

# HOW ACCURATELY DO OFFENDERS PERCEIVE RISK FACTORS?

Self-reported and LS/CMI-measured concordance

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Note: This is an extended version of the slides, designed to provide additional detail that could not be presented at the conference due to time constraints.

# Background

- As clinicians and researchers, our understanding of risk factors for offending behavior has been shaped by a great deal of empirical research (which remains ongoing)
- However, how well do offenders – the clientele we are attempting to serve through focused assessment and treatment program – understand risk factors for future offending?
  - ▣ General risk factors?
  - ▣ Personal risk factors?

# Rationale

- In therapy, there is an empirically supported role for sharing assessment/conceptualization results with clients and obtaining their “buy-in”<sup>1</sup>
  - ▣ Results in more favorable therapy outcomes
- In addition, providing assessment feedback has been recommended as part of an RNR-based assessment and case management procedure<sup>2</sup>

# Rationale

- Potential benefits of sharing assessment results and helping offenders in treatment understand the rationale behind their programming:
  - ▣ Motivation and treatment engagement are related to treatment completion<sup>3</sup>
  - ▣ Treatment completion/adherence have better outcomes than non-completers<sup>4, 5</sup>
  - ▣ Attrition from treatment has been associated with recidivism<sup>3</sup>
    - Moreover, higher risk individuals are more likely to drop out of treatment and have lower motivation
  - ▣ Others have recommended the importance of motivation and treatment engagement in reducing risk of recidivism<sup>6</sup>

# Rationale

- We believe that helping offenders to understand their own personal risk factors would increase treatment engagement/motivation
  - ▣ Feel more invested in treatment
  - ▣ Feel as if there is a rationale behind treatment
  - ▣ Allow a chance to provide feedback regarding assessment results/provide additional information useful to the conceptualization and risk estimate

# Method

- Recruited  $N = 94$  male participants from an assessment and treatment reentry program
- At beginning of stay at the facility, administered a set of assessments and questionnaires, including the LS/CMI<sup>7</sup> and the Risk Need Perception Survey
  - ▣ Total of  $N = 88$  completed the Risk Need Perception Survey

# Risk Need Perception Survey

- Two, 30-item questionnaires
- Developed by the authors to gauge understanding of risk and need factors
- First questionnaire taps general understanding
  - “Which of these factors do you think may increase the chance that a person will commit a crime in the future?”
  - List of factors
    - Known predictors of offending behavior (e.g., Criminal history)
    - Items that may be considered responsivity factors (e.g., Mental illness)
    - Some with no known relationship to offending (e.g., Athleticism)
  - Three response options
    - 1 = Not Important, 2 = Possibly Important, 3 = Definitely Important

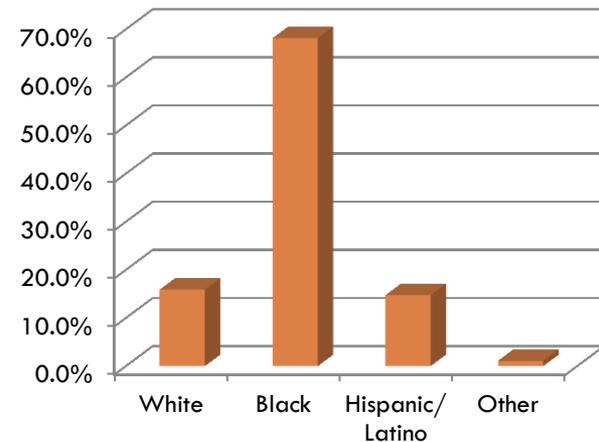
# Risk Need Perception Survey

- Second questionnaire taps understanding of **one's own** risk and need factors
  - ▣ “Which of these factors do you think are present for **you** that may increase your risk of committing a crime again in the future?”
  - ▣ Same factors, reworded to reflect personal nature of survey
    - Most remained very similar (e.g., “Education level” vs. “**Your** education level” [emphasis added])
    - Some changed slightly (e.g., “Being outgoing” vs. “Your comfort in large groups”)
  - ▣ Three response options
    - 1 = Not Important, 2 = Possibly Important, 3 = Definitely Important

