

Many Paths Down The

MOUNTAIN

Creating Meaningful Interventions and Different Risk Levels

HTWC Conference 2024







Risk Need Responsivity Theory

Risk

Helps identify which level of interventions are most appropriate for individuals.



Need

Help identify and target criminogenic needs to reduce the liklihood of recidividsm.



Responsivity

Is used to target treatment or services to the individual characteristics, culture, and learning styles of participants.



WHY DOES RISK MATTER?

Improves Outcomes

Using risk can connect people to appropriate interventions which can improve outcomes for those individuals and reduce revidivism.

Better Use of Resources

Allows programs to work with people who would best be served by them.





THE RISK PRINCIPLE

Higher Risk

This group is more likely to respond positively to higher intensity programming than the lower risk group.

Lower Risk

Intensive Interventions can be harmful. Why?

Interferes with work or school.

Increases contact with higher-risk peers.

Can stigmatize and produce psychologically damaging effects.

Can lead to short-term incarceration

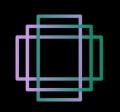
NEGATIVE EFFECTS OF INTENSIVE INTERVENTIONS

Drug Treatment Program

- Review of 400 drug court participants in NYC
- Placement of low-risk drug court participants in long-term residential treatment doubled their likelihood of re-arrest over a two-year follow up period.

Pretrial Alternatives to Detention

- Review of federal criminal offenses from 2001–2007
- Lower risk defendants were MORE likely to result in pretrial failure than high-risk defendants. Defendants were over supervised.



RISKTOOLS

AND THEIR USE WITH

NATIVE POPULATIONS

Risk Need Responsivity Tools And Native Popuations

Supreme Court rules on controversial risk assessment tests accused of bias against Indigenous offenders









Tests used to determine inmates' security and parole accused of 'cultural bia Indigenous offenders

CBC Radio · June 13



Canadian Supreme Court ruled in 2018 that greater protections needed to be taken before using risk tools with indigenous offenders for pentientary placement and parole decisions due to concerns about bias in the tools.

Racial and Ethnic Disparities in Tools





Risk tools can increase AND decrease disparities

Increase Bias

- Bakes system bias into the risk scores
- Can be less accurate for Black and Brown individuals
- Can result in higher punitive sanctions or collateral consequences if there is misclassification of risk



Decrease Bias

- Limits bias and problematic discretion in judges and prosecutors
- When done properly it can guide outcomes towards higher release rates for Black and Brown defendants
- When paired with a needs
 assessment can be used to
 provide supportive interventions

Not many tools have used data about AI/AN Populations.

Some studies have been done with specifically American Indian or Alaskan Native populations

Localized

Tools work best when adapted to their locality

Data

Population

Even LESS tools have been built specifically for AI/AN Populations

Research

Programing

Still need RNR tools to appropriately program people



Literature Review

50+ ARTICLES

The Center's team reviewed over 50 articles and publications about the use of risk tools in Native and Indigenous populations.

NATIONAL

The articles included research conducted on risk tools used with Native populations in the United States.

INTERNATIONAL

The literature review also included research conducted the use of risk tools with Indigenous populations in New Zealand, Australia, and Canada.



Findings for current tools

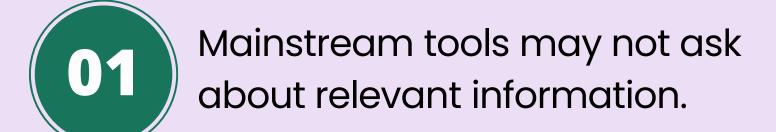
- Existing tools not designed for indigenous defendants
- Lower predictive validity
- Concerns of over-classification of risk
- Protective factors are not considered
- Phrasing is unsuitable



Tribal Courts and RNR

Despite the need for greater research with Native populations, RNR tools can still be helpful to HTWCs! They can help support case management and identification of appropriate tracks, services, and supervision levels.

