A coordinated approach to incare and aftercare offender assessment

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Kia Ora

Tēnā koutou katoa
Why do we need a coordinated approach to incare and aftercare?

John’s Story

• 17 years in prison so far for planned murder
• High risk violent psychopathic offender **BUT**
• No apparent issues in institutional care for 15 years
• Had completed in last three years intensive therapy programming focused on violence, and has been working outside wire for last 18 months **BUT**
• Parole board divided on whether to release him on parole due to concerns over the reliability of his risk management in prison and later in the community, keeping in mind his index offence involving calculated callous murder, his assessed high risk, and diagnosis as a criminal psychopath!
Coordination in terms of an assessment approach across settings would bring?

- **Early identification** of crime need areas (early in sentence when motivation is typically higher)
- **Same messages** to offenders, especially those on longer sentences or frequent ‘revolving door’ sentences on what they need to address to counter treatment avoidance, variable motivation, and impression unfairness
- **Similar measures** also provides an ability to deliver across prison and community settings and enables better capture of *reliable change* in risk.
- Really important when offenders may only seem well within therapy!
Coordinated approach benefits

- Provides staff with different backgrounds a *common evidence approach*, a ‘Rosetta stone’ to counter different levels of knowledge and approaches that often results in a ‘Tower of Babel’ in correctional management (different language used)
Benefits

• **Shared expertise/training** that provides correctional organisations with staff able to move across custody and community/parole settings

• **Multiple points of treatment contact** for offenders to engage—Very important for high risk offenders presenting typically with a high level of barriers to change and a low level of protective supports around them.

• Allows flexibility, as offenders **differ in terms of when treatment issues are a priority** (across prison and community settings)

• Allows **repeated treatment** as well as combined intervention. A good thing to do with high risk offenders!
Treatment/behaviour change not linear nor confined to therapy

• Release plans change frequently (S Brown 2009)
• Higher quality release plans prior to parole resulted in reduced reoffending (Dickson et al., 2013)
• Assessment of change, pre and post programmes and then at later stages of imprisonment revealed some prisoners were fake news, some were snails (delayed progress), and some race horses! (Polaschek et al., 2016; Polaschek et al., in preparation)
• **Realistic hope** appears to be one of the key factors in maintaining and promoting change across time and outside of therapy
Need for coordinated care approach to have RNR model as base

- The Risk-Need-Responsivity (RNR model) created by Jim Bonta and Don Andrews provides guidance for effective offender risk assessment and case management.
- Draws together personality cognitive, and social learning approaches into an integrated theory of criminal behaviour. *Importantly focuses management on factors that are actually related to crime!*
- After close to 30 years of its application still the model with the most support.
- Yet many fail to fully understand its approach so *its principles need to be placed into coordinated assessment*
Other efforts to produce a coordinated assessment approach?

Ohio Risk Assessment System (Latessa et al., 2010)

- A state wide system to assess risk/need/responsivity for Ohio offenders to improve consistency and to facilitate communication
- Introduced four tools to assess risk at multiple points
  - Pretrial Assessment Tool (PAT)
  - Community Supervision Tool (CST)
  - Prison Intake Tool (PIT)
  - Reentry Tool (RT)
- Victoria Australia have just introduced the SDAC-21 and DRAOR
Coordination opportunity knocks!

• New Zealand (NZ) 2009 in response to high profile parole failures and government criticism moved to a focus on release conditions to consideration of dynamic risk and a role in treatment.

• We had been looking at a new dynamic measure designed specifically for probation to use- good timing!

• *Dynamic Risk Assessment Offender Re-entry* (DRAOR, Serin, Mallioux & Wilson, 2010).
Other key influences

• Financial/Political, NZ spent billion’s of dollars on new prisons, successive governments say that imprisonment was not the answer!

• Canadian research- “unpacking the black box of probation”- were they following the RNR model in sessions with parolees? (Bonta et al., 2008)
  – Not really! Modest adherence to risk, poor targeting need areas and addressing responsivity.

• Canadian programme (STICS) to improve probation contact outcomes (Bonta et al, 2013)
A Balanced Approach Needed!

