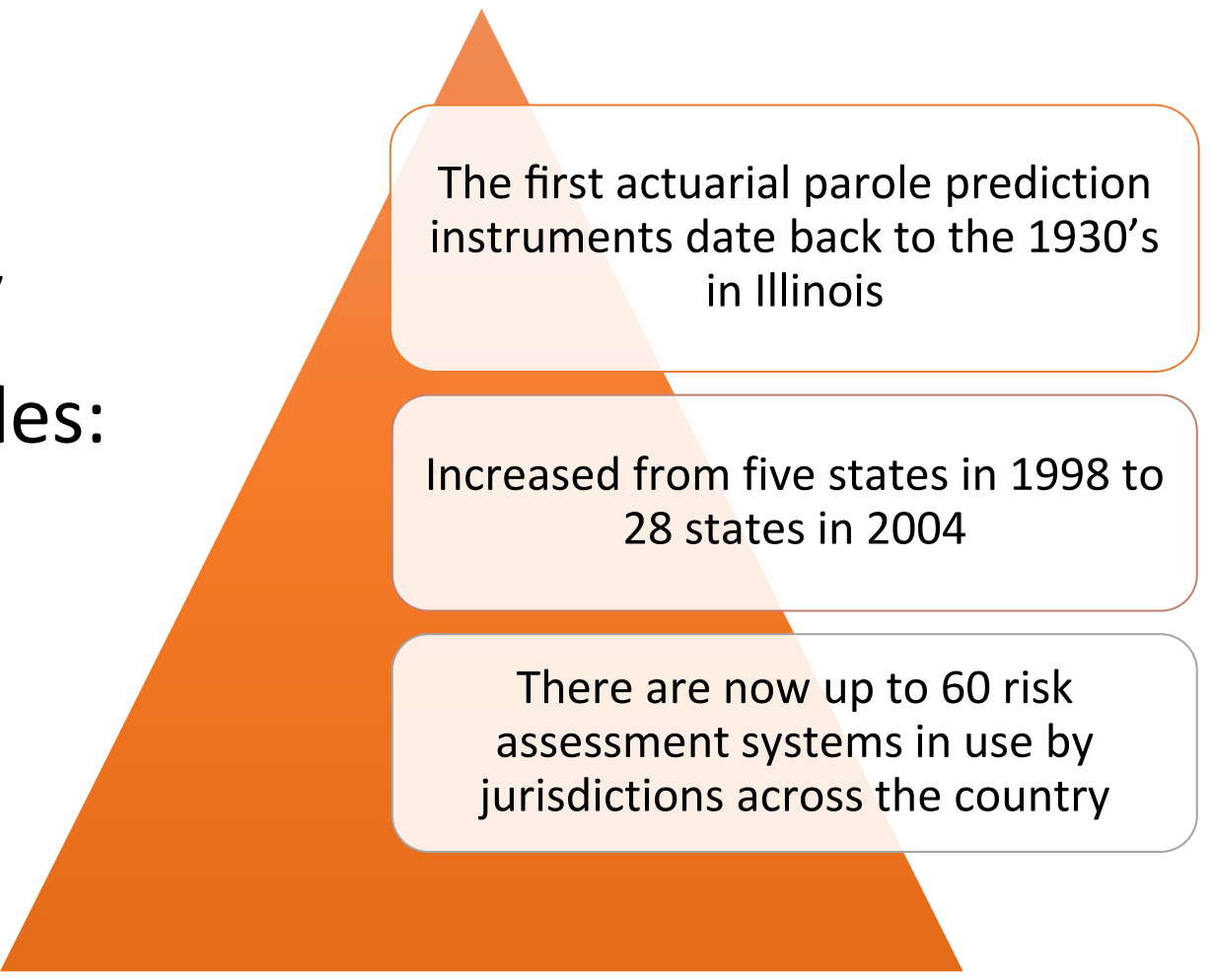
Vignette #2

More about Spencer...

Based on what we know so far, would you say Spencer is High Risk / High Need?

Risk-Need-Responsivity Theory

- A model of crime prevention rooted in behavioral psychology
- Composed of three core principles:
Risk | Need | Responsivity
- Grounded in three decades of research



The first actuarial parole prediction instruments date back to the 1930's in Illinois

Increased from five states in 1998 to 28 states in 2004

There are now up to 60 risk assessment systems in use by jurisdictions across the country

The Three Core Principles

Risk Principle: Who to target

- Criminal behavior can be predicted
- Intervention is most effective with higher-risk individuals

Need Principle: What to target

- Assess and target “criminogenic” needs (i.e. needs that fuel criminal behavior)

Responsivity Principle: How to intervene

- Use interventions tailored to the needs, characteristics, learning styles, motivation, and cultural background of the individual.