Considerations



- Can supplement with additional tools or questionnaires.
- Risk scores may be over-classify Native individuals.
- Be mindful of a person's full story when case planning

High Risk		Low Risk	
High Need	 Menu of interventions: Treatment court programs, e.g., healing to wellness court, mental health court, hybrid models Cognitive-behavioral therapy (CBT) models, e.g., T4C, MRT; Social services (e.g., employment, GED, etc.); Trauma-focused models (e.g., Seeking Safety); and/or 	 Menu of Brief interventions: Brief interventions and connections to services Individual sessions (to avoid peer contagion effects); Incorporates a range of practices (e.g., procedural justice principles, Motivational Interviewing, trauma informed practices, etc.) Short-term connection to services Voluntary social & clinical services 	
Low Need	 Menu of Brief interventions: Medium-term interventions, services, or mandated services CBT, MRT, motivational interviewing Restorative Justice, a 3- or 5-session intervention Menu of rolling interventions, 6 Sessions+ Short term clinical services or voluntary social and clinical services 	 Menu of Minimal Responses: OFF Ramp! Release without conditions or services. Conditional discharge, minimal fines and fees. Meaningful brief community service, with meaningful services engagement Brief educational groups (1- or 2-session models) Voluntary social & clinical services LESS is MORE 	

RISK NEED BASED INTERVENTIONS

O1 Ideal group for conventional HTWC. Has better outcomes with greater connection to services and higher levels of supervision

This group is tricky, as they present with a lengthy criminal record, but may not appear to have intensive needs for services.

Individuals in this group may have a deep need for services and treatment, but perform best when services are minimally mandated or voluntary.

This group requires the least amount of intervention, or NO INTERVENTION at all. If any intervention is given, it should be light touch.

HIGH RISK HIGH NEED

HIGH RISK LOW NEED

LOW RISK / HIGH NEED

LOW RISK / LOW NEED

Four Track Approach Quadrant Model

Create Separate Programming

Create separate tracks and programming that are appropriate a person's risk and need level.

For individuals with different risk and need levels.

Generate Separate

Tracks

Appropriate Intensity Increase or decrease the

intensity of services based on a person's risk and need levels.

Meet Needs Without Increasing Risk

Avoids over programming and mixing different risk populations which can increase risk of recidivism.





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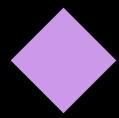
LOW RISK / LOW NEED



HIGH RISK/HIGH NEED

Personal

Community



Well-being



Responsivity/Treatment Planning

- Clinical stability
- Social stability
- Trauma care
- Recovery supports
- Intensive supervision

Whole-Person Recovery

- Personal
- Social
- Culture & Community
- Well-Being



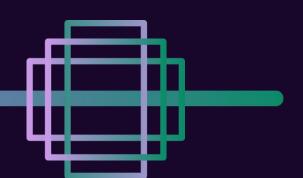
ACUTE CARE VS. RECOVERY MANAGEMENT

Acute Care Model

- Assesses the individual
- Intervention is SUD-focused
- Profile is risk/deficit-focused
- Intervention is time-limited
- Type of care based on SUD severity
- LoC decided by professional
- Provider is expert decision-maker
- Intervention is in clinical spaces
- Return of symptoms attributed to patient failure/noncompliance
- Increasingly commercialized
- Aftercare typically brief

