



WEST VIRGINIA INTEGRATED BEHAVIORAL HEALTH CONFERENCE

Risk Need Responsivity: Who, What, How of Offending Behavior

Jennifer Pealer, Ph.D.

Council of State Governments Justice Center

- National non-profit, non-partisan membership association of state government officials
- Engages members of all three branches of state government
- Justice Center provides practical, nonpartisan advice informed by the best available evidence



The Two Phases of Justice Reinvestment

Justice Reinvestment

*a data-driven approach to reduce corrections spending
and reinvest savings in strategies that can
decrease recidivism and increase public safety.*

Bipartisan, inter-branch, bicameral structure

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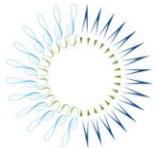
Analyze Data & Develop
Policy Options

2

Adopt New Policies

3

Measure Performance



THE
PEW
CHARITABLE TRUSTS



BJA
Bureau of Justice Assistance
U.S. Department of Justice



BJA
Bureau of Justice Assistance
U.S. Department of Justice



Drug Offenses and Substance Abuse are Contributing to Prison Population Growth

- 22% of new commitments are for drug offenses
- 62% of probation revocations to prison had a substance score indicating abuse or addiction
- Prison stock population drug offenders up 32%
- Alcohol and drug use cited in 78% of technical parole revocations and 65% of revocations for new crimes
- Arrests for drug offenses are up 6%



Key Provisions of Justice Reinvestment Framework

- New treatment supervision sentencing option
 - Substance abuse treatment and supervision in lieu of incarceration
 - Can be imposed as condition of drug court, or a term or modification of probation
- Expands drug courts statewide by 2016
- Increases collaboration between criminal justice agencies and behavioral health agencies
- \$3M in FY 2014 for community-based substance abuse treatment for criminal-justice involved population



Governor Tomblin Signs SB 371



For more information on Justice Reinvestment in West Virginia

- Contact: Sarina Rosenberg, Program Associate, srosenberg@csg.org
- Visit: csgjusticecenter.org



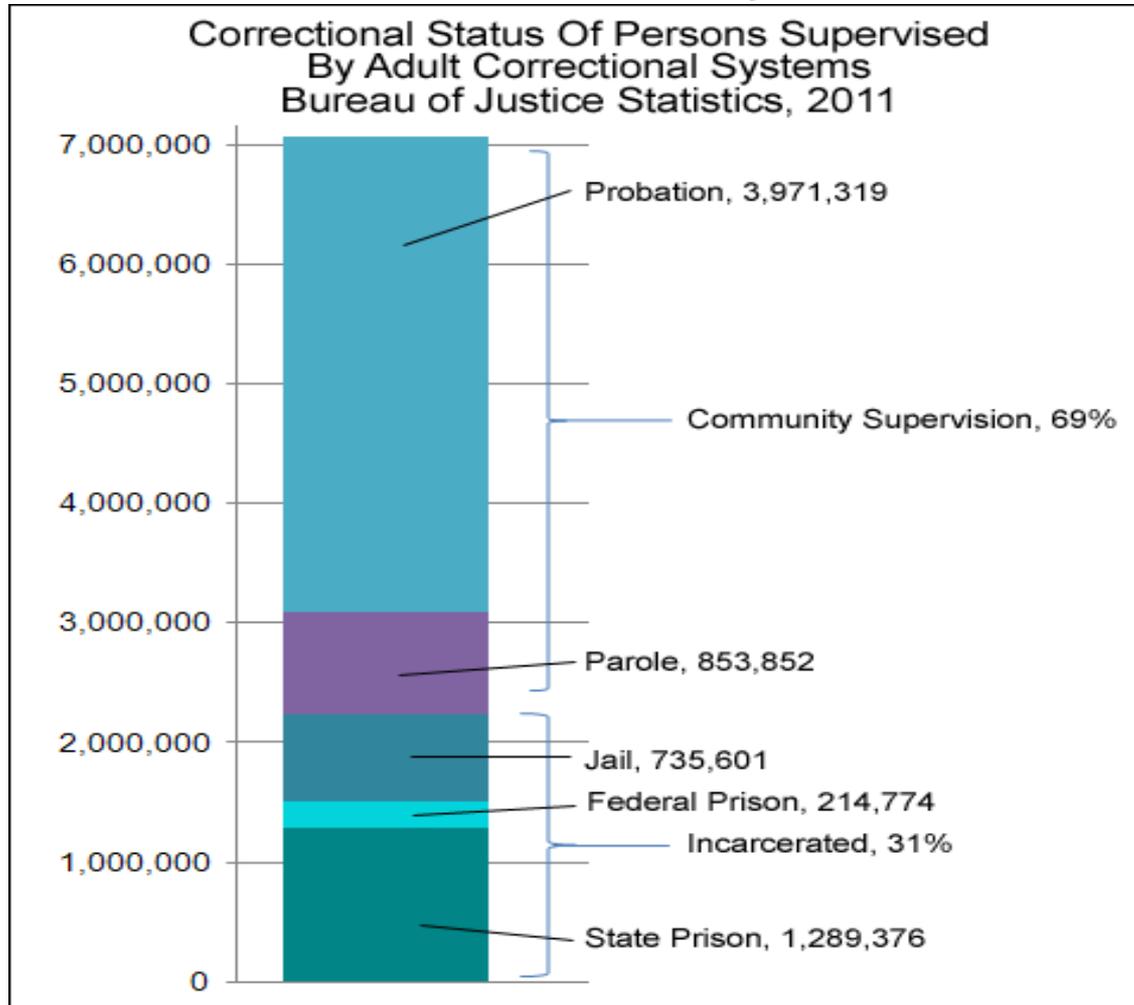
National Estimates: Behavioral Health Disorders are Prevalent in the Justice-Involved Population