- Protective Factors
- Dynamic Factors
- Static Factors
## Factors considered in DRAOR

<table>
<thead>
<tr>
<th>Stable</th>
<th>Acute</th>
<th>Protective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer associations</td>
<td>Substance abuse</td>
<td>Responsive to advice</td>
</tr>
<tr>
<td>Attitude to authority</td>
<td>Anger/hostility</td>
<td>Prosocial identity</td>
</tr>
<tr>
<td>Impulse Control</td>
<td>Opportunity/access to victims</td>
<td>High expectations</td>
</tr>
<tr>
<td>Problem-solving</td>
<td>Negative mood</td>
<td>Cost/Benefit</td>
</tr>
<tr>
<td>Sense of entitlement</td>
<td>Employment</td>
<td>Social support</td>
</tr>
<tr>
<td>Attachment with others</td>
<td>Interpersonal relationships</td>
<td></td>
</tr>
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<td></td>
<td>Living situation</td>
<td>Social control</td>
</tr>
</tbody>
</table>
Accuracy of DRAOR

• We found probation staff applying DRAOR at first contact had 69% predictive accuracy.
• DRAOR with the same offenders saw the accuracy increase, so second contact 75%, third, 78% and by fourth contact 79%.
• Better results due to better quality and more reliable information as well as changes in risk.
• Protective sub scale found 77% accuracy in predicting those who were not reconvicted.
Implementation Issues

• Probation staff owned DRAOR measure
  – Countered negative attitudes to psychological approach!
• Long game - multi year implementation required
• Practice leaders’ used to bring good practice and address poor assessments, especially in Protective factor ratings
• Found critical thinking errors in staff
  – Has recruitment implications
Importance of a good data recording system

- Right from start heavy investment in a computerised system to record DRAOR data. This later occurred with SDAC-21 as well)
- Provides ability to report on dynamic change over time
- Developing ability to create series of computer reports to uncover issues based on DRAOR pattern differences
A longitudinal study of DRAOR: Change over time and the impact of assessment timing (Hanby, 2013)

- All offenders released on parole following a term of imprisonment 2010 to 2012 ($N = 3,500$).
- Spread of ethnicity, age and social variables
- **Range of risk:**
  - 43.5% low risk,
  - 22.3% medium risk and
  - 33.0% high risk.
## Index offending

<table>
<thead>
<tr>
<th>Variable</th>
<th>%</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Offence Category and Group</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-violent offence</td>
<td>44.3</td>
<td>1550</td>
</tr>
<tr>
<td>Dishonesty&lt;sup&gt;1&lt;/sup&gt;</td>
<td>25.0</td>
<td>873</td>
</tr>
<tr>
<td>Drugs and antisocial offences</td>
<td>14.4</td>
<td>502</td>
</tr>
<tr>
<td>Property abuses and damage</td>
<td>2.1</td>
<td>75</td>
</tr>
<tr>
<td>Driving offences</td>
<td>1.2</td>
<td>40</td>
</tr>
<tr>
<td>Administrative and miscellaneous justice</td>
<td>1.0</td>
<td>36</td>
</tr>
<tr>
<td>Alcohol related</td>
<td>0.7</td>
<td>24</td>
</tr>
<tr>
<td><strong>Non-sexual violent offence</strong></td>
<td>39.3</td>
<td>1375</td>
</tr>
<tr>
<td><strong>Sexual offence</strong></td>
<td>16.4</td>
<td>573</td>
</tr>
</tbody>
</table>

| Offence Seriousness Group                     |     |      |
| High                                          | 34.8| 1217 |
| Moderate                                      | 56.3| 1970 |
| Low                                           | 7.0 | 246  |
| Lowest                                        | 1.9 | 65   |
RESULTS

• DRAOR administered multiple times. Demonstrated acceptable reliability and validity

• Criminal reconvictions during a two-year follow-up period accurately predicted from dynamic risk factors (Stable/Acute) overall accuracy 71% (confidence range 69-73%) and Protective factors 69% accurate (confidence range 65-68%).

• Last DRAOR administered before reoffending or the end of the follow-up period was best in terms of accuracy (Moderate to High for last).

• Overall accuracy and improvement with repeated DRAOR occurred across age groups, offence types, ethnicity
Recidivist vs non-recidivists - conclusions

• Offenders with a reconviction had significantly higher levels of stable and acute dynamic risk, lower levels of Protective Factors, and higher scores on the DRAOR
• Stable subscale score change, recidivism increased by 11% for each single point increase.
• Protective subscale recidivism decreases by 9% for each single point increase in Protective Factor score.
The DRAOR predicted recidivism above and beyond static (fixed) risk

- Reconvictions and criminal reconvictions DRAOR scores added to accuracy over and above static (fixed) prediction.
- Contributions were consistently positive. For each one-point increase on the DRAOR risk items increases reoffending by a factor of 4%, after controlling for the static risk (RoC*Rol).
Yesberg, Polaschek, & Serin (2013). Assessing dynamic risk and protective factors in the community: Examining the validity of the *Dynamic Risk Assessment for Offender Re-entry*.

