Violence Risk Assessment and Psychological Treatment in Correctional and Forensic Settings: Advances in Research and Practice

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Advancing psychological services in contemporary public safety systems requires partnerships. All work aiming to achieve results in behavior change requires a partner, be it at the service-delivery level, providing individual or group psychotherapy, or through the production and dissemination of scientific and professional knowledge. Correctional and criminal justice psychologists collaborate and communicate with police officers, judges, court staff, juries, corrections professionals, and the public (as well as other health and mental health care professionals). This is necessary to advance the delivery and assessment of psychological services within the legal and correctional systems and achieve lasting change in individuals, groups, and systems. In this special issue of Psychological Services, we are pleased to feature eight articles that advance these goals.

The North American Correctional and Criminal Justice Psychology Conference (NACCJPC) reflects such a partnership. It is cosponsored by the Criminal Justice Section of Division 18 and the Canadian Psychological Association. The third conference was held in Ottawa, Canada in June of 2015. Our Canadian colleagues have long understood and demonstrated the benefits of providing opportunities to use practitioner-rooted empirical skills of clinical and counseling psychologists in the realm of correctional and criminal justice systems research. The NACCJPC conferences have effectively established a hospitable center of gravity where clinical and counseling psychologists can gather to share and learn about ongoing evaluations in the assessment and treatment of offenders. Division 18 is proud to be a cosponsor and grateful to actively partner in this arena of productive corrections and criminal justice research.

Building on the success of an earlier special issue of Psychological Services (February, 2013), which drew from the second NACCJPC conference, our current special issue includes three articles, based in part on presentations from the third conference that highlighted the role of assessment as a psychological service. These are the second, third, and fourth articles in this issue. The other five articles in this special issue were derived from a call for papers on foundational and innovative perspectives on organized care across a range of public safety settings. This call was made in light of the appeal for a change in national correctional priorities, aimed at reducing incarceration. This special issue emphasizes the role of psychological assessment and psychological treatment across criminal justice and correctional settings.

Desmarais, Johnson, and Singh (2016) present a comprehensive analysis of the 1970 to 2012 risk assessment for future crime and recidivism research in the United States. Excluding research on targeted predictions (e.g., violence, suicide), this analysis focuses on “general recidivism” (e.g., committing new crimes, violating probation) in applied correctional settings in the United States. The authors identify 19 different risk-assessment instruments that have been evaluated in 53 studies, representing 72 unique samples of U.S. adult offenders in correctional settings. They were not able to identify any single instrument as the “best” or “most accurate,” but their analysis highlights the value and effectiveness of such assessment instruments overall. They conclude that the predictive validity of each instrument may vary as a function of offender characteristics, settings, and specific desired recidivism goals.

Hilton, Simpson, and Ham (2016) describe the role of risk assessments for a particular purpose, informing release decisions for high-risk violent offenders previously found “not criminally responsible,” on account of a mental disorder or being unfit to stand for trial. In 1999, it was ruled in Canada that forensic review boards had to demonstrate an existing risk to support not discharging such patients or transferring them to lower security units. Research on the earlier rulings of such review boards found that the boards relied primarily on senior clinicians’ “clinical opinions” and not on empirically validated psychological test data (and there was no observed association between the two assessment methods). Hilton and colleagues’ article reveals that the further refinement of risk-assessment methods, such as the Violence Risk Appraisal Guide (VRAG) and the Historical Clinical Risk Management-20 has resulted in the far greater use of empirical psychological assessment instruments in both the evaluation process and the forensic decision-making process. They also found that there is now an association between clinical assessment and empirical psychological testing.

Churcher, Mills, and Forth (2016) present a concise review of approaches to risk assessment and the prediction of future violence and criminality, before presenting reliability, concurrent validity,
and predictive validity of a new assessment tool, the Two-Tiered Violence Risk Estimates Scale (TTV) in a long-term follow-up of violent offenders. They also compare and contrast the two-tiered violence risk estimates with scoring done with the Psychopathy Checklist Revised (PCL-R), the General Statistical Information on Recidivism, and the VRAG. This array of measures performed in an overall similar manner, with some variations, and the VRAG performed slightly better than did the other measures.