Estimated Proportion of Adults with Mental Health, Substance Use, and Co-occurring Under Correctional Control and Supervision*

	State Prisons	Probation and Parole	Jails
Serious Mental Illness (Only)	7%	4-5%	5%
Substance Use Disorders (Only) (Alcohol and Drugs) – Abuse and/or Dependence	44%	32-36%	56%
Co-Occurring Disorders	9%	3-4%	12%
Remaining Population	40%	55-61%	27%



Majority of Justice-Involved are in Community



What Works for Risk Reduction

CORE CORRECTIONAL PRACTICES



Principles of Effective Intervention

RISK

WHO

Deliver more intense intervention to higher risk offenders

NEED

WHAT

Target criminogenic needs to reduce risk for recidivism

RESPONSIVITY

HOW

Match mode/style of service to offender

TREATMENT

HOW

Provide services using CBT techniques



The Treatment Principle:

- Supervision alone will not be sufficient to change behaviors for certain types of offenders
- Punishment programs (criminal sanctions) do not work to change behavior
- Need services that are behavioral in nature
 - Current risk/need factors
 - Action-oriented
 - Behavior is reinforced



Most Successful Types of Treatment Models

- Social learning – anti-criminal modeling, skills development
- Cognitive behavioral – cognitive theory, problem solving
- Radical behavioral – token economies, contingency management
- Family based therapies – Multi-systemic & Functional Family therapy
- Targeting specific criminogenic needs – sex offender, violence, mentally disordered



Core Correctional Practices

HOW is often as important as WHAT

Influences engagement
and outcomes

WHAT = CBT

HOW = CORE
CORRECTIONAL
PRACTICES



Core Correctional Practices

Cognitive
Restructuring

Anti-Criminal
Modeling

Structured
Learning/Skill
Building

Effective
Reinforcement

Effective
Disapproval

Effective Use
of Authority

Quality
Interpersonal
Relationships

Problem
Solving
Techniques



The Four Principles of Cognitive Intervention

- Thinking affects behavior
- Antisocial thinking causes antisocial behavior
- Thinking can be influenced
- We can change how we feel and behave by changing how we think

Cognitive-Behavioral Cycle

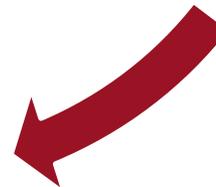
Consequences (negative or positive) determine the likelihood of continuance



Situations tell us what conditions led to the behavior (people, places, things)



Thoughts drive behaviors



Feelings stem from thoughts and can be healthy or problematic depending on how one copes with the feelings