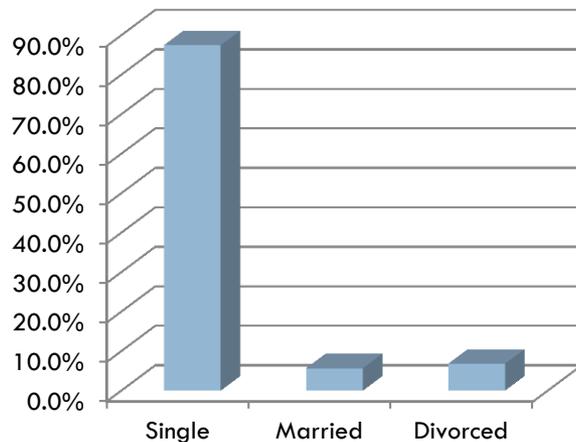
# Demographic Information

- Average Age = 34.28
  - SD = 8.53, Range 21-62
- Average Length of Stay = 71.25 days
  - SD = 20.49, Range 15-126

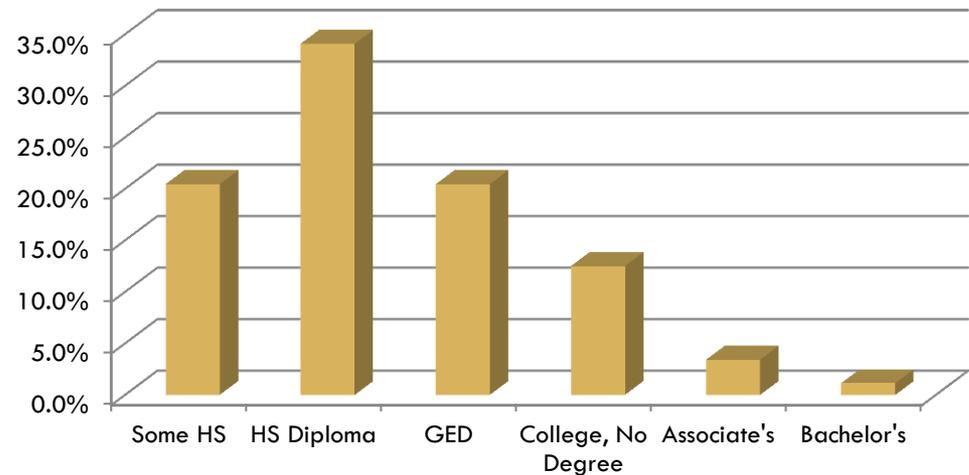
## Race/Ethnicity



## Marital Status

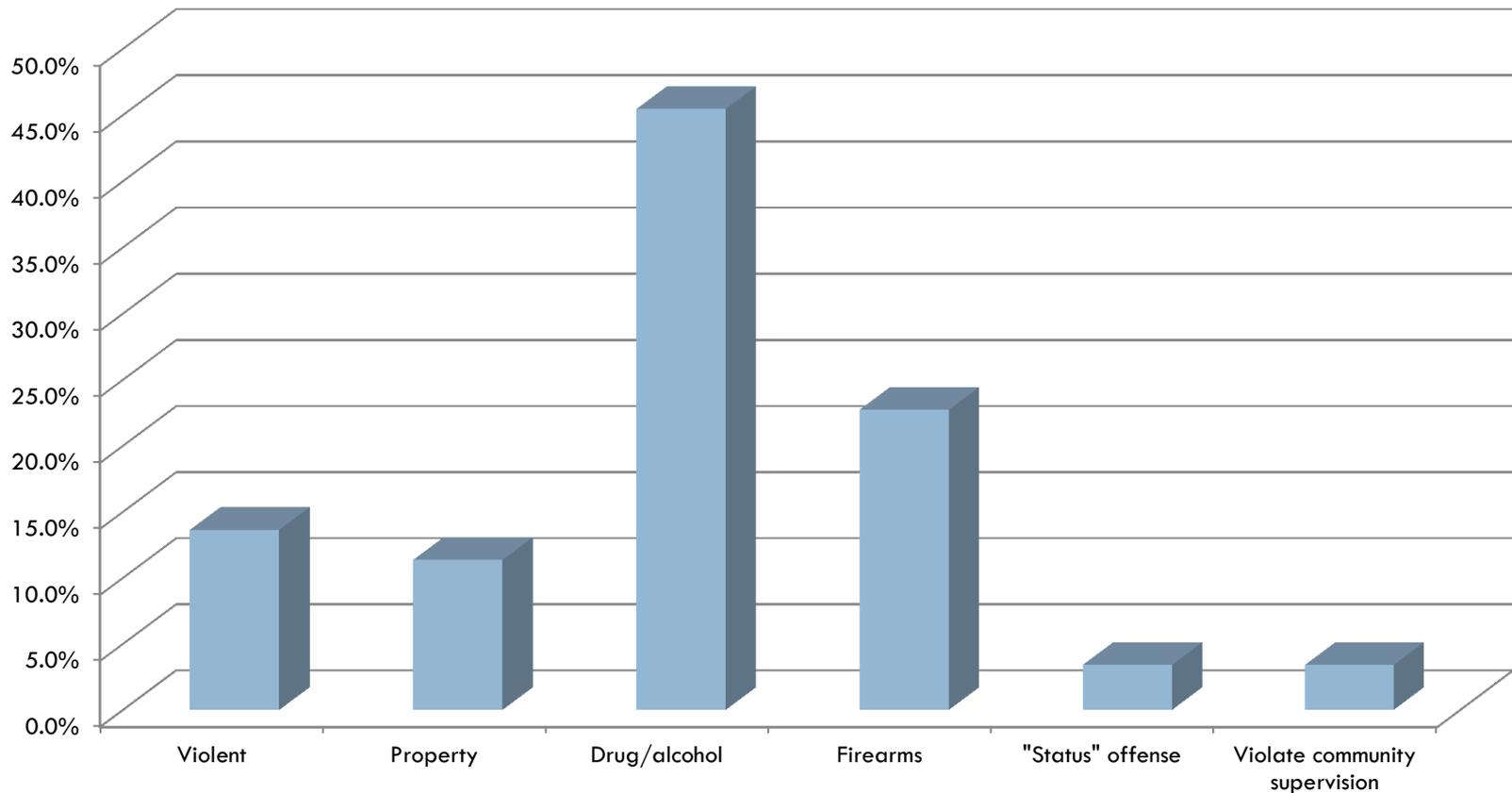


## Level of Education



# Demographic Information, cont.

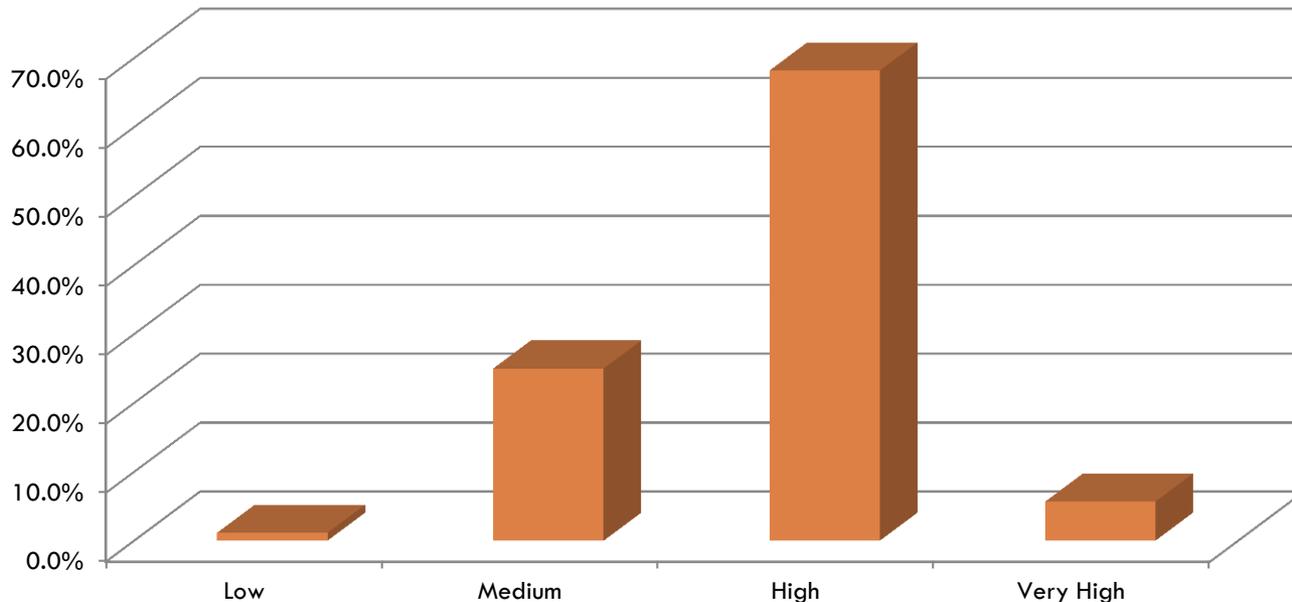
## Current Charge



# Risk Level

- Average LS/CMI Score = 22.06 (SD = 5.07)
  - ▣ Range of 9 (in the Low category) to 32 (in the Very High category)

**Categorical Risk Level**



# Initial Results, General Survey

- 16 items rated relatively more important
  - ▣ Including known risk factors
    - Criminal history, education, employment history, friends/acquaintances, family members, significant other, how free time is spent, use of drugs or alcohol, attitudes and thoughts
  - ▣ Some choices may be expected, even if not known risk factors
    - E.g., Mental illness, stress

# Initial Results, General Survey

- 14 items rated relatively less important
  - ▣ Identified some “fillers”
