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# Criminogenics Works, if you Work it....

Criminogenic is based on reliable and predictable principles. The principles of risk, need, and responsivity is widely adopted in offender rehabilitation (Rettinger & Andrews, 2010). These principles address the issues of which offenders should receive treatment to reduce their risk of recidivism, what behavioral targets should be set, and what treatment strategies ought to be employed (Andrews, Bonta, & Hoge, 1990; Andrews, Bonta, & Wormith, 2006).

In brief, the risk principle states that offenders at high risk of reoffending will benefit most from elevated levels of treatment intensity whereas low-risk offenders should receive minimal or no intervention at all. The need principle suggests that interventions should address dynamic risk factors—or criminogenic needs—because they are aspects of a person or his or her situation, which, when changed, are associated with changes in the chance of recidivism. (Van der Knaap, 2011)

The responsivity principle states that correctional programs should be matched to an offender's personality, motivation, and ability. Strong empirical support exists for this model of risk, need, and responsivity (RNR). Offender treatments complying with the RNR principles demonstrate significantly greater effectiveness than criminal sanctions or interventions that do not comply with RNR principles (e.g., Andrews, Zinger, et al., 1990; Lowenkamp, Latessa, & Holsinger, 2006).

## Comparing Criminogenics to Preventing a Heart Attack

Risk Factors

One's age, sex, family history of heart problems, weight, the amount of exercise, blood pressure, stress, cholesterol level, and whether one smokes: can all contribute to one's risk of having a heart attack.

Static and dynamic factors

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To understand the degree of danger of having a heart attack, one would look at the totality of all of these static and dynamic factors to determine the likelihood of having a heart attack. However, to effect and lower the risk of having a heart attack, one would target the influential factors such as the health and fitness related issues, stress levels, and whether one smokes.

### **Criminogenic Risk Factors**

Criminogenics has both internal and external factors as contributors to criminal behavior and recidivism. These factors, known as risk factors, are split into two categories.

#### STATIC FACTORS

Criminal history, family criminality, age at first admission to a correctional facility, number of prior incarcerations, and the committed offense are "related to recidivism but cannot be altered through the delivery of services." (Kinard, 2014)

#### DYNAMIC FACTORS

Dynamic risk factors, on the other hand, are changeable factors that may be in flux throughout one's lifetime—such as the company he or she keeps, his or her attitudes and core values, substance use, and employment status.

Dynamic risk factors, also commonly known as criminogenic risk factors or criminogenic needs, are "directly related to crime production." (Kinard, 2014)

The term criminogenic takes into account that "offenders have many needs deserving of treatment but not all of these needs are associated with their criminal behavior" (Mcneill, 2010). Research suggests that four risk factors consistently predict criminal conduct in almost any justice-involved sample: the history of antisocial behavior, antisocial personality pattern, antisocial cognition, and antisocial associates (Andrews & Bonta, 2010).

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Criminogenic Risk factors that will be targeted to reduce criminality and recidivism:

Antisocial peers; antisocial beliefs, values, and attitudes; substance abuse, dependency, or addiction; anger or hostility; poor self-management skills; poor social skills; poor attitude toward work or school; and low-income family dynamics.

The most closely related to recidivism is an antisocial personality pattern (marked by impulsiveness, aggression, stimulation seeking). Pro-Criminal attitudes/antisocial cognition (such as negative attitudes towards the law, values, thinking styles, general attitudes supportive of crime) and social supports for crime (criminal friends, isolation from prosocial others) also affect recidivism.

Other criminogenic risk factors also related to recidivism include substance abuse, employment instability and dissatisfaction, family problems, and a lack of involvement in prosocial leisure activities. Criminogenic treatment primarily focuses on the dynamic risk factors rather than the static factors. Most substance abuse treatments concentrate on static factors and may touch on the dynamic factors if time allows.

# The Risk-Needs-Responsivity (RNR) model

The risk principle maintains that "supervision and treatment levels should match the offender's level of risk," meaning that "low-risk offenders should receive less supervision and services, and higher-risk offenders should receive more intensive supervision and services." (James, 2015) Although this may seem logical, often the tendency is to do the opposite—those involved in sentencing tend to require low-risk offenders to submit to an array of intervention services in an attempt to prevent further involvement with the system. However, some studies show that focusing excessive resources on low-risk offenders can lead to higher recidivism rates.

The needs principle contends that the effective use of intervention services centers on targeting an offender's criminogenic needs. This principle acknowledges that although some static risk factors, such as criminal history, play a role in the likelihood of recidivism they cannot be altered. Therefore,

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those involved in sentencing decisions should target an offender's criminogenic needs because they can potentially be altered through the delivery of services.

The responsivity principle holds the key to reducing recidivism, and it is "targeting the offender's criminogenic needs . . . with the social learning and cognitive-behavioral programs most likely to effect change in the offender's behavior given specific offender characteristics." (Kinard, 2014) In other words, offenders must receive services that target their criminogenic needs using strategies that have not only been shown to be the most effective regardless of the type of offender. Such as prosocial modeling (learning by example), it also takes into account the "strengths, learning style, personality, motivation, and bio-social (e.g., gender, race) characteristics of the individual." (Bonta, 2007)

# Criminogenic Needs Assessments

For offender rehabilitation to be consistent with the RNR model, knowledge of an offender's risk level and criminogenic needs is essential because the risk assessment will guide the assignment of criminals to different levels of treatment intensity. Also assessing needs will inform what criminogenic factors need to be targeted by offering relevant behavioral interventions (Hollin, 2002). The assessment of criminogenic risks occurs via the use of risk and needs assessment (RNA) instruments. An RNA instrument "is essentially a uniform report card that measures offenders' criminal risk factors and specific needs that, if addressed, will reduce the likelihood of future criminal activity." (James, 2015)

RNA instruments calculate "an overall score that classifies an individual's risk of reoffending [and subsequently] inform decisions about the best course of action." (James, 2015) Risk assessment provides a measure of the risk principle, which states that higher risk offenders will likely offend if not treated and that low-risk offenders are not likely to offend even without treatment.

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Treatment (especially intensive) should be reserved for higher-risk offenders – treatment can make a difference for them. Lower risk offenders should receive minimal, if any, intervention – treatment may be wasted on them. The risk principle is extremely well supported.

Brooks Behavioral Health Services will use all of the above principles to assess and treat each offender. The evidence provided by numerous studies and research will be utilized to create a sound therapy model for individual suffering from criminal behaviors and thoughts.

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