Recovery Management Model

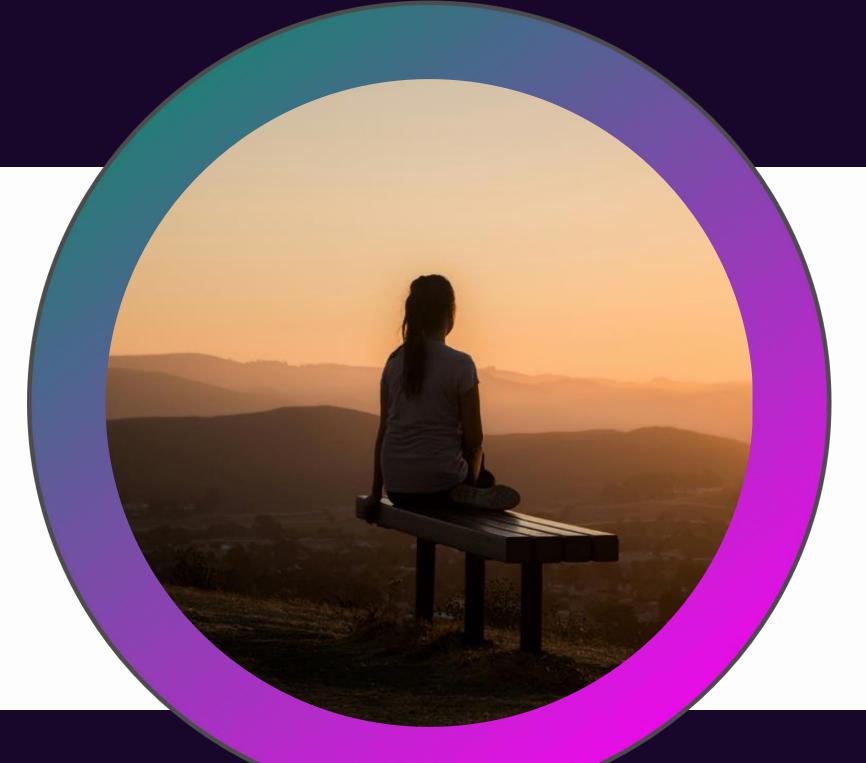
- Assesses the individual, family, community
- Intervention is global, biopsychosocial
- Profile is strength/asset-focused (incoming capital)
- Intervention is ongoing
- Type of care based on severity, as well as RC assets/gaps/barriers
- LoC decided by prof. w/ meaningful input from client and family
- Provider and client collaborate in decision-making
- Interventions also in community-based spaces
- Return of symptoms attributed limitations of intervention
- Increasingly focused on community investment
- Recovery is managed, has a life course



High Risk/High Need Case Study 1

Gloria - 42 years old

- Arrested for simple assault, possessed methamphetamine and under the influence
- Four previous arrests
- Began using substances at the age of 14
- Unemployed
- History of trauma and involvement in multiple systems, including foster care as a child



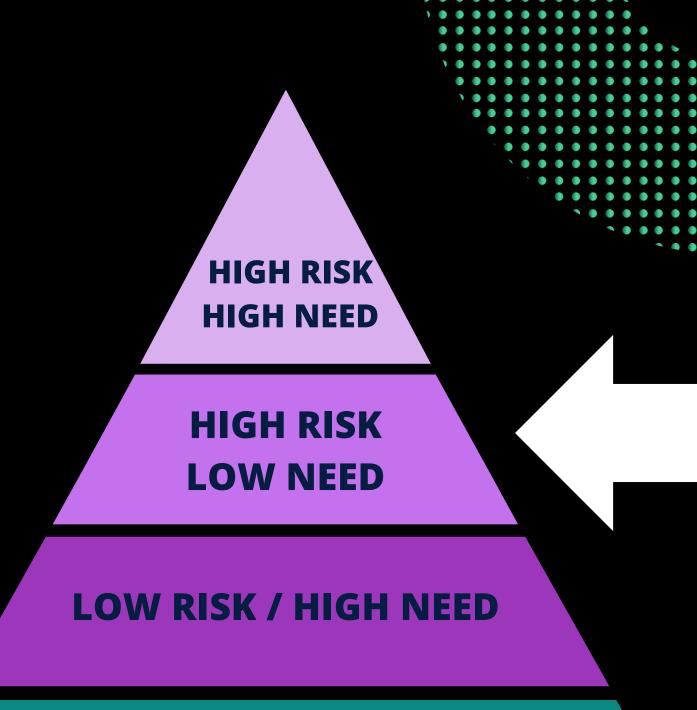
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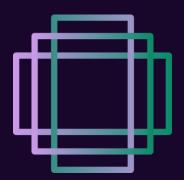
LOW RISK / LOW NEED

