

Resources for the Prevention of Sexual Abuse



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### “Implementing Risk Assessments for Adolescents”

#### THE AUTHORS

Michele Peterson-Badali, Tracy Skilling, & Zohrah Haqanee (*Please see below for full citation and abstract*).

#### THE QUESTIONS

Even if we do a risk assessment, are we making the right recommendations and effectively implementing them?

#### THE RESEARCH

Michele Peterson-Badali, Tracy Skilling, and Zohrah Haqanee collected data from 148 youth who completed a court-ordered forensic assessment for a violent (non-sexual) offense, a non-violent offense, or a sexual offense. Through this research, they explored the steps in the process from risk assessment through case management:

- 1) a risk-needs assessment (identifying specific factors or criminogenic needs that must be addressed to reduce risk);
- 2) the recommendations based upon these identified treatment and supervision needs (correlation of the assessment to the recommendations); and
- 3) the implementation of a case management plan and treatment that would “match” (e.g., properly address) these identified factors.

The researchers aptly point out that when creating and implementing a case management plan, it is vital that the clinician consult both the literature about general risk prediction as well as the individual clients such as cognitive ability, learning style and motivation that may affect the effectiveness of any particular intervention. Unfortunately, the study also found that programs set up to address these treatment needs can often be in short supply.

For step one, the researchers suggest the importance of dynamic risk scores from a programing perspective, because they are the factors amenable to change and are the necessary targets for treatment recommendations. The study results show that criminogenic needs (dynamic risk factors) do contribute to prediction of re-offense, over and above criminal history, which then suggests that providers target these needs in case management.

For step two, they found that it was not possible to conclude that the criminogenic needs and the corresponding recommendations were driven by the client's domain scores. Decisions about recommendations seemed to reflect a variety of considerations including whether or not services were available for that client.

For step three, the study explored whether the needs identified in the assessments are actually addressed during probation. There was a wide range of the "match" between identified needs and services provided ranging from 93% (education and employment) to a low of 15% (antisocial attitudes). This huge gap in "theory to practice" seems to demand closer examination and action to ensure that the client's needs are in fact, appropriately matched with services – especially in light of the evidence that this matching is associated with decreased recidivism.

#### **BOTTOM LINE:**

Participants with identified needs that were matched with services reoffended at significantly lower rates than youth whose needs were not matched.

#### **IMPLICATIONS FOR PROFESSIONALS**

As our profession gets ever more skilled in providing individualized comprehensive, developmentally, contextually sensitive and evidence-based risk assessments, this research suggest that we need to be more vigilant about linking our recommendations to the risk, needs, and responsivity of our clients, regardless of the availability of services. Modifying recommendations to conform to the absence of known services both fails our clients and we lose the opportunity to increase our pressure to reform inadequate systems for all of our clients. To ensure that the recommendations are implemented, we also need to build stronger relationships with case managers and probation officers; engaging them in understanding the importance of individualized approaches and also join together in both our implementation and advocacy efforts.

#### **IMPLICATIONS FOR THE FIELD**

As the risk assessment field continues to reflect the emerging research, the community may not be able to match the needed resources to these more sophisticated recommendations. Given that reality, our public policy efforts needs to ensure that the nuance required for successful treatment becomes part of the service-delivery system. Sexual safety is a compelling message supported by a growing number of survivor organizations as well professionals working with children and adolescents who have sexually abused. Working together, we can help ensure that both victims and youth who have caused the harm are given high quality evidence-based treatment and adequate case management support.

#### **ABSTRACT**

Research on implementation of a case management plan informed by valid risk assessment in justice services is important in contributing to evidence-based practice but has been neglected in youth justice. We examined the connections between risk assessment, treatment, and recidivism by focusing on the individual criminogenic needs domain level. Controlling for static risk, dynamic criminogenic needs significantly predicted reoffense. Meeting individual needs in treatment was associated with decreased offending. However, there is “slippage” in the system that reduces practitioners’ ability to effectively address needs. Even in domains where interventions are available, many youth are *not* receiving services matched to their needs. Implications and limitations of findings are discussed.

#### **CITATION**

Peterson-Badali, M, Skilling, T & Haqanee, Z. (2015). Examining implementation of risk assessment in case management for youth in the justice system. *Criminal Justice and Behavior*. Vol 42, No 3. 304-320.