

The use of risk assessment in MultifunC for treatment planning and for placement decisions in general in Norway

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Traditional in Norway

- Have had so-called "general institutions", that means that we have placed youth with different problems and needs in the same institutions
- Children with behavior problems, subtanse abuse problems and other needs have been placed together in the same institutions.

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Institutional or residential situation in Norway today

- Divided all institutions to be specialized for different target groups: High risk criminal juveniles, low risk criminal juveniles, substance abusers, and «other». This is seen as «harm reduction» through less negative peer influence by separating the groups
- Established a National team to assess all youth with serious conduct problems before placement. Risk assessment with YLS/CMI by psychologists.
- New risk assessment at discharge from institutions, makes an «outcome» measure for all youth.

Conclusions from research

- You should not mix high and low risk offenders in the same treatment program because this is a risk for low risk youth (deviant training)
- High risk youth have many risk factors while low risk youth have less risk factors. You may increase risk factors for low risk youth.
- Treatment should target change of the risk factors that maintain the negative behaviour.
- This means that, regardless wether treatment it is performed within institutions or outside, the treatment should focus on the individual youth, the family, the peers, the school and leasure time.

Major Risk Factors

	S	The "Big Four" Risk Factors	History of antisocial behaviour
	actor		Antisocial personality pattern
	lisk F		Antisocial cognition
	The "Central Eight" Risk Factors		Antisocial associates
	al Eig		Family and/or marital
	Centra		School and/or work
	he "C		Leisure and/or recreation
	F		Substance abuse

Risk assessment tools

Youth Level of Service / Case Management Inventory (YLS/CMI):

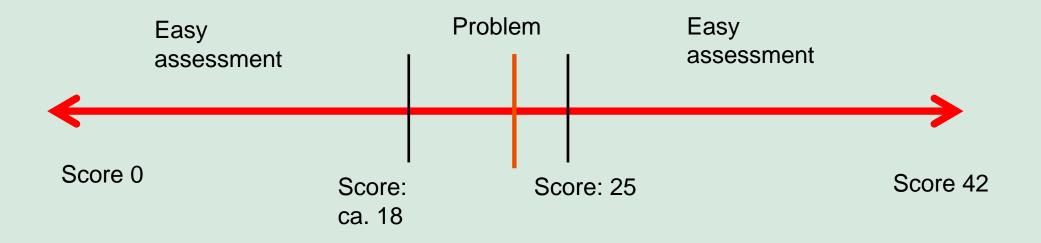
- 42-item instrument designed to measure risk, need, and responsivity factors in adolescents who have had contact with the justice system.
- It has been validated for use with both males and females between the ages of 12 and 17

YLS/CMI: Risk domains

- Prior and current offences/dispositions (5 items)
- Family circumstances/parenting (6 items)
- Education/Employment (7 items)
- Peer relations (4 items)
- Substance abuse (5 items)
- Leisure/recreation (3 items)
- Personality/behaviour (7 items)
- Attitudes/orientation (5 items)

Possibly total score is 42 items. Cut-off between low and high risk is 22-23 scores

Problems with decissions about Barne-, ungdomsog familiedirektora



-Difficult to define correct target group and risk level for youth between scores 18 to 25. May have similar needs and it is difficult to decide if placement reduce or increase the risk level. Allways do a clinical total assessment about what will be the best for this single youth

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Quality assurance

- Monthly common scores of the same case
- Monthly individual scores of the same case, and then comparison and discussions
- Discussions both about the different items and decissions of target group and then placement decissions

MultifunCtional treatment in Community and Residential settings (MultifunC)

• A residential treatment model devolped in Norway and Sweden based on a comprehensive review of the research

Target high risk juveniels with conduct problems and criminal behaviour

Combines residential treatment and aftercare in community settings

Treatment process

	R	esidential / institutio	Community		
Inntake		Treatment	Transition	Reintegration / aftercare	
	Motivation	Motivation	Prepare	Family	
	Assesment	Focused Treatment	re-entry	support	
	Structure	Treatment climate			
	Duration o	f residential stay:		Duration of aftercare:	
	about 6 m	onths (not fixed)		about 4-5 months (not fixed)	
ر —— <mark>ار</mark>			ile		
Focus of treatment		<mark>Schoo</mark>	<mark>)</mark>		
		Peers	<u> </u>		
	l	<mark>Family</mark>	/		

Case Planning Overview

Case plan and interventions should be linked to assessment

• Areas where a problem is identified should be addressed with some intervention activities

• If there is no problem no action is required

Treatment planning based on the YLS/CMI

- The MultifunC institutions target high risk youth, that means that they have many risk faktors
- The psychologists makes a new assessment based on YLS/CMI
- Based on this they develop treatment plans with goals that later on will be evalueted
- The problems assessed with YLS/CMI are made to change targets or goals for the whole treatment periode
- In addition there are weekly targets and the psychologists have to ensure that these are in accordanse with the long term aims.