    - E.g., Physical attractiveness, smoking cigarettes or cigars, athleticism, sleeping habits
- Generally, it appears that the participants have an understanding of the factors that may put someone at risk for future offending

# Initial Results, Self Survey

- Only five items were rated as relatively more important
  - Friends/acquaintances
  - Patience
  - How free time is spent
  - Attitudes and thoughts
  - Financial difficulties

# Comparing the General and Self Surveys

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## General Survey

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### Top 4 Selections

1. Financial difficulties
2. Use of drugs and alcohol
3. Attitudes and thoughts
4. Friends and acquaintances

### Bottom 4 Selections

1. Smoking cigarettes/cigars
  2. Athleticism
  3. Physical attractiveness
  4. Racial/ethnic background
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## Self-Survey

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### Top 4 Selections

1. Financial difficulties
2. Attitudes and thoughts
3. Friends and acquaintances
4. How free time is spent

### Bottom 4 Selections

1. Smoking cigarettes/cigars
  2. Medical history
  3. Athleticism
  4. Physical attractiveness
-

# Comparing the General and Self Surveys

- Compared general and self responses for each item
  - ▣ For 24 of the 30 items, the general item was rated as significantly more important than the self-rating

- Exceptions:

- Being a perfectionist
- Being outgoing
- Smoking cigarettes/cigars
- Athleticism
- Religious beliefs
- How free time is spent



Rated relatively less important, generally and for self

Rated relatively more important, generally and for self

# Comparing the General and Self Surveys

- For all 30 items, the average general rating was higher than the average personal rating
  - Top 4 Discrepancies:
    - Mental illness
    - Use of drugs or alcohol
    - Self-esteem
    - Criminal history

# Concordance Between Self-Rated and LS/CMI-Identified Risk/Need Factors

- All study participants completed the LS/CMI within at the beginning of their stay at the facility
- Are self-rated and LS/CMI-identified risk and need factors significantly related?