Defining Risk

Risk = Probability of Criminal Recidivism

Likelihood of re-arrest for any charge, usually within the next six months to one year

Although relevant to decision making

Risk \neq clinical severity

Risk \neq current charge

Risk \neq failure to appear

Risk \neq violence or dangerousness

How Can Risk Be Measured?

Static vs. Dynamic

- Static Tools
 - Assess for static (unchanging) factors only (*i.e.*, demographic and criminal history information).
- Dynamic Tools
 - Assess for static AND dynamic factors (those that can change).
 - Ideal when aiming to create a risk reduction or treatment plan based on individual needs.

Central Predictors of Recidivism Risk

Static

Risk Factor

Criminal History

Demographics

Antisocial Beliefs and Attitudes

Impulsivity

Antisocial Networks

Employment

Education

Substance Use

Leisure Activities

Housing

Common Measures

Prior adult and juvenile arrests; Prior adult and juvenile convictions; Prior failures-to-appear; Other currently open cases; Prior and current charge characteristics.

Younger age; Male gender.

Patterns of antisocial thinking (lack of empathy, attitudes supportive of violence, system blame).

Impulsive behavior patterns; Lack of consequential thinking.

Peers involved in drug use, criminal behavior and/or with a history of involvement in the justice system.

Poor past performance in work; history of unemployment.

Poor past performance in work or school (lack of a high school diploma;

Duration, frequency and mode of current substance use; History of substance abuse or addiction; Self-reported drug problems.

Isolation from pro-social peers or activities

Homelessness; Frequent changes of address.

Dynamic

The Need Principle

- Need tells us WHAT to target.
- Addressing these Criminogenic Needs reduces Risk

What's a Risk and What's a Need?

The terms “risk” and “need” are often used interchangeably and the term “criminogenic need” is used without being fully defined.

- A *criminogenic need* is simply a risk factor amenable to change. They are sometimes referred to as “dynamic” risk factors.
- There are many needs but not all are criminogenic.
- Criminal history and demographics are the only truly “static” risk factors.

Non-criminogenic Needs

- **Examples of non-criminogenic needs:**
 - Trauma history
 - Mental health
 - Medical needs

- **Why assess and treat?**
 - Ethical reasons (affects individual well-being)
 - Can interfere with treatment for criminogenic needs (trauma especially should be treated simultaneously)

Wait... Mental Illness Is *Non-criminogenic*?

- According to risk-need-responsivity theory, there is no causal link between mental illness and recidivism.