Need Principle

Major Risk and Need Factors and Promising Intermediate Targets for Reduced Recidivism

Factor	Risk	Dynamic Need
History of Antisocial behaviour	Early & continued involvement in a number antisocial acts	Build noncriminal alternative behaviours in risky situations
Antisocial personality	Adventurous, pleasure seeking, weak self control, restlessly aggressive	Build problem-solving, self- management, anger mgt & coping skills
Antisocial cognition	Attitudes, values, beliefs & rationalizations supportive of crime, cognitive emotional states of anger, resentment, & defiance	Reduce antisocial cognition, recognize risky thinking & feelings, build up alternative less risky thinking & feelings Adopt a reform and/or anticriminal identity
Antisocial associates	Close association with criminals & relative isolation from prosocial people	Reduce association w/ criminals, enhance association w/ prosocial people

Major Risk and Need Factors and Promising Intermediate Targets for Reduced Recidivism

Factor	Risk	Dynamic Need		
Family	Key elements are caring, better monitoring and/or supervision	Reduce conflict, build positive relationships, communication, enhance monitoring & supervision		
School and/or work	Low levels of performance & satisfaction	Enhance performance, rewards, & satisfaction		
Leisure and/or recreation	Low levels of involvement & satisfaction in anti- criminal leisure activities	Enhance involvement & satisfaction in prosocial activities		
Substance Abuse	Abuse of alcohol and/or drugs	Reduce SA, reduce the personal & interpersonal supports for SA behaviour, enhance alternatives to SA		

Summary of risk and needs based on YLS/CMI - profile

Score	Criminal behaviour	Family	School	Peers	Substance abuse	Leisure time	Personality/ behaviour	Attitudes
Low								
Moder ate		Х	х			X	Х	
High	X			X	X			Х
Strengt h								

Goal: Define the most important risk topics.

Case Plan Development

- NEEDS/PROBLEMS should be based on assessment
- GOALS longer term outcomes where offender should be after your interventions
- OBJECTIVES offender's short-term measurable and verifiable steps to reach goal

Exsamples on main goal with treatment

The youth uses drugs, criminal actions and uses violence to obtain what he/she wants. (This is the reason for placement).

➤Goal with the treatment:

Good function in society without drugs or violence and without criminal behaviour.

Family circulmsstances and parentingproblems assessed with YLS/CMI

Inadequate supervision

 The parents have difficulties in monitoring the youth, are not aware of his/hers activities.

Difficulties in controlling behaviour

• The parents have problems in exercising control over the youths behaviour, and the youth disobeys instructions and is out of control.

Poor relations: father-youth:

• There is a particulary poor relationship between the father and the youth (hostile or uncaring) or there are significant conflicts.

Family circulmsstances and parenting- Goals

Goals:

- The parents have adequate supervision (knows where and with whom the youth are and they are aware of his/hers activities.
- The parents are able to control the youths behaviour
- There is a bether relation and communication between father and the youth.

Education/work- problems from YLS/CMI

Disruptive behaviour

 Disruptive behaviour in classroom (the youth is engaged in actiongout or other disruptive behaviour within the school building)

Low achievement

• The youth is failing a subject or there are indications on achievement problems. He or she is performing below expected level.

Truancy

• The youth is missing school days without legitimate exuses.

Education/work - goals

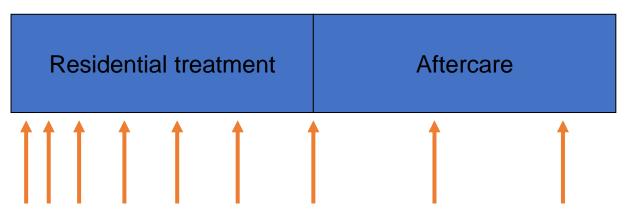
Increase presence and participation at school

• Absence og disruptive behaviour in school

• He or she is performing in acordance with expected level

Need to have long term goals, but also short term goals

Change of behaviour and function
Change of dynamic ris factors



What should be changed at each point? Short term plans and weekly evaluations.

Part VII: Evaluating of the treatment

	Low	Medium	High	Very high	Low	Medium	High	Very high
Criminality			X		X			
Family -factors			X		X			
School and work					X			
Friends/ peers				X		X		
Substance abuse				259 940	X			
Leasure time				X				
Personality And behaviour			X					
Attitudes				X	X			



ANY QUESTIONS? ③

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THANK YOU FOR YOUR ATTENTION

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