# Method

- Determined which survey items “loaded” onto each LS/CMI-identified risk/need factor

<b>LS/CMI Category</b>	<b>Item on the Risk Need Perception Survey</b>
<b>Criminal History</b>	Criminal history
<b>Education/Employment</b>	Education history
	Employment history
<b>Family/Marital</b>	Family members
	Significant other
<b>Leisure/Recreation</b>	How free time is spent
<b>Companions</b>	Friends and acquaintances
<b>Alcohol/Drug Problem</b>	Use of drugs or alcohol

# Method

## □ Item loadings, continued

<b>LS/CMI Category</b>	<b>Item on the Risk Need Perception Survey</b>
<b>Procriminal Attitude</b>	Patience
	Attitudes and thoughts
	Religious beliefs
<b>Antisocial Pattern</b> (includes items tapping attitude, financial problems, job, education, parents, free time, and friends)	Patience
	Attitudes and thoughts
	Religious beliefs
	Financial difficulties
	Employment History
	Education level
	Family members
	How free time is spent
Friends and acquaintances	

# Method

- Summed the scores of the items that load on each category
  - ▣ For criminal history, leisure/rec, companions, alcohol/drug problem, possible range of 1 to 3
  - ▣ For education/employment & family/marital, possible range of 2 to 6
  - ▣ For procriminal attitude, possible range of 3 to 9
  - ▣ For antisocial pattern, possible range of 9 to 27
- Conducted Spearman correlations to determine whether self-rated risk/need factors were significantly related to categorical risk scores on each subscale of the LS/CMI
- Complete ratings were available for 85 participants

# Results

## □ Five non-significant relationships

<b>Risk/Need Category</b>	<b>Relationship, LS/CMI Score and Risk Need Perception Survey responses</b>
<b>Criminal History</b>	0.15
<b>Education/Employment</b>	0.11
<b>Leisure/Recreation</b>	-0.12
<b>Companions</b>	0.08
<b>Procriminal Attitude/Orientation</b>	0.02

# Results, cont.

## □ Two relationships approaching significance

Risk/Need Category	Relationship, LS/CMI Score and Risk Need Perception Survey responses
Family/Marital*	0.21
Alcohol/Drug Problem**	0.21

\* $p = 0.053$ , \*\* $p = 0.051$

## □ One significant relationship

Risk/Need Category	Relationship, LS/CMI Score and Risk Need Perception Survey responses
Antisocial Pattern**	0.35

\* $p < 0.01$

# Discussion

- Offenders may have an understanding of factors that generally place individuals at risk of future offending
- However, when asked about personal risk factors, the majority of these items were rated as relatively less important
- What accounts for this discrepancy?
  - ▣ Belief in personal ability to overcome circumstances?

# Discussion, continued

- There was only a significant (or approaching significant) relationship between self-rated and LS/CMI-identified risk factors for three categories:
  - ▣ Family/Marital
  - ▣ Alcohol/Drug Problem
  - ▣ Antisocial Pattern

# Limitations

- There was not a direct question-to-question match between the Survey and the LS/CMI
- This is a pilot version of this instrument, and participants may have misunderstood some of the questions or items
- Some participants did not complete the survey upon entry

# Future Directions

- A revised version of the instrument has been developed and piloted, and we're in the process of incorporating feedback
- Examining the impact of structured feedback sessions following administration of the LS/CMI
  - Do offenders better understand their risk factors following a feedback session?
  - Is offender buy-in greater after a structured feedback session?
- Examining the impact that a match between self-perceived and assessment-identified risk/need factors has on recidivism

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