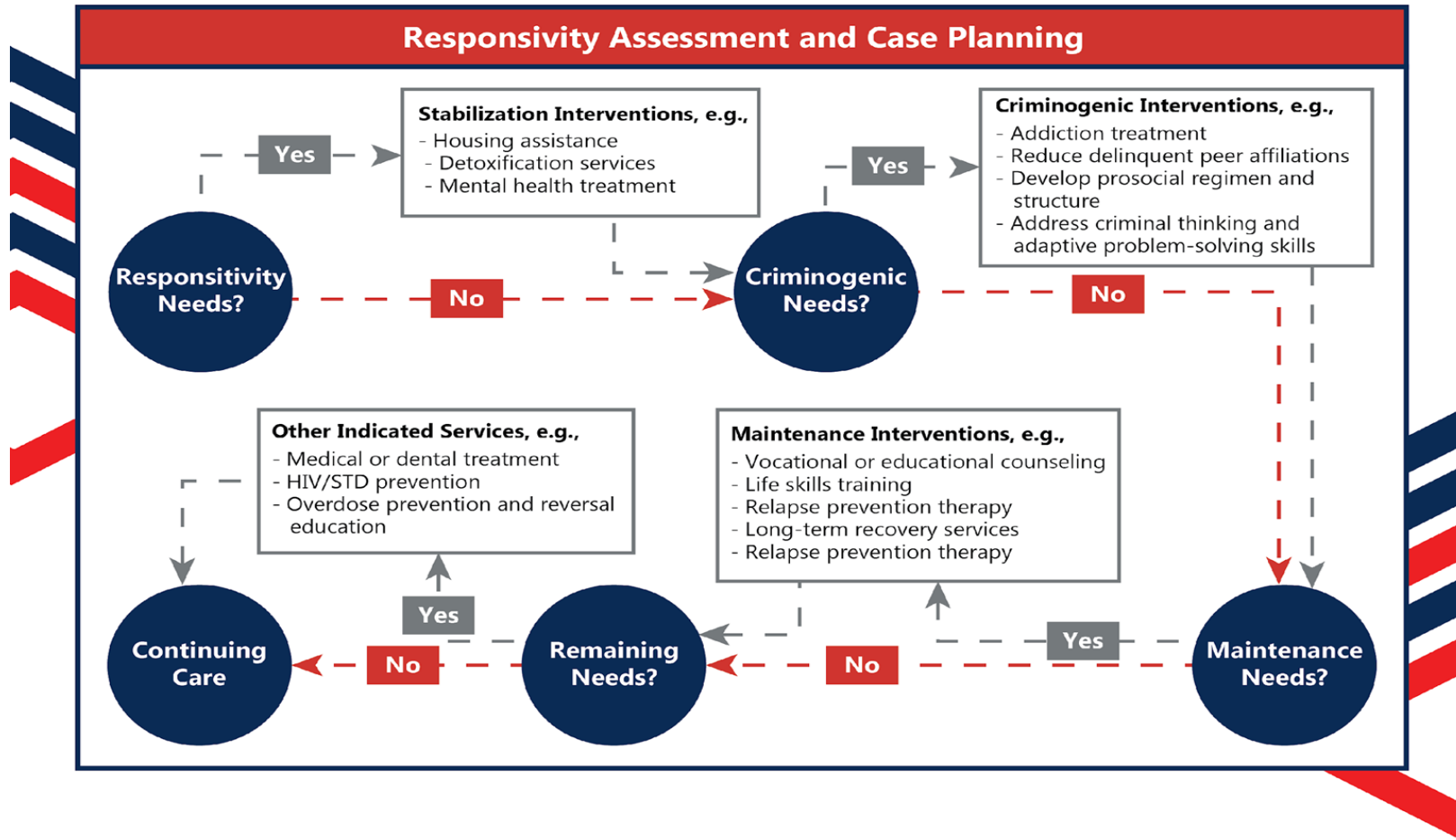
So where is the disconnect?



Mental Illness and RNR

- Even though mental illness is not a “central” risk factor, addressing mental illness is considered crucial to ensuring successful rehabilitation and risk reduction.
 - This makes it a *responsivity* factor!
- Because mental health problems are prevalent in justice-involved groups, it continues to be of central importance in RNR research and practice.

