Developing a Behavioral Response Plan:

Beyond Incentives and Sanctions Christine Raffaele, Esq., C.C.M.



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Learning Objectives

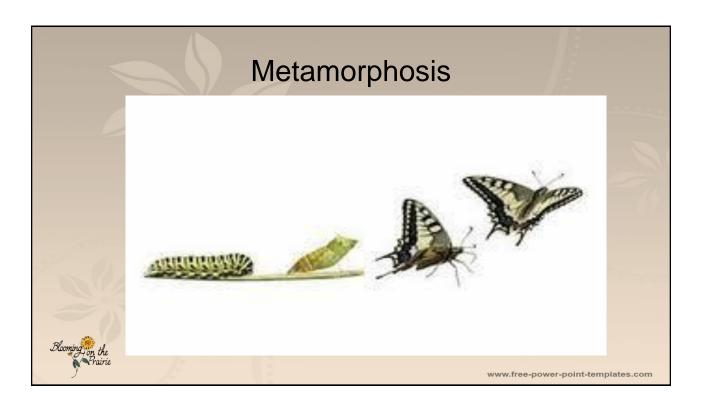
- To explain Risk Needs Responsivity and why it is important to understand when working with specialized docket participants to change behavior.
 - Comprehend the nature and extent of criminogenic needs and prognostic risks.
 - To identify why drug courts utilize a behavioral response plan.
- To illustrate specialized docket expectations for the high risk high need population in defining both proximal and distal goals.
 - · Define and identify proximal goals.
 - · Define and identify distal goals.
 - Define and identify the best responses to change behaviors so specialized dockets participants can reach both types of goals.



Learning Objectives

- To identify key components of a successful specialized docket behavioral responses.
 - To develop a plan that includes certainty, immediacy, and specificity.
 - To develop a plan with high, low, and moderate magnitude interventions.
 - Understand the importance of procedural fairness within their specialized docket and will be able to structure their behavioral response plan based on procedural fairness.
 - Given tools, resources, and references to develop a behavioral plan designed for the best outcomes.





RISK NEEDS RESPONSIVITY

- · Risk: likelihood of repeating criminal behaviors
- · Need: targeting what to change
- · Responsivity: dosage and environmental factors



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RISK

- · Likelihood of repetition without changing course
- · Level of difficulty in addressing issues behind behavior
- · Determines level of response



Prognostic Risk Factors

- Younger age
- Male
- · Early onset of substance use disorder
- Prior felony convictions
- · Previous unsuccessful attempt at treatment
- · Previous unsuccessful attempts at rehabilitation
- Antisocial personality disorder
- Antisocial peers and affiliations

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Need Principle

- · Identifying what is behind the behaviors
- Appropriate response to the identified issues
- Level of response



Need Principle

- Diagnosis of substance use disorder:
 - DSM V
 - Proper clinical diagnosis with a proper evidence based scientifically validate tool by someone with the required credentials for the tool.
 - Includes treatment plan



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RESPONSIVITY NEEDS

- Dosage how much of which intervention for both risk and needs.
- What other environmental factors need addressed:
 - Lack of safe housing
 - Functionally not literate
 - Lack of daily living skills
 - Lack of job skills
 - Co-occurring disorders



Determining Risk and Needs

- Objective
- · Validated scientific evidence-based tools
- Individuation based on RNR
- Menu of appropriate responses available for different levels



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Proximal and Distal Goals



Proximal and Distal Goals

Proximal Goals

RIGHT NOW

Distal Goals

LATER



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Proximal and Distal Goals

- Case plan based on RNR
- Proximal and Distal goals included in the case and treatment plans
- · Proximal set early on
- Determines magnitude of response for both incentives and sanctions.



Why have incentives and sanctions?

- Opportunity for success
- Increases treatment engagement and treatment completion
- More likely to successfully move through the stages of treatment with incentives and sanctions than not.



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Most Effective Responses

- Certainty
- Immediacy
- Specificity



Certainty

- Trust but verify
- Reliable detection
- Valid information



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Certainty

- Monitoring systems
- Drug Testing:
 - Frequency of testing minimum of 2x a week
 - Observation of testing protocol for observation
 - Scientifically valid testing process (chain of custody, testing protocols, etc)
- Off hour home checks evenings and weekends.
- Participants know up front the possible incentives and sanctions.

Immediacy

- · The earlier the better
- Frequency of court hearings
- Supervision



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Severity

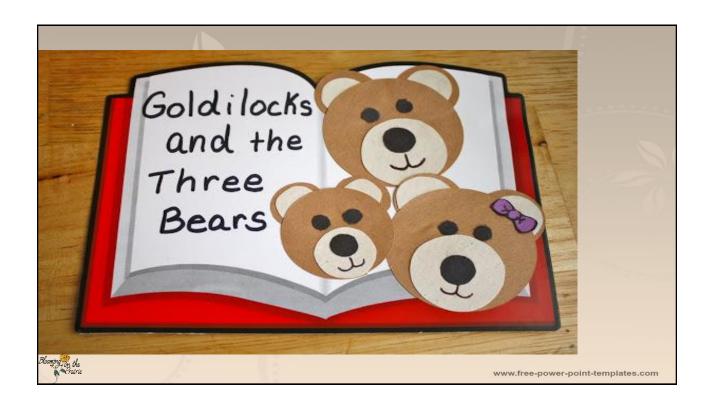
- · Least affective and the highest and lowest magnitude
- · Most effective in the intermediate range
- Too weak habituation
- Too harsh –ceiling effects
- Intensity increases with the number and seriousness



Magnitude

- · Who are they? RNR
- · Where are they in the program?
- · Which behavior responding to?
- What is the response magnitude?
- How to deliver the response?