- High-risk male offenders (299) released from prison between 2010 and 2012 all of whom had a DRAOR completed within 20 days of release.
- Participants were sentenced to at least 2 years imprisonment and had high static risk scores. Average of 64 previous convictions including 4.5 for violence
- Also completed other dynamic measures (VRS and RPFA-R)
Men more likely to have stable risk factors than acute or protective factors

- **Items indicating greatest risk were:**
  - Peer associations
  - Impulse control
  - Employment

- **Items indicating greatest protective asset were:**
  - High (realistic hope) expectations
  - Social support
Reoffending - first six months

- 29% of the sample failed parole conditions,
- 30% were convicted of a new offence,
- 6% were convicted of a violent offence, and
- 19% were convicted of new offence and sentenced to imprisonment.

- Stable scale best at predicting reoffending, added value over other dynamic measures

- Protective scale did not add value perhaps due to low rate of these assets for higher risk offenders!
DRAOR validation research

- Validity has been established with youth (Muirhead, 2016);
- Sexual offenders, at least to a degree with downwards trends in DRAOR scores following release are observed, risk appears to gradually increase and protective factors decreased in the weeks preceding violent, general and administrative recidivism (Averill, 2016);
- Females (Yesberg et al., 2015), predictive & gender neutral;
- Domestic Violence offenders in NZ (in progress but data looking good);
- Iowa Department of Corrections for parolees (Serin et al., 2017). Similar results
SDAC-21: Structured Dynamic Assessment Case-management- 21 item
Guidelines for case management using structured assessment of dynamic risk, responsivity, and protective factors

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Version-7 2013: Implementation Manual
Success breeds success!

Following the successful development and implementation of DRAOR with probation staff discussions were held in late 2011 on the possibility of implementing a similar approach with our approx 300 prison case managers.

Discussions resulted in a project to develop, pilot and implement such a measure for case managers.
Case Management (CM) Design

• Manages the end to end risk factors of a prisoner so that their issues related to offending are successfully addressed before release
• This is fundamental to a case manager’s role now and in the future, SDAC-21 provides the tool
• *Joined up approach between custody and community* key to effectively managing a prisoner on release, SDAC-21 and DRAOR enabled shared understanding of risk factors
SDAC-21 Development

- Modelled itself on the DRAOR subscales (Stable and Protective), enabled joined up information gathering and assessment approaches into community (15 items in common)
- Opportunity to review whether other dynamic risks and protective assets and lead to responsivity scale
- Matched SDAC-21 with the RNR model
<table>
<thead>
<tr>
<th>Stable Factors</th>
<th>Responsivity Factors</th>
<th>Protective Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gang association</td>
<td>Health problems</td>
<td>Responsive to advice</td>
</tr>
<tr>
<td>Negative attitudes authority</td>
<td>Conduct issues</td>
<td>Prosocial identity</td>
</tr>
<tr>
<td>Impulse control</td>
<td>Personal distress</td>
<td>High expectations</td>
</tr>
<tr>
<td>Problem-solving/coping stress</td>
<td>Unresponsive rehabilitation</td>
<td>Costs/Benefits</td>
</tr>
<tr>
<td>Sense of entitlement</td>
<td>Hostility/interpersonal aggression</td>
<td>Social supports</td>
</tr>
<tr>
<td>Attachment with others</td>
<td>Offence mirroring behaviour</td>
<td>Social control</td>
</tr>
</tbody>
</table>

[^1] **Learning difficulties**, new item to assess any detected cognitive difficulties (head injury), low IQ (especially verbal IQ), specific learning disabilities, i.e., dyslexia

[^2] **Employability**, new item to assess capability for gaining (knowledge, skills, abilities) and maintaining employment (make transitions, roles and jobs, quality of employment)
DRAOR and SDAC-21 Scoring- Scenarios
Part of the coordinated approach & culture change

Most likely risk scenario: Prison based □ Community based □

- Related to the following offence/misconduct:
- The victim(s)- age, gender, relationship would be:
- The impact on victim(s) is:
- Aggravating (Stable) features for this scenario are.
- Situational/Environment risk factors for the scenario are.
- Protective factors- current or future for the scenario are:
Example ‘Peter’s’ Most Serious Risk Scenario

**Related to an offence which is described**
- Domestic assault, manual but could include weapon if so likely knife (weapon of choice), could be aggravated wounding under select conditions such as perceived infidelity or partner leaving him.