Morgan et al. (2016) evaluate the assignment of offender types to specialty courts. Building on the successes of drug courts in launching recovery for substance-dependent offenders, Morgan and colleagues examine other specialty courts, such as driving while intoxicated (DWI) courts and prison-based release/reentry courts. Such specialty courts foster greater collaboration among judges, lawyers, and community resources, with the goal of providing effective assessment and decision making that benefits the offenders and simultaneously increases public safety. The study involved 274 nonviolent offenders in one southwestern state. Age, race, ethnicity, relationship status, education, high school graduation, socioeconomic status, offense type (misdemeanor vs. felony), and attorney status (private vs. court-appointed) were examined. No systematic differences were found in terms of the type of offenders referred to specialty courts versus those retained in the regular court system. Outcomes were basically similar across the range of court systems. Although the work is preliminary, it does demonstrate that DWI and reentry specialty courts can be operated successfully and accomplish desired outcomes.

The two foundational articles that follow examine specific populations from a basic research process to yield applied results that advance knowledge and practice. In terms of inmate assessment, it is clear that the assessment of risk and potential violence are important to security issues in the management of prisons and the rehabilitation of offenders for their later return to the community. What other aspects of life history and psychological functioning are critical to assess for both management and rehabilitation needs is less clear.

DeCou, Lynch, DeHart, and Belknap (2016) examined the life history of sexual abuse, suicide attempts, and other traumatic life events of female offenders in a jail setting. The trauma history data were organized in a temporal sequence using life history calendars and three other measures of harmful life events. Previous research has shown that women in jail have higher rates of sex abuse histories and higher rates of suicide attempts compared with non-jailed community samples. The same was found for the present authors’ research sample, with some support for a sequential relationship between the two events. They recommend that women in jail be offered trauma-focused treatments and that prerelease assessment of trauma history be conducted and the results incorporated into court-ordered probation services and psychological treatment following adjudication.

Lee and Hanson (2016) examined the relationship between histories of psychiatric hospitalization via six measures of risk assessment and five measures of criminal recidivism (from specific sexual offending and overall criminal offending of any type) in a sample of 947 sexual offenders living in the community under supervision. They found that sexual offenders with a history of psychiatric hospitalization had higher risk predictions on all of the risk-assessment measures used in the study. Ten percent of the sample reoffended in terms of sex crimes, and 35% of the sample reoffended in terms of overall criminal offenses over an average follow-up of 7 years. However, they concluded that the contribution of psychiatric hospitalization to sexual reoffending was indirect because of the mutual association with criminogenic needs.

The two final innovative works in this special issue focus on the very difficult and complex topic of increasing access to psychological services in restrictive housing prison settings. This area of research along the public health and safety border is significant in that it is new—these are among the first studies examining interventions in correctional settings involving restricted housing arrangements. Overall, they examine interventions of a hard-to-treat populations in an ecologically sensitive context. These pilot studies tell cautionary tales on the possible limiting conditions of self-administered and telepsychology applications in a complicated service-delivery setting.

Folk et al. (2016) evaluate a structured in-cell psychoeducational program designed to change criminal thinking patterns for inmates in long-term restrictive prison units. This guided self-change program, “Taking a Chance on Change,” involved a total of 50 modules, completed over a period of 9 to 12 months. The program completion rate was 73%. Using a pre- and posttest design, the authors’ findings from this preliminary work are encouraging, showing reductions of both problematic behaviors and criminal thinking in the inmates who completed all modules. The findings reflected small-to-medium effect sizes. The use of a guided self-change method has great potential for use in correctional settings where space, treatment staff, and security needs present barriers to the delivery of psychological services.

Taking a slightly different tack, Batastini and Morgan (2016) explored the use of telepsychology to increase access to services for high-risk inmates in such restrictive settings. A total of 49 inmates participated in the project. The psychoeducational program, Coping Skills Group, is a general purpose program that teaches cognitive-behavioral skills to develop adaptive ways of dealing with everyday problem situations. The program involves 1-hr sessions once per week over the course of 6 weeks. The program was administered in person in two-person groups with 12 inmates, and it was administered via televideo means with 24 inmates. Thirteen inmates served as a group control. General mental health and criminal thinking was assessed before and after the intervention. No significant differences were found between the groups. This exploratory project demonstrates that it is possible to use telepsychology methods with inmates living in restricted prison settings for safety and other reasons.

Of course, what the readers of these articles will expect to find is what they have been getting consistently from our journal—clinically useful, rapidly implementable ideas for psychologists and other providers for their day-to-day work within public safety systems. With their pressing demand for the delivery of services, criminal justice settings are difficult contexts for practitioner—scientists to empirically advance our understanding of offender behavior change. Despite this fact, the scholars in this issue have been able to do just that. They are forging new paths and growing the professional knowledge base in a way that is foundational, innovative, useful, and certain to leave open the potential for the evolution of psychological services in the organized public safety settings in which they practice.
References


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