Principles of Effective Intervention in Juvenile Justice

Presentation at the System of Care Conference
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Sponsored by the Office of Juvenile Justice and Delinquency Prevention
Office of Juvenile Justice and Delinquency Prevention’s (OJJDP) Smart on Juvenile Justice Initiative
Smart on Juvenile Justice Initiative

• OJJDP’s Smart on Juvenile Justice Initiative aims to assist states in implementing juvenile justice system reform
• The initiative seeks to
  • Embrace a community-based approach that limits out-of-home placement
  • Promote evidence-based practices that follow a developmentally appropriate approach
  • Assist states in maximizing cost savings and reinvesting savings to support system change
Smart on Juvenile Justice Initiative

• Five distinct programs
  • A Comprehensive Strategy to Juvenile Justice Reform in Georgia, Hawaii, Kentucky, South Dakota and West Virginia
  • Technical Assistance to Reduce Racial and Ethnic Disparities in the Juvenile Justice System
  • Community Supervision, Training and Technical Assistance Program
  • Juvenile Prosecution Curriculum Development, Training and Technical Assistance Program
  • Enhancing Youth Access to Justice Initiative
Introductions

• About CJI at CRJ
  • The Crime and Justice Institute (CJI) offers a team of experts who provide nonpartisan consulting, policy analysis, and research services to improve public safety in communities throughout the country. CJI develops and promotes evidence-based practices that inform practitioners and policymakers, including corrections officials, police, courts, and political and community leaders, to assist them in making criminal and juvenile justice systems more efficient and cost-effective, and to promote accountability for achieving better results.
The Principles of Effective Intervention
Principles of Effective Intervention

• Presentation Objectives
  • Establish the Principles of Effective Intervention (PEI)
  • Learn and apply the Risk Principle
  • Learn and apply the Need Principle and the “Big Four”
  • Learn and apply the Responsivity Principle
  • Learn and apply the Fidelity Principle
Questions

• How can we know who is going to engage in future delinquency?

• What characteristics or risk factors do you recognize when working with a youth that will make it more difficult for the individual to be successful?
What Staff Need to Know

• The foundation for what works in rehabilitating youth is adherence to the Principles of Effective Intervention (PEI)
  • Risk Principle – tells us WHO to target
  • Need Principle – tells us WHAT to target
  • Responsivity Principle – tells us HOW to effectively work with youth
  • Fidelity Principle – tells us how to do this work RIGHT

• Even the best evidence-based program or practice must adhere to these principles to be effective
The Risk Principle
The Risk Principle

• We can predict future delinquent behavior by assessing risk factors
  • The best way to assess juvenile risk factors is by conducting an actuarial assessment

• Only target those youth with higher probability of future delinquency

• We want to *match* levels of supervision/placement/treatment/services to the risk level of the youth
The Risk Principle

• Target those youth with higher probability of future delinquency
  • **High risk** juveniles are more likely to recidivate and are more active when they do recidivate
    • Require the most intensive intervention (supervision and treatment) for the high risk youth (dosage)
  • **Low risk** juveniles are not as likely to engage in future delinquency
    • Too much intervention or “over-treatment” can increase likelihood of delinquency
The Risk Principle

- Dowden and Andrews’ meta-analysis shows that when there are interventions targeted at high risk, recidivism is reduced 19%, but target the low risk and recidivism increased 4%
- Knowing who is high risk and who is low risk matters
- Using a risk assessment to properly classify youth is essential

(Dowden & Andrews, 1999a)
The Risk Principle

• *Why might dosage matter based on the risk level?*
• Low risk youth may learn antisocial behaviors and attitudes when engaging with high risk youth
• While increased dosage works to disrupt antisocial networks of the high risk youth, it decreases prosocial networks for low risk

(Latessa, 2011)
Summary

• Assess, identify and target youth with a higher probability of delinquency

• Provide the most intensive supervision and services to higher risk youth

• Intensive supervision and services for lower risk youth can increase recidivism
The Need Principle
The Need Principle

• Certain factors are tied to delinquent behavior
• Targeting these factors will result in a reduction in future delinquency
  • **Risk factor** = any characteristic related to recidivism (static or dynamic)
    • **Static** = things that cannot be changed (age at first offense, number of prior adjudications, etc.)
    • **Dynamic** = things that can be changed (antisocial peers, education, substance abuse, etc.)
  • **Criminogenic** = crime-producing
  • **Criminogenic needs** = risk factors which predict recidivism AND are dynamic
The Need Principle

• Research shows that targeting key criminogenic risk factors will produce the best reduction in risk
  • “Big Four”  
    (Andrews & Bonta, 1994)
    • Antisocial attitudes
    • Antisocial peers
    • Antisocial personality
    • History of antisocial behavior
  • Other criminogenic risk factors
    • Substance abuse
    • Education/employment
    • Low family affection/poor supervision/poor communication
    • Leisure & recreation
Example: Heart Attack Study

• One international study that looked at the risk factors associated with heart attacks