**Who would be the victim(s)- age, gender, relationship etc**
- Partner-‘Rachel’, 23 years of age, isolated from family who live 200 miles away, intimate conflicted relationship with a 4 year old son.

**What would be the impact on victim(s)**
- Bruising, possible wounding (knife), possible trauma to their child if he is present during the assault (likely).

**Aggravating features identified**
- Poor ability to manage anger, pattern of past use of anger/violence to control women, pattern of substance abuse and freq possession of weapons.

**Situational/Environment risk factors**
- Banned from residing with partner, facing charges (minor but uncertain now about his future), partner possible losing her residence and would then move away to live with family.

**Protective factors**
- Potential- Rachel has a safety plan (untested), Parents- Want to help but are fearful of him, Peter is very motivated to be in a relationship and to be a father to son.
Implementation of SDAC-21

- Reliable with no items not needed or lacking a relationship with assessment purpose.
- Evaluation supported ability to assess dynamic needs. *Substance Abuse* (49%), *Impulse Control* (40.6%), and *Sense of Entitlement* (38.8%) were the top three areas.
- Responsivity needs, top issues *Hostile interpersonal* (20.3%), then *Conduct issues* (17.4%), and *Offence mirroring behaviour* (15.4%).
- Protective asset deficits, highest indicated need was in regards to *Social Control* (35.4%) then *Employability* (24.9%), and *Prosocial Identity* (22.3%). Interestingly the protective area seen as an asset for many was *High Expectations*, or hope for the future (28.7%).
Sample-characteristics and reliability

- Pilot study - 345 prisoners 16.5% female, 83.5% male.
- Age ranged 15 - 75 years, mean of 34 years.
- Ethnicity 59.4% NZ Maori, 34.5% Euro, 4.1% PI
- In terms of static risk assessment 52% probability of re-imprisonment within five years.
- Distribution of risk was skewed high reflecting the focus of case management on higher risk prisoners.
- SDAC-21 three sub scales found to be reliable in application (Stable, Responsivity, & Protective)
Imprisonment offence

- Assault, 25.5%
- Theft, 18.8%
- Child sex offence, 13.6%
- Robbery, 9.3%
- Drug, 8.7%
- Other, 7.8%
- Driving, 7.5%
- Adult sex offence, 4.9%
- Murder, 4.9%
## Need Distribution- Stable

<table>
<thead>
<tr>
<th>SDAC-21 Subscale</th>
<th>% 0 (n)</th>
<th>% 1 (n)</th>
<th>% 2 (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gang Association</td>
<td>55.9 (193)</td>
<td>24.1 (83)</td>
<td>20.0 (69)</td>
</tr>
<tr>
<td>Negative Attitude</td>
<td>37.7 (130)</td>
<td>39.4 (136)</td>
<td>22.9 (79)</td>
</tr>
<tr>
<td>Impulse Control</td>
<td>13.9 (48)</td>
<td>45.5 (157)</td>
<td><strong>40.6 (140)</strong></td>
</tr>
<tr>
<td>Problem Solving</td>
<td>10.7 (37)</td>
<td>51.0 (176)</td>
<td>38.3 (132)</td>
</tr>
<tr>
<td>Sense of Entitlement</td>
<td>17.1 (59)</td>
<td>44.1 (152)</td>
<td>38.8 (134)</td>
</tr>
<tr>
<td>Attachment with Others</td>
<td>24.3 (84)</td>
<td>53.3 (184)</td>
<td>22.3 (77)</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>20.3 (70)</td>
<td>30.7 (106)</td>
<td><strong>49.0 (169)</strong></td>
</tr>
</tbody>
</table>
# Need- Responsivity

