Risk-Need-Responsivity: Understanding Systemic Barriers and

Implementation within Underserved Communities



Bianca Beliard & Dr. Keller Sheppard





INTRODUCTION

- The risk-needs-responsivity (RNR) model was developed to help improve the rehabilitative capacity of the criminal justice system by facilitating individualized case planning and custodial decision-making (Andrews et al., 1990).
- A burgeoning body of high-quality interventions has illustrated that not all programs achieve reductions in juvenile recidivism or criminogenic needs associated with recidivism. For example, Lipsey et al. (2010) conducted a comprehensive examination of intervention effectiveness and found considerable variation in program effectiveness
- However, prior research has indicated that the implementation of RNR practices can encounter barriers. This may stem from the challenges in successfully identifying youth needs and responsivity factors, limited buy-in from practitioners, inconsistent implementation, and lack of adequate resources (Taxman & Smith, 2021). The current study seeks to understand barriers to needs-aligned, responsive intervention that are supported by prior research

METHODS

Procedure

This study will proceed in two stages. First, DJJ's annual Service Continuum Analyses will be assessed to identify communities with notable gaps in needsmatching and evidence-based services. The Florida Legislature, through the 2014-15 General Appropriations Act, has required DJJ to conduct this comprehensive statewide review of county-level data. A descriptive analysis of trends in service gaps identified in these reports will be produced.

Second, semi-structured interviews with key juvenile justice stakeholders will be conducted in two Florida counties with notable service gaps. Through convenience sampling, these participants will be invited to participate based on their direct involvement in the juvenile justice system and their insights into the processes and challenges associated with matching needs and the implementation of evidence-based programming. The semi-structured interviews will focus on several key areas: (1) perceptions of the needs-matching process within the juvenile justice system, (2) the availability and accessibility of evidence-based programming for youth, and (3) stakeholders' recommendations for improving the identification of needs, the matching of interventions, and the uptake of evidence-based

served sections of the state.

Participants

The stakeholders interviewed will include juvenile probation officers, representatives from community organizations, DJJ research staff, leadership, and other relevant personnel

INTERVIEW QUESTIONS

Evidence based program

Once an EBP is implemented, how do you ensure it remains culturally responsive and relevant to the specific needs of the community you serve?

o What kind of feedback mechanisms are in place to gather community input?

Service Gaps and Needs Matching

Have you noticed any mental health service gaps — areas where resources or treatments are lacking — in these communities?

o Which services have been most beneficial to youth and their families? Why?

o Are there services that have been less effective? What factors do you think contributed to this?

Barriers to Implementation

Previous literature states that many communities experience barriers for providing services to their community such as staff or patient-related barriers What systemic barriers have you encountered when trying to implement mental health or rehabilitative services in these communities?

O Could you provide an example of a situation

- o Could you provide an example of a situation where these barriers directly impacted service delivery?
- o Were you able to continue implementing the program despite these obstacles?

RESULTS

Common Barrier Themes in Leon and Broward county

LEON COUNTY IN SERVICE CONTINUUM
ANALYSIS

Transportation. • Evidence-based programs. • Daytreatment program. • Prevention programs. • Diversion programs.

BROWARD COUNTY IN SERVICE CONTINUUM ANALYSIS

Shelter and housing services for youth under and over the age of 18 with no DCF involvement, Housing options for youth with diagnosed or untreated mental health disorders. • Bus or shared ride passes to assist youth and families with no or limited transportation to required appointments. • Free, high quality anti-theft courses. • Interventions for pre-gang or gang-involved youth and/or youth with firearm/weapon related charges. • Inpatient/outpatient counseling services for sex offender youth.

REPORTED FROM JPO IN BROWARD AND LEON

TRANSPORTATION
CONTINUUM OF SERVICES
MENTAL HEALTH

FINDINGS



As our current study is ongoing, there are not exact findings of what will be expected for the results of barriers experienced withing different communities. However, with the service continuum analysis summarizes the greatest needs.

REFERRENCES







