Community Restorative Centre Supplementary Briefing Paper for Special Commission into Ice Inquiry

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Beyond the Risk Paradigm: Why we need to look outside of RNR models when designing programs for people with problematic drug use and criminal justice system involvement

The Risk Needs Responsivity (RNR) model developed in 1990 by Canadian researchers[1] and based primarily on large-scale retrospective meta-analyses of North American 'what works' literature, has driven the development of a particular approach to therapeutic correctional programs across most Australian jurisdictions, including NSW, for over a decade. This model for understanding 'what works' to reduce reoffending, or what works to change 'offender' behaviour has also dominated correctional programming in the US and Canada, and is considered in many correctional jurisdictions to constitute the central evidence base on which all programs intended to address offending should be designed.[2] To this end, thousands of studies based on the RNR framework, into the key features of effective correctional programming have been conducted since the early nineties. This vast body of evidence is regularly cited to justify the prioritisation, implementation and resourcing of RNR aligned cognitive behavioural interventions (such as EQUIPS in the NSW context). It should however be noted very clearly from the outset of any discussion into 'what works' that the fact that an enormous body of RNR research exists is not itself evidence that RNR is an effective approach to the reduction of re-offending. Although RNR models are frequently presented by Australian Corrections leaders as the only effective or 'scientific' approach to the project of rehabilitation in prisons, there have been substantial and detailed critiques of this approach both in Australia and internationally.[3] [4] [5] [6] [7] [8] [9] [10]

Over the last few years, internationally, there has been growing recognition, even amongst staunch proponents of RNR that only adhering to this model (and ignoring other evidence based approaches which look unapologetically at the key structural, social and health drivers of imprisonment) represents a monumental failure of the correctional imagination. [11] [12]

The five key critiques of this approach overviewed in this briefing paper include:

1. **The validity of both the methodologies and findings of the 'evidence base.'**
2. **The applicability of the findings of the research to populations outside of North American young men**
3. **The ideological underpinnings of the model**
4. **The conflation of risk and need in the RNR framework.**
5. **The reliance on a deficits approach to reduce reoffending**

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Risk Needs Responsivity Principles

RNR frameworks posit that programs intended to reduce offending are most effective when:

1. The intensity of the program matches the level of risk of the participant,
2. The program targets the criminogenic needs of the participant
3. The program is delivered in a manner which suits the learning style and personal characteristics of the participant[13]

Alongside the principles of risk needs and responsivity are two additional 'good practice' principles.

4. Professional Over-ride. This principle notes that clinicians may need to also consider circumstances outside of the three RNR principle in order to tailor effective interventions.[14]
5. Program Integrity. This principle notes the importance of programs being delivered as they were intended.[15]

Criminogenic Needs

Within the RNR literature, the need principle refers to the importance of programs addressing those factors that are directly connected to offending, and those factors that are amenable to change. To this end, proponents of RNR models argue that offender programs should target dynamic criminogenic risk factors.

There are eight criminogenic needs within the RNR framework that are noted as being the most significant in terms of predicting offending. These are often described as 'The Central Eight'. The first four of these are often called 'The Big Four' with regard to their centrality in behavioural change programs.

These include:
1.History of Antisocial Behaviour
2.Antisocial Associates
3.Antisocial Attitudes and Cognitions
4.Antisocial Personality
5.Education/Employment
6.Family/Marital
7.Substance Abuse
8.Leisure/Recreation[16]

The CRC Client Experience

This briefing paper seeks to highlight the shortfalls of the RNR approach in the context of NSW corrections, specifically in the context of treatment and support to address problematic drug use. While this paper is primarily focused on the research literature, the starting point for our critique of the existing situation (as is the case with all of our advocacy work) originates with the reflections and experiences of people who have themselves experienced imprisonment.

The men and women we work with at CRC, alongside our staff, many of whom also have lived experience of incarceration, have for many years re-iterated some of the key academic critiques of the application of the RNR model in terms of their experience of its content, application and

accessibility. The theoretical critique of RNR in this paper is intended to be framed in terms of the following issues raised by people with lived experience:

- CRC clients and case-work staff report that intervention in the form of individualised, meaningful, and useful drug and alcohol support and counselling **does not exist** in NSW for the majority of people in prison who require it. The majority of people CRC works with have received no assistance (in any form) for their drug and alcohol issues during their time in custody. For many of our clients that participate on our AOD program, the first time anyone sits down and discusses their support and/or treatment needs is with their CRC AOD transition worker. This typically occurs near the end of someone's prison sentence.

- Many clients report wanting to participate in 'something' but are regularly precluded from EQUIPS programs for the following reasons; they do not meet the risk threshold; their sentence length is too short; their offence type prohibits access; regular movement from prison to prison interrupts participation; they do not have contact with anyone working in the prison who could facilitate access (no contact with case-managers, SAPO's, or psychologists); and blue request forms for help regularly not acted upon.

- Many clients who have participated in EQUIPS programs have described the program and their participation as 'tick a box' and perfunctory. Some express frustration at having to repeat the same program over and over again. Participation is viewed as necessary in order to achieve reductions in classification and to achieve parole, but many clients of CRC with complex support needs report feeling like their specific individual needs are not addressed by participation in this program.

Key Critiques of RNR and Criminogenic Models in the Context of NSW Corrections

The validity of both the methodologies and findings of the 'evidence base.'