Responsivity



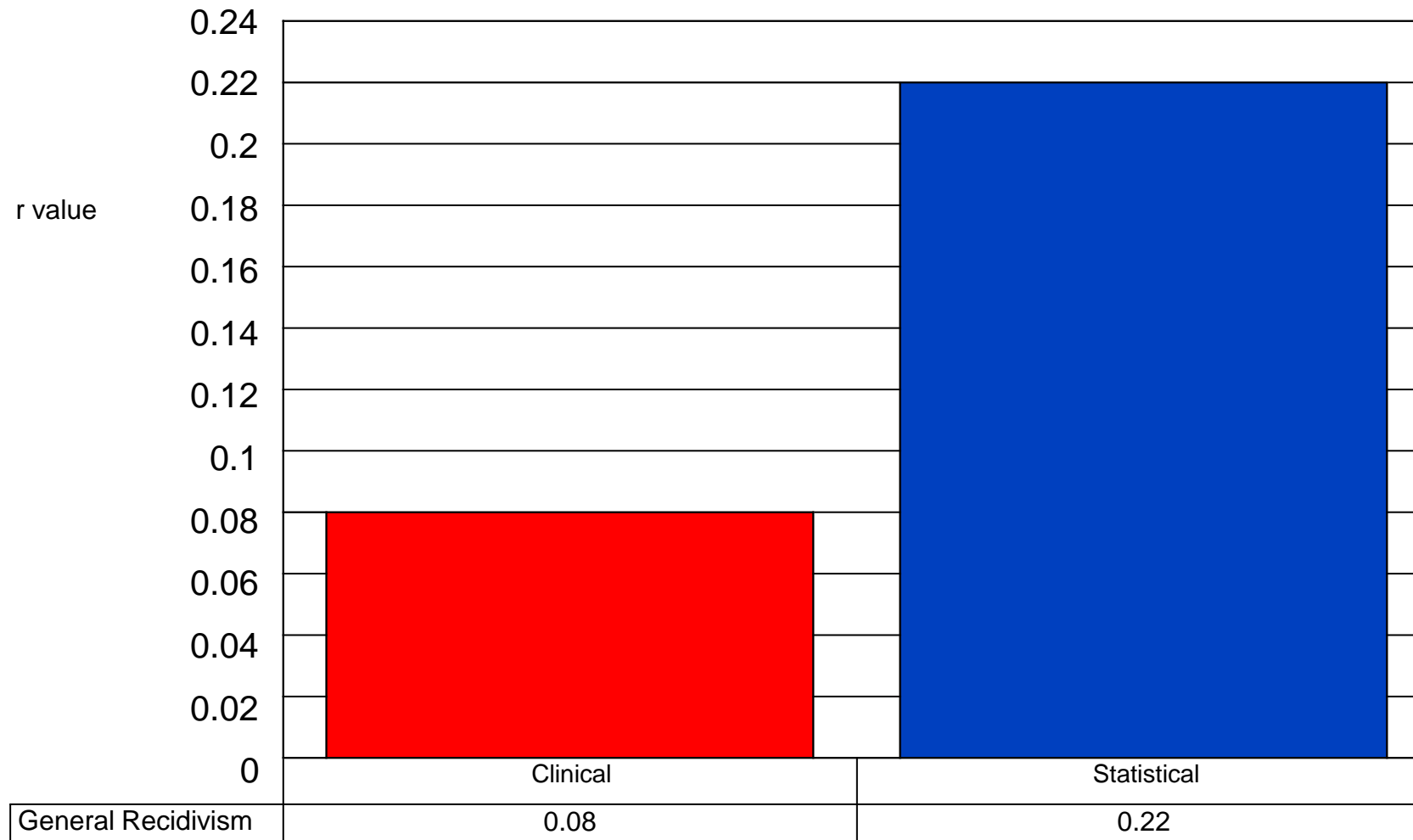
Vignette #3

More about Spencer...

Based on what we know so far, would you say Spencer is High Risk / High Need?

Why Is It Important to Measure Risk?

Clinical v. Actuarial Prediction



Goggin, C.E. (1994). Clinical versus Actuarial Prediction: A Meta-analysis . Unpublished manuscript. University of New Brunswick, Saint John, New Brunswick.

Intervention and the Risk Principle

The risk principle tells us that we should assess for risk and vary the intensity of intervention (case management & supervision) by risk level.

- Higher risk: Provide more intensive intervention.
- Lower risk: Intervention can be harmful. **Why?**
 - ▶ Interferes with work or school
 - ▶ Increases contact with higher-risk peers
 - ▶ Can stigmatize and produce psychologically damaging effects

Disregarding the Risk and Need Principles...

- ▶ Best case scenario: Depletion of scarce resources
- ▶ Worst case scenario: Inappropriate treatment and/or increased risk of recidivism for previously low-risk individuals



Risk-based Decision-making in the Courtroom

- **Minimal or low risk:** *Off-ramp ASAP* (e.g., pretrial release; conditional discharge).
Beware of net-widening!
- **Moderate-to-higher risk:** *Supervision or case management* at appropriate intensity (e.g., supervised release pretrial and alternatives to incarceration post-adjudication).

Jail Increases Risk

- The harm of intensive intervention to lower-risk individuals is magnified when *jailing* them.
 - Jail is the most intensive and disruptive intervention of all; AND
 - The default in many jurisdictions.
- Research generally shows that incarceration increases the likelihood of re-arrest after release—but this relationship applies especially at lower risk levels.

Therapeutic Court or Jail?

No study has determined what risk scores (including violence risk scores), if any, predict whether a person will have a better outcome if incarcerated rather than receiving a community-based disposition like treatment court. Therefore, risk scores should not be used to decide who should be incarcerated and who should receive a community sentence (D'Amato et al., 2021).

The tests were designed to recommend indicated treatment and supervision conditions for persons involved in the criminal justice system and not to make detention decisions or to exclude persons from needed services.

**Adult Treatment Court Best Practice Standards: I. Target Population; D. Valid Eligibility Assessments

Vignette #4

More about Spencer...

Based on what we know so far, would you say Spencer is High Risk / High Need?

Tools for Risk-Need Assessments

What Validated Tools Are Available?