HIGH RISK/LOW NEEDS

Intensive Intervention

Cognitive Behavioral Therapy for High-Risk
Participants
Motivation for Change
Moral Reconation Therapy (MRT)
Thinking for a Change (T4C)
Anger Management
Interactive Journaling
Community Reinforcement Approach (CRA)

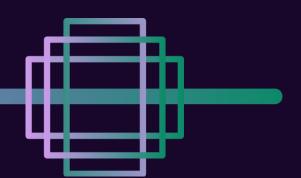




High Risk/Low Need

Lessons Learned from DUI Court

- Participants score moderate risk on RNR tools based on static factors
- Low need participants view themselves as "not like others" involved in the criminal justice system
- Leverage is the limited or loss driving privileges
- Treatment must focus on behavioral change
- Supervision and monitoring is high, technology monitoring devices, e.g., ignition interlock device, ankle bracelet, ETG testing, frequent court appearances
- Use evidence-based clinical assessments to identify substance use disorder, mental health, and trauma needs
- Reassess needs for change in employment, housing, family status, etc.



High Risk/Low Need Case Study 2

Dan - 48 years old

- Arrested for DUI
- Employed full-time
- Married and owns a home
- Low to moderate substance use



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Introduction to Community Justice

Community Justice builds equitable, holistic, community-driven solutions that meet peoples' needs by preventing harm, reducing system involvement, and improving overall community health by centering local voices to rethink how approaches to public safety can be more restorative, equitable, humane, and effective.



Guiding Principles of Community Justice



Co-create Justice



Prioritize Community-Based Solutions



Promote Accountability



Advance Equity



Put People First



Model Innovation





What is a community court?

Community courts are neighborhood or issue focused court programs that combine the power of the community and the justice system to address local problems through community-based services and solutions.





Focusing on Needs

RISK-NEED-RESPONSIVITY: RECOMMENDATIONS FOR COMMUNITY COURTS

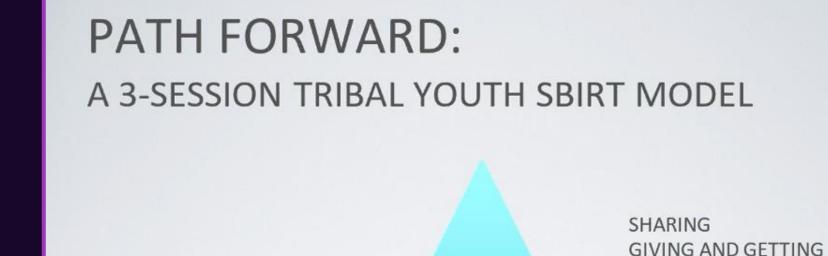
EMPLOYMENT	MENTAL HEALTH
Obtain vital documents (state identification, driver's license, birth certificate, etc.) With support, create a resume Volunteer at the local food bank Attend a job fair or resource fair Intern at a pre-approved organization Visit Dress for Success or a similar job-readiness organization	 Engage in mental health services Have a one-on-one session with a social worker or therapist Attend a group therapy session Attend a support group
HOUSING	TRAUMA
Obtain vital documents (state identification, driver's license, birth certificate, etc.) Meet with housing coordinator and make a housing plan Apply for housing Move into permanent housing	 Engage in trauma-centered mental health services Have a one-on-one session with a social worker or therapist Attend a group therapy session or support group for survivors of trauma
CIVIC ENGAGEMENT	OTHER
Volunteer at a pre-approved organization Volunteer at a community garden Participate in court-sponsored monthly civic engagement group discussions Register to vote Attend a city council meeting and write your reflections Join your local block association or a culture-specific organization and start attending	 Enroll in SNAP, disability, social security, or other government benefit Find a primary care physician who accepts your insurance, and get a physical Attend a parenting class Write a letter of gratitude to a mentor Write a letter of apology to the case victim Engage in re-entry programming Get a library card and attend library programming and/or write an essay about a book recommended by