Behaviors represent the ultimate behavior the person engages in



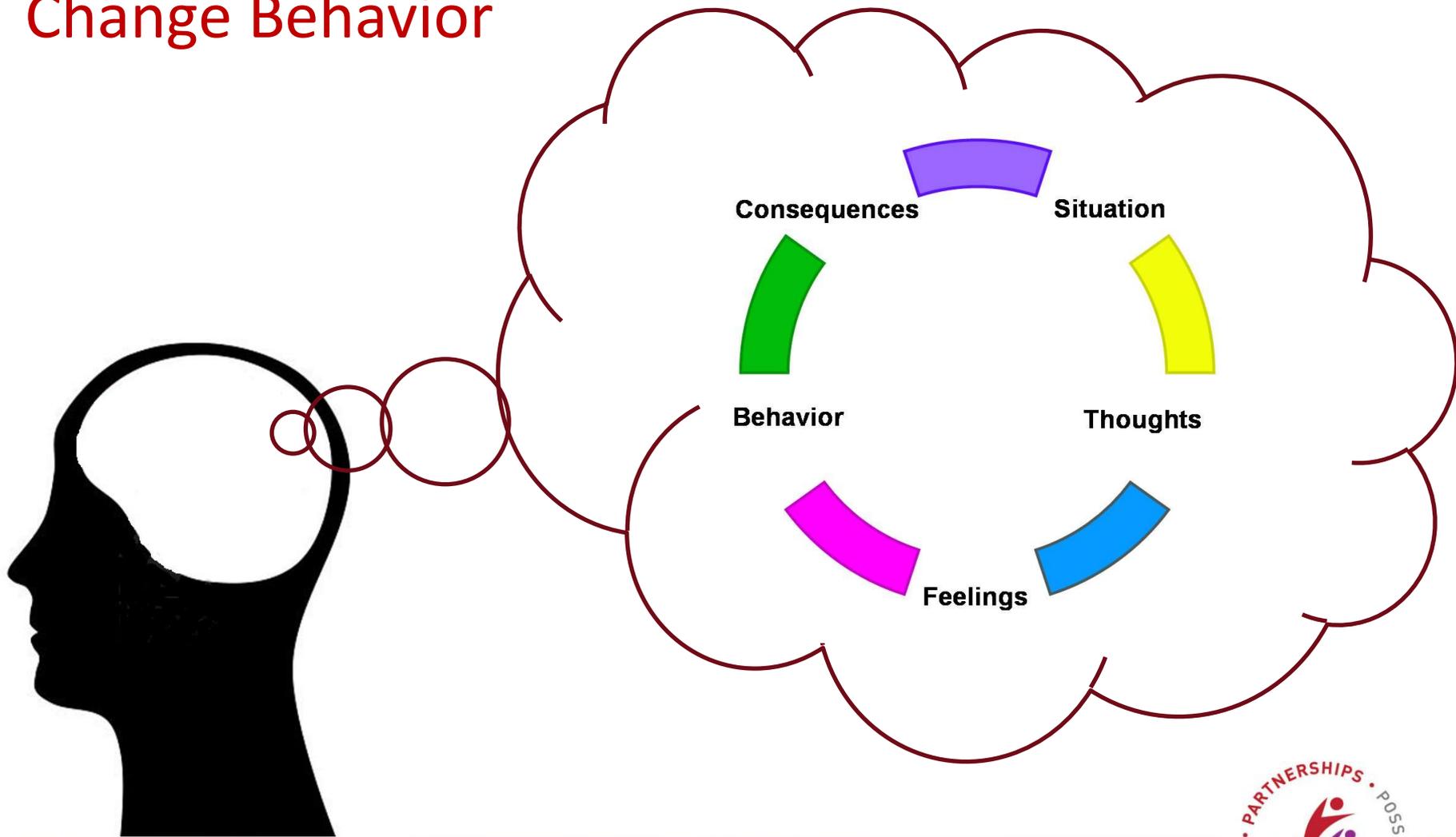
How Cognitive Behavioral Interventions Work to Change Behavior

