Absent Crime:
Risk-Need-Responsivity (RNR) as a Tenable Meta-Model for Non-Justice-Related Behavioral Health Service Delivery
The Majority Slice of the Pie . . .

- Misc. public behavioral health (BH) samples—justice-involvement rates:
  - Low = 5.4% (past-year arrests)
  - Study with most encompassing metrics = 27.5% (two years)
  - High = 32.8% (9.5-year arrests)

Thus, approximately two-thirds of public BH consumers can be expected to have no justice-involvement, at least recently.
BH Service Delivery

- Case management
- Assertive community treatment
- Psychosocial rehabilitation services
- Inpatient hospitalization and community alternatives for crisis care
- Services for substance abuse and severe mental illness
- Auxiliary services:
  - Consumer self-help
  - Consumer-operated programs
  - Consumer advocacy
  - Family self-help
  - Family advocacy
  - Human services
  - Integrating service system

How can all of these approaches be aligned?
Taking a Cue from Offender Rehab.

Correctional human service delivery models

- Joel
- Fred, David, & Haley
- Patty
- Also: Fred, Jennifer Skeem

- As you all heard, we have an effective RNR model
  - Widely adopted for its clarity/rationality, practicality/utility, large evidence base, and cost-effectiveness
  - A general rehabilitation theory
    - Integrative ethical, theoretical, scientific, and applied framework, consisting of (1) guiding aims, values, and principles; (2) etiological assumptions to focus treatment providers; and (3) practice implications

Could it work for the non-justice involved folks?
Rational Empiricism/Scientific Method:

- Focus on inter- and intra-individual variation in criterion(dependent variable

1. Theoretical understanding (explanatory)
   - General
   - Rationale
   - Simple
   - Accurate predictions

2. Empirical understanding (research-based; covariates)
   - Correlates
   - Static/dynamic predictors
   - Causal/functional variables
   - Moderators
      (generalizability)

3. Practical understanding (applied; influence): flows from 1 and 2
Translatability of RNR Principles

• Overarching Principles, Key Delivery Principles, Provider Practice Principles, and Organizational Principles . . .
  • (~18 in total) either already consistent with contemporary BH values and evidence-based approaches or readily adaptable
  • Some highlights:
    1. Respect for the person and the normative context
    8 – Structured assessment
    9 – Breadth/multimodal
    10 – Strengths
    15 – Community-based
    16 – Continuity of services
    18 – Community linkages

But I want to focus on the 3 core RNR principles . . .
Translatability of RNR Principles

5. Risk—Prediction (see next) and Matching
   • Consistent with triage approaches
   • Joel’s (pers. comm.) 10 critical outcome metrics:
     1. CJ utilization: arrests, jail/prison days
     2. BH utilization: involuntary hospitalization, ER, psychiatric ER
     3. Sheltered/engaged/connected: days worked/in school, stable housing days, self-reported # friends
     4. Fear: level of terror/afraid
     5. Life: death

6. Needs
   • Psychiatric readmissions currently have outcome literature suitable for meta-analysis

7. Responsivity—General and Specific
   • E.g., meta-analyses on case management/assertive community treatment, housing supports, psychopharmacological treatments
Conclusion

1. Majority of people with BH problems *not* involved in crime

2. Science underlying RNR has universal applicability
   - Translatable to utilizers/sectors of BH who/that do not intersect with CJ

3. Recalibrated RNR consistent with normative values and potentially offers clarity, unification, cost-effectiveness, and research agenda:
   A. Potential to do for effectiveness in living what clinical interventions do for symptoms reduction
   B. Broadens scope from service systems to psychosocial environment and effectiveness of *principles*
   C. **Next steps**: Validate risk principle, identify dynamic risk factors, and examine responsivity factors using meta-analytic techniques (might require use of multiple singular/index outcomes and models)
BH and Crime Stats:


BH Service Models:
References

RNR:

References

Responsivity:


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