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SBIRT

- Screening
- Brief Intervention
- Referral to Treatment
- 3 mandated counseling sessions
- Voluntary Referral to Treatment



SCREENING DISCOVERY ENGAGING EMPOWERING RELATIONSHIPS

Charting And Building Community

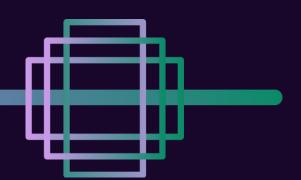
A Circle

Process

RELATIONSHIPS SUPPORT EXPANDING CIRCLES INVITING A CIRCLE PREPARING

HEALING

MOVING FORWARD



Low Risk/High Need Case Study 3

Regina - 32

- Arrested for loitering, in possession of cocaine
- One prior arrest at age 22 for theft
- Mother of 2 children ages 3, and 7
- Recently lost her job
- Housing instability, staying in different locations
- History of trauma and domestic violence



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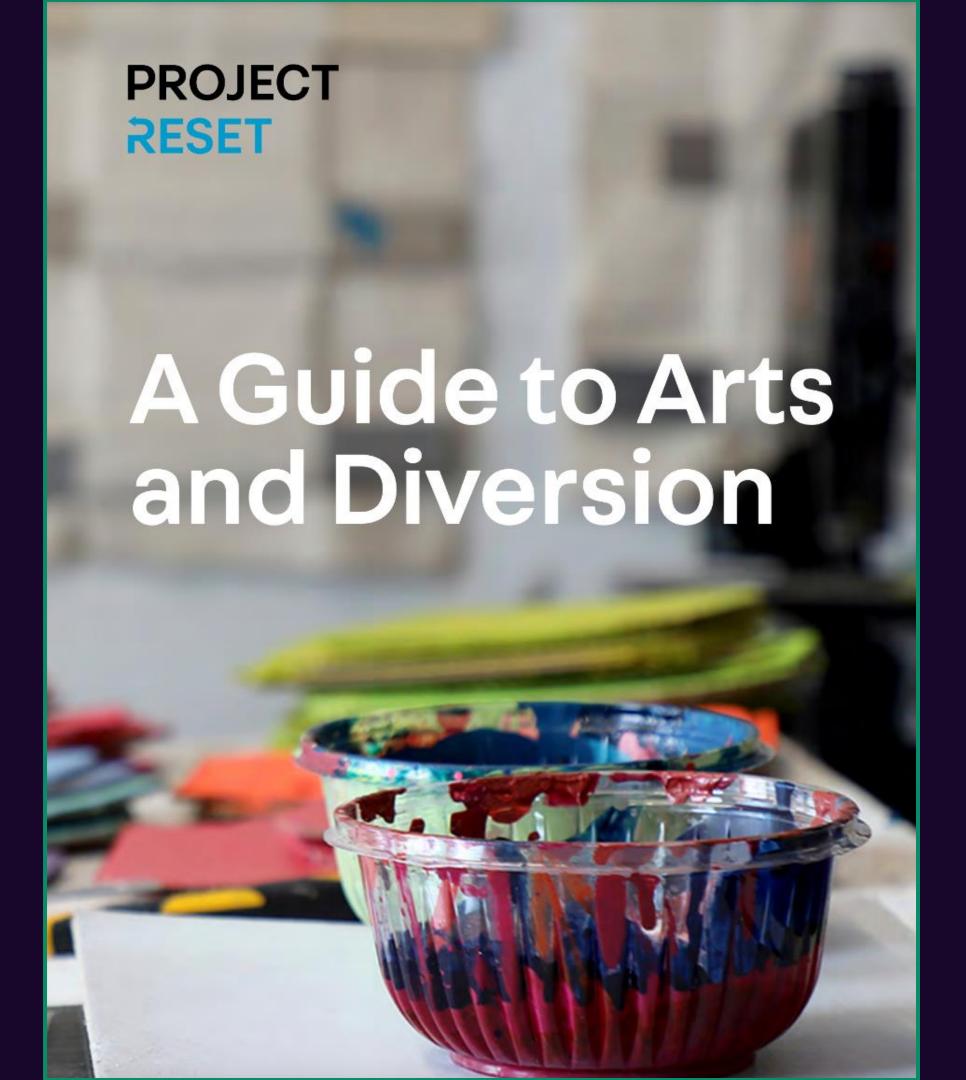