- Validated risk-assessment tools for criminal justice populations can be obtained from the [*Bureau of Justice Assistance \(BJA\) Public Safety Risk Assessment Clearinghouse*](#)
 - Level of Service/Case Management Inventory (LS/CMI)
 - Level of Service Inventory – Revised (LSI-R)
 - Ohio Risk Assessment System (ORAS)
 - Risk and Needs Triage (RANT)
 - Criminal Court Assessment Tool (CCAT)

Why Create the CCAT?

- To date, there remains a shortage of risk-need assessment tools that cover important needs fueling a defendant's criminal behavior, yet can be efficiently administered in high-volume settings and inform referral to effective intervention.
- The Center developed the CCAT in order to fill this gap.

Vignette #5

More about Spencer...

Based on what we know so far, would you say Spencer is High Risk / High Need?

High and Low Risk Populations in Therapeutic Courts

Exceptions to High-Risk and High-Need

If serving only high-risk and high-need persons is not feasible for a treatment court—e.g., because of legal policy constraints—a program should develop alternative tracks with modified treatment and supervision services designed for persons with lower risk or need levels.

If a treatment court develops alternative tracks, it does not serve participants with different risk or need levels in the same counseling groups, residential programs, recovery housing, or court status hearings.

**Adult Treatment Court Best Practice Standards: I. Target Population; C. High-Risk and High-Need Participants

Support for Tracks in Therapeutic Court

Therapeutic courts may develop alternative tracks with modified services to provide for a lower intensity of supervision, treatment, or both for low-risk or low-need individuals.

Better outcomes have been reported, for example, when drug courts and DWI courts reduced the required frequency of court status hearings or counseling sessions for low-risk and low-need participants, respectively.

**Adult Treatment Court Best Practice Standards: I. Target Population; C. High-Risk and High-Need Participants

Support for Tracks in Therapeutic Court

A 2018 evaluation of four drug courts in Missouri demonstrated compelling support for using RNR in a treatment court setting through implementing separate tracks according to risk-need quadrant.

“When supervision and services are provided based on participants’ individual risk and need, this results in a significant increase in public safety due to lower criminal recidivism as well as substantial cost savings to the taxpayer.”

** [Missouri Treatment Courts Implementing RNR in a Drug Court Setting: The 4-Track Model in Practice Outcome and Cost Study Summary](#), NPC Research, 2018

Best Practices for Tracks in Therapeutic Court

- Treatment programs and community supervision agencies should be required to deliver counseling and residential services separately for persons with different risk levels.
- High-need and low-need individuals should appear in separate court status hearings.
 - Holding separate status hearings for high-need and low-need participants helps to avoid perceptions of unfairness that may arise if persons with different need profiles receive different responses for the same behaviors.
- Therapeutic adjustments or learning assignments are often indicated for new instances of substance use among high-need persons with compulsive substance use disorders, whereas sanctions may be indicated for low-need persons whose use is largely under volitional control.

**Adult Treatment Court Best Practice Standards: I. Target Population; C. High-Risk and High-Need Participants

Use Risk Level to Inform...

- Intensity of supervision
- Frequency of court appearances
- Intensity of services, while taking into account legal leverage and needs assessment

Risk Level	Supervision and Case Management Intensity
Minimal Risk	Refer to pretrial calendar with Judge – monthly compliance Preventative class No drug testing
Low-Moderate Risk	Refer to pretrial calendar with Judge – monthly compliance 3x per week outpatient Randomized drug testing
Moderate Risk	Accepted into Drug Court Bi-weekly court appearances Bi-weekly case management Consideration for faster phase advancement 3x per week outpatient Employment/education – providing proof Random drug testing
Moderate-High Risk	Accepted into Drug Court Weekly court appearances (reducing faster as compared to high risk) Weekly case management (reducing faster as compared to high risk) Consideration for faster phase advancement IOP or inpatient Employment/education – providing proof Random drug testing
High Risk	Accepted into Drug Court Weekly court appearances Weekly case management IOP or inpatient Employment/education – providing proof Random drug testing

Vignette

Spencer

What's Next?

RNR Next Steps

- **Monthly Statewide Virtual Training Series** – second Thursday, 8:00 AM
- **Topical sessions:**
 - November 14
 - January 9
 - March 13
 - May 8
 - July 10
 - September 11
- **Office hour sessions:**
 - December 12
 - February 13
 - April 10
 - June 12
 - August 14

Thank you!

Contact Us:

Kelly Van Develde

Associate Director

vandveldek@innovatingjustice.org

Colleen Gibbons

Senior Program Manager

gibbonsc@innovatingjustice.org