There has been in the research literature, a systematic un-packing of the RNR evidence base, with multiple researchers noting that the claims of 'effective treatment' are not nearly as robust as what proponents of the RNR literature suggest.[17] [18] [19] [20] The "evidence base" underpinning the RNR framework preferences quantitative meta-analyses; the statistical analysis of a large collection of results from individual studies for the purpose of integrating the findings. The literature is largely dismissive of qualitative and phenomenological studies, regardless of the rigour with which such studies might be conducted. If for instance, *a large scale qualitative* research *project was* undertaken *interviewing* every individual in a NSW prison about what they experienced as effective treatment or programming, the findings from this research would not be incorporated into any RNR or criminogenic meta-analysis, and in fact would not be considered within this framework, as 'evidence' of anything.

A number of criminological researchers[21] [22] have *pointed out:*

- The results of meta-analyses have been inconsistent and in many cases contradictory.
- There is a great deal of inconsistency in terms of the variables that the primary studies are seeking to evaluate
- Crude categories are used to classify often very dissimilar primary studies, and as a consequence distortions are introduced.
- The same primary research studies are incorporated into multiple meta-analyses forming the impression of a larger evidence base than what actually exists

The prioritising of particular kinds of studies (including a favouring of randomised control trials) has also been critiqued.[23] Although there is no doubt that there is enormous value in quantitative methodologies, research that relies entirely on these methods (including RCT's) is unable to explore critical research questions about context, social demography, or participant experience. Such studies make it almost impossible to comprehend why or how interventions are successful or otherwise[24], and certainly tend not to allow for the voices of people imprisoned themselves – or the subjects of the programming to contribute their expertise to the existing body of knowledge.

The applicability of the findings of the research to populations outside of incarcerated North American young men

There is strong evidence to suggest that RNR and criminogenic frameworks are not meaningful in Indigenous populations,[25] [26] [27] are of limited use for women,[28] [29] [30] [31] and do not have applicability for people with cognitive impairment and mental illness.[32] The vast majority of studies that have contributed to the body of meta-analyses research, have focused on populations of young, white men, imprisoned in North American correctional facilities.[33] Researchers have noted that the context in which people are imprisoned alongside the demographics of these populations has a remarkable impact on the capacity of programs to be meaningful.[34] [35] Even within the RNR framework, there is recognition that the social characteristics of populations in prison impact the extent to which someone is able to be receptive or responsive to correctional programming.[36] Given the NSW context, where Indigenous populations and people with multiple and complex support needs including mental illness, cognitive impairment and homelessness are overwhelmingly over-represented, the extent to which programming based on RNR models actually has a meaningful evidence base (particularly with regard to responsivity) is questionable.

The ideological underpinnings of the model

The ideological underpinnings of the RNR model seek to understand and address offending behaviour by focusing on individual psychology to the exclusion of other social, cultural or systemic drivers of crime and incarceration. Within the RNR model, crime tends to be framed – and offending behaviour addressed – as a product of anti-social thinking and impulsive behaviour, rather than being reflective of a complex array of interconnected social and structural drivers, most of which are also defined by acute disadvantage. The RNR approach ignores all structural predictors of imprisonment in favour of an entirely individualised understanding of why people offend, and ignores entirely why certain populations are imprisoned.[37] Inherent in this ideology are assumptions that people who commit crime or are incarcerated for committing crime are fundamentally or intrinsically different to those who do not. RNR models focus on a handful of dynamic criminogenic factors[38] and use a psychometric model that downplays the relevance of contextual, social and historical factors.[39]

The conflation of risk and need in the RNR framework

Within this ideological approach, there is a conflation in the RNR model of the concept of 'risk' and the concept of 'need'.[40] The needs addressed within the model are based on identification of risk, not on the needs identified by individuals themselves. Many researchers have argued that insufficient attention is paid to the impact of non-criminogenic needs.[41] There are of course multiple factors that impact on risk of re-offending and re-incarceration outside of the central eight needs identified in the criminogenic literature. Critics of this model have noted that factors such as poverty, homelessness, poor education, poor functional literacy, systemic racism and structural barriers to support in the community (all widely recognised in literature outside of the RNR research, as structural predictors of crime and imprisonment) are not recognised at all within the central eight.[42] For instance, every client CRC works with identifies homelessness as the need they would

like reintegration support with. All homeless clients of CRC identify lack of housing as making it incredibly hard to stay out of prison. However, homelessness is not considered a 'need' in the criminogenic framework.

Some have argued though, that even within the RNR framework, those factors that are generally considered 'non-criminogenic' have a significant impact on the principle of responsivity.[43] That is, difficulty reading, or being stressed about not having a place to live, is likely to impact on responsivity to a correctional program. So too, is ongoing problematic drug and alcohol addiction. Although substance abuse is recognised as a criminogenic need, it is not prioritised as being as significant as 'the big four' all of which focus on anti-social behaviour and thinking.

The reliance on a deficits approach to reduce re-offending

Alongside criticism of the conflation between need and risk, the RNR model, has also been criticised for being almost entirely deficits based.[44] [45] Criminogenic needs relate to issues that are problems and require 'fixing'. There is a substantial body of research that notes that this deficits approach is counter-productive when trying to assist people to make changes in their lives – or at the very least, not enough, for desistance from offending to be achieved. Good Lives models note the importance of strengths based approaches, and argue that it is critical to increase people's strengths and abilities in order to support people to move away from offending. [46] Similarly, desistance frameworks note the importance of the development of an identity outside of the justice system, and emphasise the value of programs that seek to support people to build an identity narrative that exists outside of that as an 'offender.'[47] That is; it is not enough for programs to simply focus on risk of re-offending, or criminogenic needs. Programs that are successful do not just seek to 'fix' a person's deficits, they work to support someone holistically to make changes in their lives, to find who they are outside of the justice system, and build alternative ways of living, connecting and being in the world.[48]

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