Low Risk/Low Need

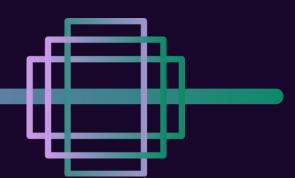
- OFF RAMP
 - Release
- SMALL Intervention
 - Community Service
 - Connect to Services
 - Restorative Response
- LESS is MORE





LOW RISK/LOW NEED

- Project Reset diverts people out of the justice system with a proportionate, restorative, and effective response to low-level offenses.
- Participants complete educational group workshops, arts-oriented programming, and/or individual counseling sessions.



Low Risk/Low Need Case Study 4

Mikey - 26

- Arrested for marijuana possession
- 1 prior juvenile arrest for drinking under age
- Living at home with mother and two sisters
- Has seasonal jobs during fishing season
- Did not complete high school but has a GED



Why Create Separate Tracks?

- Better outcomes in our interventions
- More tailored/appropriate programming
- Adapt to reforms (e.g., sentencing, bail, drug decriminalization)
- Hyperlinks to programs/strategies addressing 'the other quadrants':
 - Bronx Heroin Overdose Prevention and Education (HOPE)
 - Crisis Assistance Helping Out On The Streets (CAHOOTS) in Oregon
 - Quick Response Teams in Hamilton County, OH
 - Police-led diversion, LEAD, PAD, etc.

Sample of Interventions

High Risk		Low Risk
High Need	 Example of Track 1 Interventions: Healing to wellness court, mental health court, hybrid models, Period of Time: 12 mo - 2 years Phases: 4-5 Suggested Programs: SUD treatment, case management, individual and group therapies, employment and housing supports, peer support, prosocial activities, cultural and ceremonial activities 	 Example of Track 3 Interventions: Brief interventions and connections to services 1-5 sessions Period of Time: 1 - 2 months max Suggested Programs: SBIRT, Connection to treatment and voluntary continuing referral Other Engagement: Restorative Justice, short-term peacemaking, connection to cultural events/programming, mentoring programs
Low Need	 Example of Track 2 Interventions: Medium-term interventions, services, or mandated services Period of Time: 4-8 months engagement Suggested Programs: CBT, MRT, Elder Panels Other Engagement: Cultural Engagement Activities (participating in ceremonies, equine therapy, peacemaking, mentoring programs, etc.) 	 Example of Track 4 Interventions: OFF Ramp! Period of Time: minimal (1- or 2 session models) Suggested Approaches: Release without conditions or services, conditional discharge, minimal fines and fees, voluntary social & clinical services, short-term mandates (community service, art projects, brief educational groups, cultural engagement, etc.) LESS is MORE

PRACTICAL CONSIDERATIONS

- Making the model fit with your court
- 2 Tracks vs. Paths (Checklist vs. Milestones) Creating flexibility in your model
- **3** Keeping Participants Separate
- Breaking down criteria and expectations and communicating clearly

RESPONSIVITY

- How are you using the RNR results?
- 2 Are you using the RNR results to guide treatment planning?
- 3 Are you using the RNR to reassess needs?
- Are you including participants in the treatment planning process?

