

A Deeper Dive into Risk, Need & Responsibility

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- Points of views or opinions in this document are those of the author and do not necessarily represent the official position of the Executive Office of the President.

Risk Principle

- Not necessarily a risk for violence or dangerousness
- Difficult prognosis or lesser amenability to treatment
- The higher the risk level, the more intensive the supervision and accountability should be, and vice versa
- Mixing risk levels is contraindicated

Need Principle

- Clinical syndromes or impairments (diagnosis)
- Cause crime (“criminogenic”) or interfere with rehabilitation (“responsivity”)
- Addiction is criminogenic and serious mental illness interferes with response to rehabilitation
- The higher the need level, the more intensive the treatment or rehabilitation services should be, and vice versa
- Mixing need levels is contraindicated

Risk & Needs Matrix

High Risk

Low Risk

High Needs

<ul style="list-style-type: none">• Supervision• Treatment courts (e.g., drug courts)• Adaptive rehabilitation	<ul style="list-style-type: none">• Treatment diversion• Adaptive rehabilitation
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Low Needs

<ul style="list-style-type: none">• Intensive probation (ISP, HOPE)	<ul style="list-style-type: none">• Deflection; banked probation
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Shaping Behavior

- **Don't expect too much**
 - Learned helplessness, ratio burden, ceiling effects
- **Don't expect too little**
 - Habituation, complacency
- **Proximal vs. distal vs. mastered goals**
- **Phase specificity**
 - What was once distal becomes proximal and is eventually mastered



Treat or Punish?

Substance Dependence or Addiction

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1. Triggered binge pattern
2. Cravings or compulsions
3. Withdrawal symptoms

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Abstinence is a distal goal

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Abstinence is a distal goal

Substance Misuse

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Abstinence is a distal goal

Substance Misuse



Abstinence is a proximal goal

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Abstinence is a distal goal

Substance Misuse



Abstinence is a proximal goal

Collateral needs

- Dual diagnosis
- Chronic medical condition (e.g., HIV+, HCV, diabetes)
- Homelessness, chronic unemployment

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Abstinence is a proximal goal

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Regimen compliance is proximal

Specific Responsivity

- Order and timing of intervention is crucial:
 1. **Responsivity needs** — interfere with rehabilitation
 2. **Criminogenic needs** — cause or exacerbate crime
 3. **Maintenance needs** — degrade rehabilitation gains
 4. **Restorative needs** — aid community reintegration
 5. **Non-exigent humanitarian needs** — cause distress
- Continuing-care plan to address unmet needs
- Each phase advancement increases the odds of subsequent phase advancements and vice versa

Conclusions

- **No program or intervention works for everyone**
- **Must match supervision, treatment, and social services to risk and need (diagnosis & prognosis)**
- **Must match incentives, sanctions, and treatment adjustments to difficulty level (proximal vs. distal)**
- **Mismatches waste resources, worsen outcomes, and threaten public health & public safety**
- **Professions have a standard of care requiring adherence to these practices**
- **The definition of “quackery” (vs. medicine) is one-size-cures-all thinking**

Pre-Disposition Assessment

- Require assessment of risk and need before disposition
 - *e.g.*, as part of a pre-sentence investigation (PSI)
- Use immunity especially at pre-adjudication stage
- Valid, reliable, & culturally unbiased instruments
- Substance use vs. dependence diagnosis guides treatment conditions and response to technical violations involving new substance use

Evaluation



<https://cvent.me/Ar0x0x>

1. On your compatible phone or tablet, open the built-in camera app.
2. Point the camera at the QR code.
3. Tap the banner that appears on your phone or tablet.
4. Follow the instructions on the screen to complete the evaluation.
5. After completion, you will be provided with a certificate that can be saved and printed.