Situation =
Consequence

Typical thinking patterns of offenders



How Cognitive Behavioral Interventions Work to Change Behavior



Cognitive Restructuring

Problematic thoughts/high risk situations are described

Thoughts and feelings are identified

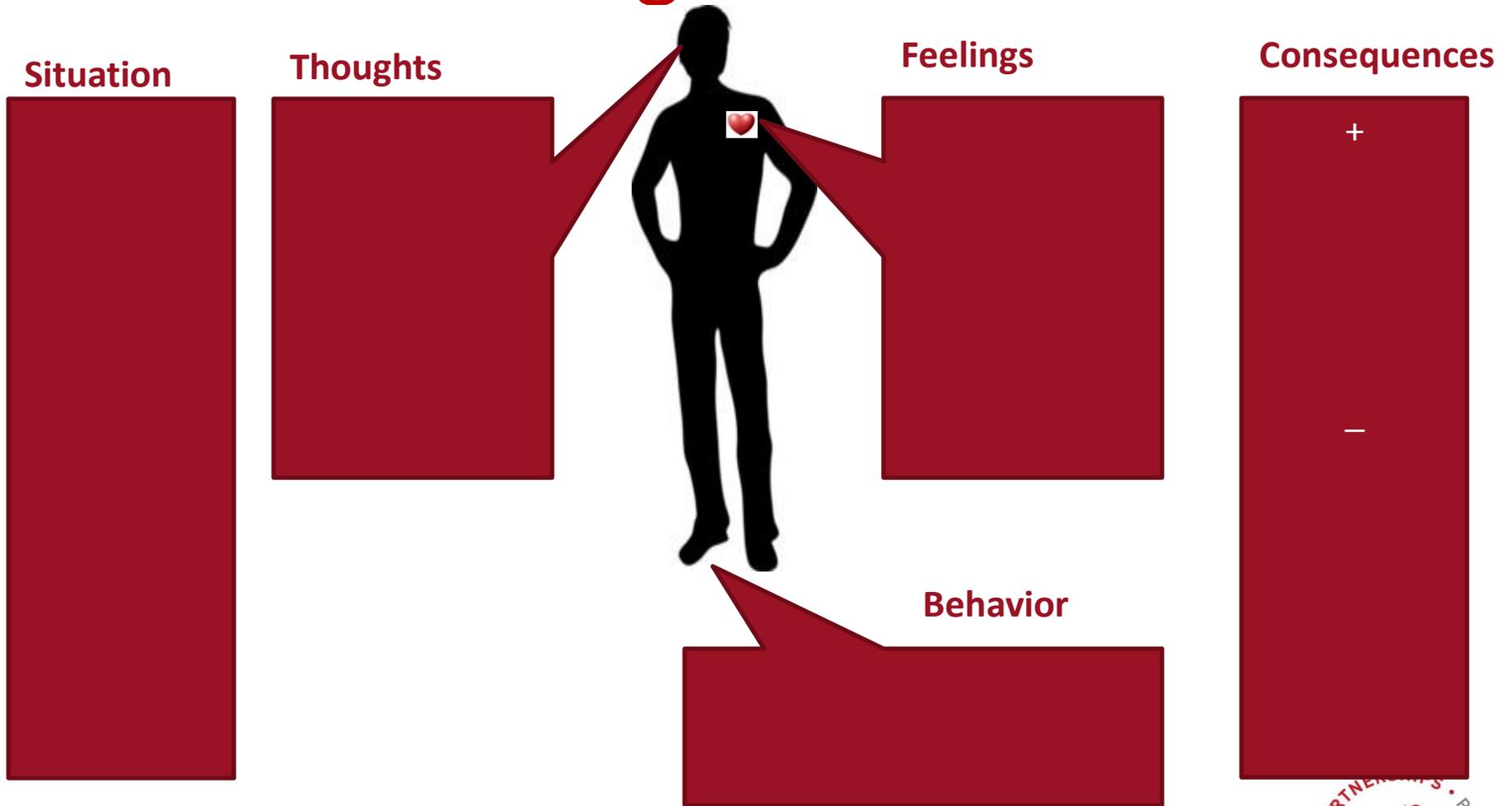
Risky thoughts are noted and challenged

Replacement thoughts are formed

Alternatives to risky thinking is practiced



Behavior Change



Anti-Criminal Modeling



Offenders learn from regular interaction with staff

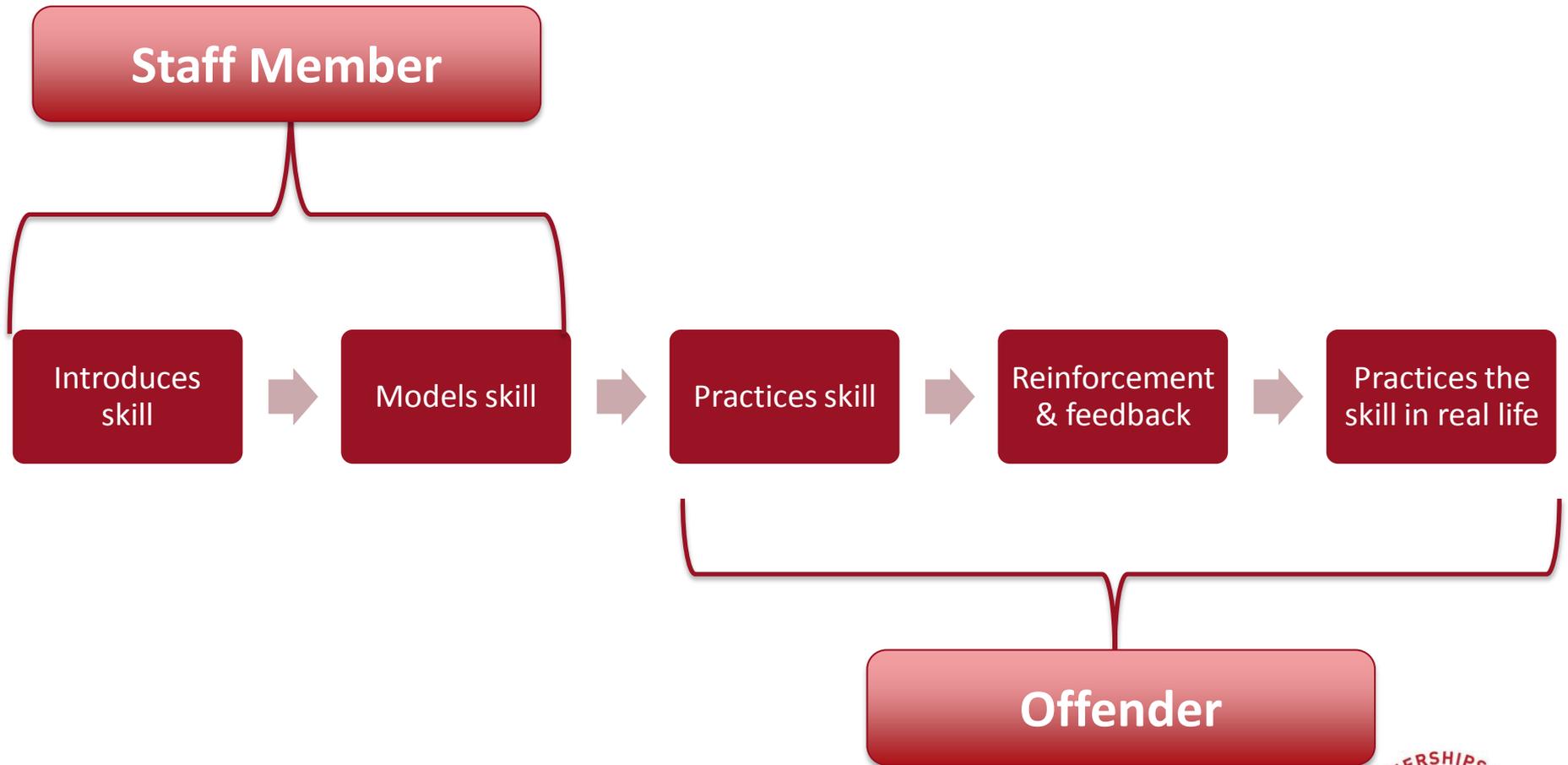


Offenders are highly observant of staff and look for deviancy



Need specific modeling or skills to teach new behaviors

Structured Skill Building



Effective Reinforcement

- During or immediately following the behavior
- Contingent on performing the desired behavior
- Consistently and then intermittently
- Specify reason for reinforcer when delivering
- Reinforcer desirable to recipient



Effective Disapproval

- Identify the behavior to be sanctioned
- Immediately tell the person what behavior you disliked
- Tell the person why you disliked the behavior
- Discuss the short and long-term consequences of the behavior
- Model an alternative prosocial behavior
- Consider pairing the disapproval with a sanction



Effective Use of Authority



Key Elements of Effective Substance Abuse Programs for Criminal Justice

Standardized substance abuse assessment tool(s)

Standardized risk assessment tool(s)

Interventions to encourage engagement and motivation

Cognitive behavioral/behavioral modification techniques

Target factors that are associated with criminal behavior

Services that address co-occurring medical and mental health disorders

Family involvement in treatment

Treatment duration of 90 or more days

Systems integration and a continuum of care

Use of sanctions and incentives



National Institute on Drug Abuse
Principles of Drug Abuse
Treatment for Criminal
Justice Populations | A Research-Based Guide