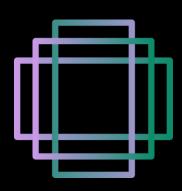




Case Study Discussion

- Joe is 38 years old
- Married, no children
- Multiple arrests for possession
- Employed full-time
- Police called to the home multiple times for possible IPV when Joe drinks too much
- Joe's wife declines to press charges

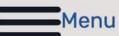




Further Reading

Clickable Links Below:

- CJI: Drug Courts in the Age of Sentencing Reform
- CJI: Court Responses to the Opioid Epidemic
- CJI: The Myth of Legal Leverage
- CJI: 10 Essential Elements of Opioid Intervention Courts



ark.allrise.org



High Risk (Left)

Home

Low Risk (Right) >>





Low Risk & High Need

Low Risk High Need

Low risk and high need individuals typically suffer from a severe substance use or mental health disorder, or have other pressing social service needs such as chronic homelessness or lack of basic job skills. However, they do not have serious risk factors for criminal recidivism or for failure in standard treatment or community supervision programs, such as extensive criminal histories, delinquent peer affiliations, or antisocial tendencies. Although these individuals have complex rehabilitation needs, they generally pose a minimal threat to public safety and are likely to desist from crime if they receive adequate doses of indicated treatment and social services. Such persons are typically well-suited for placement in an intensive community-based rehabilitation program in lieu of receiving a criminal record, receiving a jail or prison sentence, or being subjected to intensive probation supervision.

SearchQ

Evidence-based programs for low risk and high need individuals typically focus on referring participants for indicated treatment and social services, and monitoring their adherence to the clinical interventions. In some cases, persons who successfully complete treatment may have their criminal charge(s) withdrawn or vacated, and the arrest or conviction may be expunged from their legal record. Record expungement helps to avoid some of the negative collateral consequences associated with having a criminal record, such as a loss of voting rights or access to subsidized housing.

<u>Pre-arrest</u>	>>
<u>Pretrial</u>	>>
<u>Community Corrections</u>	>>
<u>Incarceration</u>	>>
<u>Reentry</u>	>>





TRIBAL ACCESS TO JUSTICE INNOVATION

LEARN MORE ABOUT TRIBAL JUSTICE

Community Justice Publications



Community Justice Publications



Community Justice Today: Values, Guiding Principles, and Models





Building the Research Base: An Evaluation Blueprint for Community Courts



Mapping Community Resources





Risk-Need-Responsivity: Response Recommendations for Community Courts





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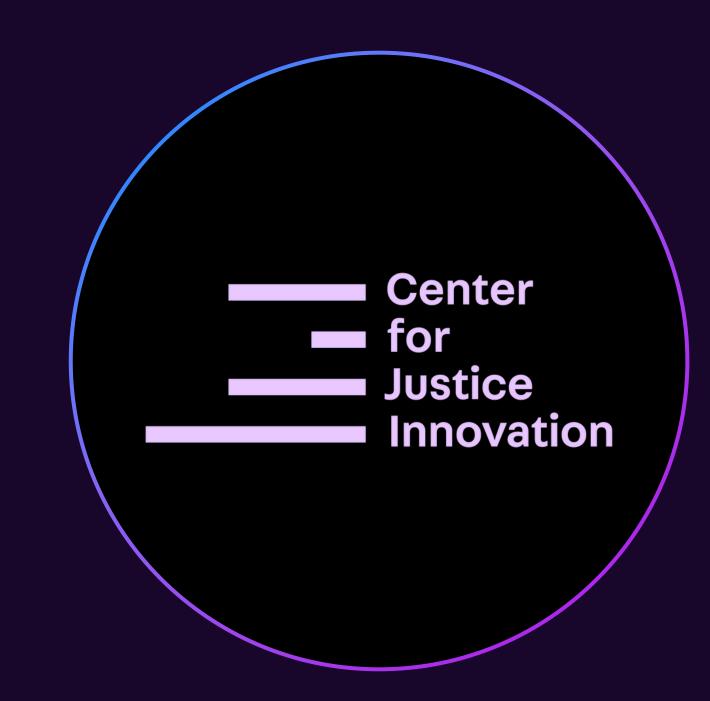
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QUESTIONS?

or comments!