• Gathered data on all heart attacks

• Compared to case-matched controls
Example: Heart Attack Study

Risk Factors of Heart Attack

1. Increased LDL/HDL ratios (i.e., elevated LDL and low HDL levels)
2. Smoking
3. Diabetes
4. Hypertension
5. Abdominal obesity
6. Psychosocial (i.e., stress or depression)
7. Failure to eat fruits and vegetables daily
8. Failure to exercise
9. Failure to drink any alcohol
Example: Heart Attack Study

• The risk of heart attack for individuals who had all 9 of these factors, amazingly, was almost 130 times higher than for somebody with none of them. The first two of these risk factors (bad lipid readings and smoking) predicted 2/3 of all heart attacks.
## Example: Heart Attack Study

1) Increased LDL/HDL ratios  
2) Smoking  
3) Diabetes

4) Hypertension  
5) Abdominal obesity  
6) Psychosocial (i.e., stress or depression)

7) Failure to eat fruits and vegetables daily  
8) Failure to exercise  
9) Failure to drink any alcohol

1) Attitudes  
2) Peers  
3) Personality

4) Substance Abuse  
5) Family  
6) Education/Employment

7) Recreation  
8) Accommodations  
9) Financial
The Need Principle

• Field struggles with targeting the Big Four
  • Easier to identify if the more objective criminogenic needs are being addressed
    • confirm youth is attending school
    • conduct drug tests
    • confirm youth is participating in programming

• Failing to match proper services with criminogenic needs increases likelihood of recidivism
  (Viera et al., 2009)
  • Currently, only 5% of at-risk youth actually receive needed evidence-based services
    (Henggeler & Schoenwald, 2011)
The Need Principle

• The primary targets of programs and interventions need to address criminogenic needs to reduce future delinquency

• Non-criminogenic needs
  • Self-esteem
  • Anxiety
  • Creative abilities
  • History of trauma/victimization
  • Medical needs
  • Physical conditioning
• Current research does not suggest that mental health issues are a criminogenic need, meaning they are not significantly associated with delinquent behavior
  • A recent meta-analysis of 126 studies found that non-substance-related mental illness diagnoses were either not statistically related to recidivism or were related to lower rates of recidivism (Bonta, Blais & Wilson, 2013)

• We should not ignore mental health as it does impact success in programming and interventions → this makes it a responsivity factor
Summary

- The need principle tells us what to target and what not to focus on in treatment and intervention.

- Further, research on the need principle suggests what the priority targets are → the Big Four:
  - Antisocial attitudes
  - Antisocial peers
  - Antisocial personality
  - History of antisocial behavior
The Responsivity Principle
The Responsivity Principle

• Must address the barriers that get in the way of youth benefiting from supervision, case management, and other interventions
  • Individual learning styles
  • Barriers to interventions (e.g. transportation)
  • Ineffective or inappropriate interventions
• Addressing barriers and hurdles will increase likelihood of success
The Responsivity Principle

• Two meta-analyses found that program models integrating general responsivity are more successful in reducing juvenile recidivism
  • Program models followed a cognitive behavioral approach
  • Programs with therapeutic philosophies rather than a control-oriented focus are more successful
  • Programs that operate within the community saw greater reductions in recidivism than those in institutional settings
• Reductions in recidivism for high risk youth with serious delinquent behaviors was 12% - 40%
  (Lipsey, Wilson, Cothern, 2000; Lipsey, 2009)
The Responsivity Principle

• General Responsivity
  • Interventions and programs that are based on cognitive-behavior/social learning theories are generally responsive to youth
  • Can be implemented in all settings and interactions with youth

• Specific Responsivity
  • Youth learn differently and have certain barriers that should be removed before programming or addressed during programming
General Responsivity

• General Responsivity
  • Cognitive Interaction Skills are an aspect of general responsivity
  • Cognitive Interaction Skills are the cognitive-behavioral approaches that can be used in ALL interactions with youth
  • Cognitive Interaction Skills are the skills that staff must use and model when interacting with youth, both IN and OUT of formal meetings
Specific Responsivity

- Specific Responsivity
  - Barriers removed prior to treatment
    - Acute mental illness
    - Childcare
    - Transportation
  - Factors needing accommodation during programming
    - Developmental or learning disabilities
    - Anxiety or depression
    - Motivation
    - Language
    - Physical disabilities
Specific Responsivity

• The adolescent brain is not fully developed until the mid twenties
  (OJJDP, 2015; Sparks, 2004)

• Typical developmental functioning can impact behavior
  (OJJDP 2015, Sparks 2004)
  • Impulses
  • Regulation of emotions
  • Understanding consequences
  • Rational decision-making
The Responsivity Principle

• Adolescent development and the juvenile justice system
  • The juvenile justice system must acknowledge that adolescents function very differently than adults (OJJDP, 2015; Steinberg, 2009)
  • Treatment and accountability must differentiate between what is appropriate for an adult versus an adolescent (OJJDP, 2015; Steinberg, 2009)
  • Understanding adolescent development can help professionals with more effective interaction and communication with youth (Butts et al., 2010; OJJDP 2015)
The Responsivity Principle