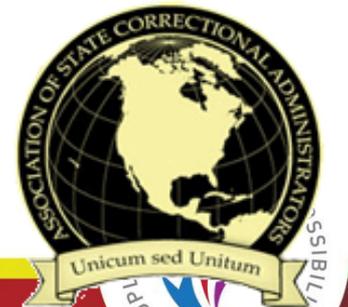


National Institutes of Health
U.S. Department of Health and Human Services

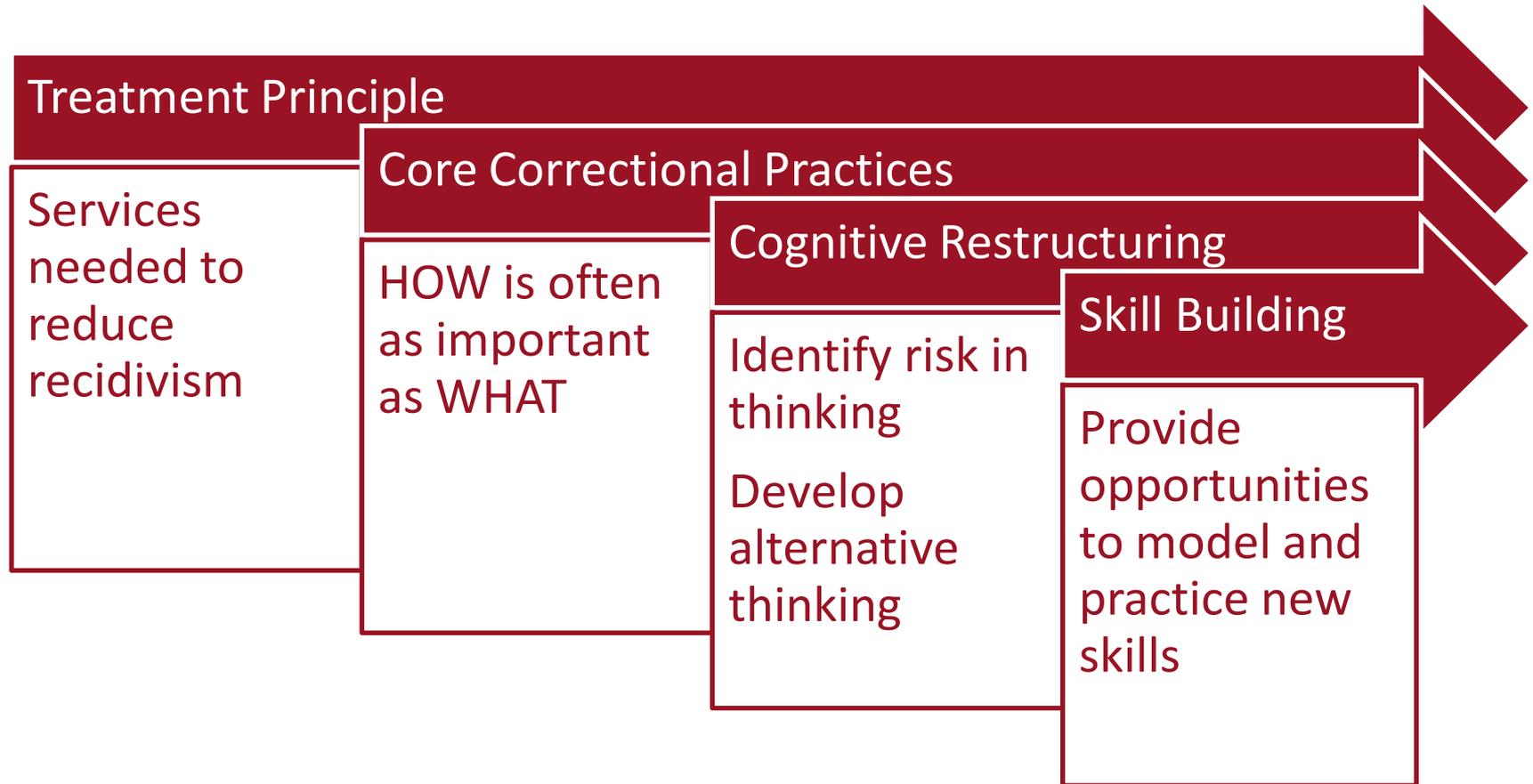


ADULTS WITH BEHAVIORAL HEALTH NEEDS UNDER CORRECTIONAL SUPERVISION:

A Shared Framework for Reducing Recidivism and Promoting Recovery



Summary:



Contact Information

Jennifer Pealer, Ph.D.

Assistant Professor

East Tennessee State University

pealerj@etsu.edu