Proximal and Distal Goals

Proximal Goals

 RIGHT NOW **EXAMPLES**

Distal Goals

• LATER **EXAMPLES** LOWER MAGNITUDE HIGHER MAGINTUDE



Magnitude and Language

Definitions:

- · Sanction:
 - Punishment
 - Response cost
- · Incentive:
 - Positive reinforcement
 - Negative reinforcement



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Pitfalls of Incentives and Sanctions

Incentives:

- Complacency
- Entitlement
- Reduces Intrinsic Motivation

Sanctions

- Avoidance
- Not behavior change
- Risk of perceived unfairness
- Learned helplessness



What does magnitude look like?

- Incentives:
- · Low: Verbal praise, applause
- Moderate Incentive: Fishbowl (saves resources but effective)
- High: Travel privileges out of county, outings (movies, sports, etc)
- · Sanctions:
- Low: verbal admonishment, apology letter (or recording)
- Moderate: useful community service (clean police cars)
- High: flash jail, home detention (24 hour curfew)



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Procedural Fairness

- · The messenger
- Notice
- Opportunity to be heard especially when jail as a sanction.
- Perceived unfairness
- · Transparent Reasoning
 - Matching
 - Stages of change
 - · Power of authentic praise



Prepared for Differences

- The same incentive or sanction may have a different affect.
- · Know your community and it's values.
- Know what will work with your participants.
 (ASK)



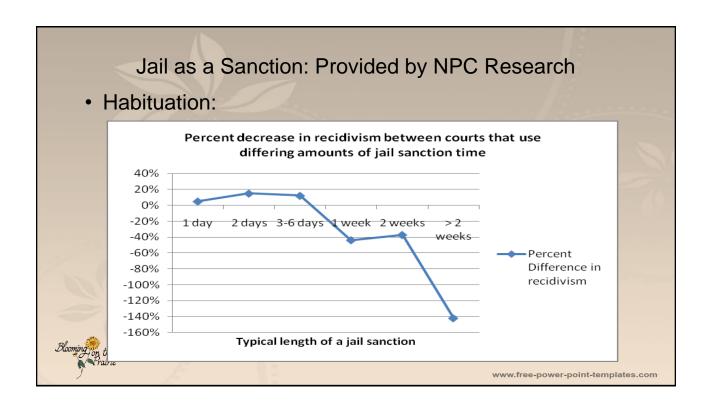
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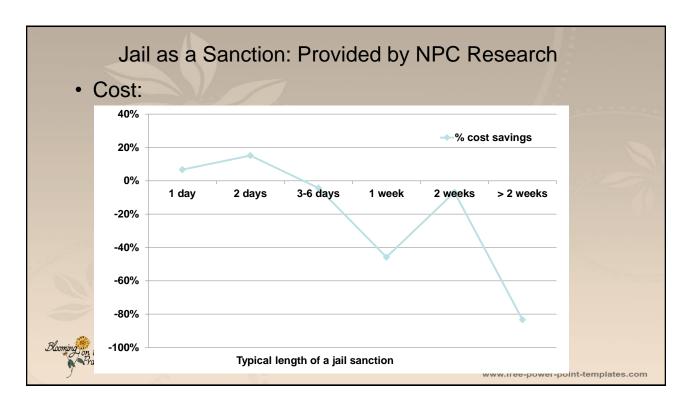
Therapeutic Response

Behavior to be targeted or non-responsiveness to treatment:

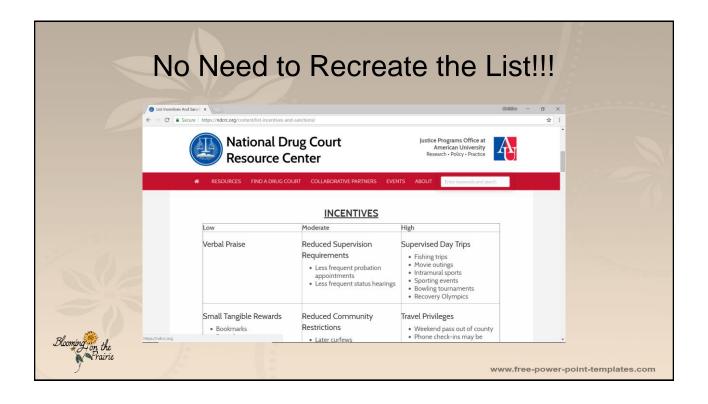
- Ask the treatment professional
- Adjustment in treatment not a sanction
- Treatment based activities not a sanction







• Tool provided • Do your homework • How to use the tool







Do your work first

Reminder: even though there is a list –do your work first...

Generic list

What works in your community

What resources do you have

How creative can you be

Ask your participants



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Questions

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