• Trauma is a specific responsivity factor
  • A traumatic experience is an event that threatens someone’s life, safety, or well-being
    (Buffington et al., 2010)
  • Some examples of traumatic experiences
    • Witnessing a violent event
    • Concern that yourself, or someone close to you, may be victimized
    • Physical or sexual assault
    • Exposure to death, drug use, weapons and serious incidents (e.g. natural disasters)
      (Pilnik & Kendall, 2012)
The Responsivity Principle

• Juvenile justice population and trauma
  • A number of research studies have shown that upwards of 75% of justice involved youth have experienced trauma (King et al., 2011; Ko et al., 2008)
  • In an OJJDP Study of 1,829 detained youth (Abram et al., 2013)
    • 92.5% of youth had experienced at least one trauma
    • 84.0 % had experienced more than one trauma
    • 56.8 % were exposed to trauma six or more times
  • The prevalence of trauma experienced by youth in the juvenile justice system demonstrates the incredible need for an understanding of the effects of this trauma
The Responsivity Principle

• Impact of trauma on youth behavior
  • Trauma impacts a child’s development
  • Trauma can result in challenging behavior
    • Impulsivity
    • Self-harm
    • Oppositional (defiant/hostile)
    • Trouble in expressing & regulating feelings
    • Emotional or behavioral problems
      (Pilnik & Kendall, 2012)
  • Trauma must be addressed as a **responsivity** factor, rather than criminogenic need
The Responsivity Principle

• Mental illness is a specific responsivity factor
  • Treatment providers may need to address mental health issues in order for a youth to be able to attend and participate in a program fully and effectively
  • Acute mental illness may prevent youth from being able to participate even in an assessment prior to beginning rehabilitation efforts
  • Research has shown that for most people mental illness is not the cause of involvement in the criminal justice system, but can make prosocial changes harder

(Fisler, 2014)
Discussion Activity

• Divide into small groups
• Take 10 minutes to complete the handout
• Share your individual responses with the group
• Identify a spokesperson for your group to share the information that was reached by consensus
  • What are the static risk factors?
  • What are the criminogenic needs?
  • What are the responsivity issues?
Summary

• The relevance of the responsivity principle is to identify and remove the barriers prior to and during interventions

• Further, cognitive behavioral or social learning interventions (e.g., Cognitive Interaction Skills) are the most effective in reducing antisocial thoughts, attitudes, and behaviors
The Fidelity Principle
The Fidelity Principle

• The Fidelity Principle tells us how to do this work right
  • Model fidelity
    • Programs and interventions must be implemented with fidelity to achieve the recidivism reductions reported in the research
  • Training and coaching
    • Program staff must be provided the proper tools, training, and ongoing coaching and support to reduce the likelihood of drift
  • Risk assessment fidelity
    • Tools must be validated and accurately scored
Model Fidelity

• Fidelity is not limited to just being trained on a program
  • Following the curriculum manual specifically
  • Coaching
  • Internal supervision of group facilitation
  • External evaluation
  • Ongoing technical assistance

(Latessa, 2006; Lipsey 2009; Ndrecka, Bechtel, Lowenkamp, & Latessa, 2009)
Model Fidelity

• Research has shown that when a program is delivered with fidelity to the model, recidivism rates can be significantly decreased (WSIPP, 2010)

**Functional Family Therapy (FFT)**
- Followed Model: +38%
- Didn’t Follow Model: -17%

**Aggression Replacement Training (ART)**
- Followed Model: +24%
- Didn’t Follow Model: -7%
Model Fidelity

Residence
Community

Recidivism

1 2 3

# Principles Adhered to in Treatment

(Andrews & Bonta, 2006)
Model Fidelity

% Change in Recidivism

- Internal QA: +6%
- No Internal QA: +1%

(Latessa et al., 2010)
Training and Coaching

• Staff who were trained and receive coaching rated significantly higher than untrained staff in their adherence to Cognitive Interaction Skills
  • Effective reinforcement
  • Effective disapproval
  • Anti-criminal modeling
  • Problem solving
  • Structured learning
  • Effective use of authority
  • Cognitive restructuring
  • Relationship skills
Training and Coaching

EPICS Total Score

Month

Trained

Untrained

www.crj.org/cji
Risk Assessment Fidelity

• Why a risk assessment tool is used
  • Using a risk assessment tool allows youth to be assigned to appropriate interventions
  • If low risk youth are assigned high risk interventions, low risk youth can have higher recidivism rates

• How to maintain fidelity to a risk tool
  • Must be validated on the target population
  • Must have a process for inter-rater reliability to ensure the tool is accurately scored to predict low, moderate, and high risk for the target population
Risk Assessment Fidelity

General Recidivism

(Goggin, 1994)

Clinical: 0.08

Statistical: 0.22
Summary

• The relevance of the fidelity principle is to move toward the adoption, evaluation and dissemination of knowledge regarding the Principles of Effective Intervention

• By integrating and systematizing the fidelity principle into our work, we are more likely to achieve the greatest reductions in future delinquency
Summary

• There are four Principles of Effective Intervention (PEI)
  • Risk Principle – tells us **WHO** to target
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  • Fidelity Principle - tells us how to do this work **RIGHT**

• Even the most evidence-based program or practice must adhere to these principles to be effective
Questions?

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Disclaimer

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