<table>
<thead>
<tr>
<th>Responsivity Scale</th>
<th>% 0 (n)</th>
<th>% 1 (n)</th>
<th>% 2 (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Problem</td>
<td>61.4 (212)</td>
<td>23.5 (81)</td>
<td>15.1 (52)</td>
</tr>
<tr>
<td>Conduct Issue</td>
<td>53.3 (184)</td>
<td>29.3 (101)</td>
<td>17.4 (60)</td>
</tr>
<tr>
<td>Personal Distress</td>
<td>45.2 (156)</td>
<td>42.6 (147)</td>
<td>12.2 (42)</td>
</tr>
<tr>
<td>Unresponsive Rehab</td>
<td>36.8 (127)</td>
<td>49.3 (170)</td>
<td>13.9 (48)</td>
</tr>
<tr>
<td>Hostile interpersonal</td>
<td>46.1 (159)</td>
<td>33.3 (115)</td>
<td>20.3 (70)</td>
</tr>
<tr>
<td>Offence mirroring behaviour</td>
<td>56.5 (195)</td>
<td>28.1 (97)</td>
<td>15.4 (53)</td>
</tr>
<tr>
<td>Learning Difficulties</td>
<td>64.3 (222)</td>
<td>27.0 (93)</td>
<td>8.4 (29)</td>
</tr>
</tbody>
</table>
## Protective

<table>
<thead>
<tr>
<th>Protective Scale</th>
<th>% 0 (n)</th>
<th>% 1 (n)</th>
<th>% 2 (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsive to Advice</td>
<td>17.7 (61)</td>
<td>58.0 (200)</td>
<td>24.3 (84)</td>
</tr>
<tr>
<td>Prosocial Identity</td>
<td>22.3 (77)</td>
<td>64.6 (223)</td>
<td>13.0 (45)</td>
</tr>
<tr>
<td>High Expectations (Hope)</td>
<td>16.8 (58)</td>
<td>54.5 (188)</td>
<td>28.7 (99)</td>
</tr>
<tr>
<td>Cost/Benefit</td>
<td>20.0 (69)</td>
<td>55.7 (192)</td>
<td>24.3 (84)</td>
</tr>
<tr>
<td>Social Support</td>
<td>21.7 (75)</td>
<td>57.4 (198)</td>
<td>20.9 (72)</td>
</tr>
<tr>
<td>Social Control</td>
<td>35.4 (122)</td>
<td>55.1 (190)</td>
<td>9.6 (33)</td>
</tr>
<tr>
<td>Employability</td>
<td>24.9 (86)</td>
<td>49.3 (170)</td>
<td>25.8 (89)</td>
</tr>
</tbody>
</table>
Full Implementation of both DRAOR and SDAC-21 for last five years

- All probation staff trained in DRAOR and case managers trained in SDAC-21, some in both
- Applied across government managed and private managed facilities
- Big ongoing challenge is reliable application and assisting staff involved to also being able to intervene not just assess need
Implications of a coordinated approach using the DRAOR and SDAC-21 applications?

• Creates and maintains *informed and ‘joined up’ dynamic* offender management across community and prison

• Consistent message to offenders on what they need to focus on- no surprises

• **Focus on protective factors across settings**
  – Keeps them in place to manage risk in prison/staff safety
  – Provides reliable evidence of these important considerations for parole decision making

• Move from event/tick box focus to **pathway consideration**

• **Provides better** quality information to apply other specialist risk measures as well as of offence paralleling behaviours which relate to behaviour within prison!
‘Trojan Horse’

• DRAOR and SDAC-21 have changed approach to offender management in NZ
• Starting to **impact on prison officer case notes and day to day management**
• Focus now on individual offender needs
• Staff see themselves more as change agents, have a sense of purpose, **know what they are doing!**
Conclusions on the NZ experience of a coordinated incare and aftercare approach

• Common approach across case management, probation, therapy, and psychologists, some shift in culture

• RNR whether or not the staff/organisation understood the model! Reflects the reality of a large organisation with a varied workforce and some staff turnover

• Staff able to move across settings and roles, establishes a group with critical thinking skills.
Conclusions-cont

• Need to include other key stakeholders such as health, and aftercare organisations in joined up approach!
• Provides huge amount of dynamic data to assess intermediate change to counter broad often ‘blunt’ yes/no reoffending treatment evaluations
• Provides variables we can add to other risk assessment measures (i.e., Domestic Violence prediction)
• Will be tested by current NZ Government Justice Forum ideas but at least we have now better quality information on dynamic issues to set baselines for new initiatives and hopefully to guide targets!
Whakawhetai koe katoa

Thank you all!

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