Preventive risk assessment in forensic child and youth care

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CHAPTER 1

General Introduction
1.1 Forensic Child and Youth Care and the Role of Risk Factors

In the Netherlands, forensic child and youth care services are directed towards providing care to juveniles whose safety has been declared to be in danger (i.e., intervening in a civil law context) and to juveniles who have committed one or more criminal offenses (i.e., intervening in a criminal law context). A more general aim of the youth care system is to be ahead of intervening in a young person's life under a civil or penal title, either by preventing juveniles from growing up in chronic unsafe environments or by preventing juveniles with behavioral problems from becoming (persistent) delinquents. For youth care to be effective, it is not only essential to accurately identify the juveniles in need of care and/or protection, but also to determine what exactly should be addressed in (preventive) interventions. For both matters, the identification of risk factors for different forensic outcomes is necessary, since it is an important prerequisite for developing accurate instruments for risk and needs assessment.

The theories that have been most influential in explaining juvenile delinquency on the one hand (e.g., Catalano & Hawkins, 1996; Farrington, 1996; Gottfredson & Hirschi, 1990; Moffitt, 1993; Patterson & Dishion, 1985; Sampson & Laub, 1993), and various forms of child abuse and neglect on the other (Belsky, 1980, 1993; Cicchetti & Rizley, 1981; Cicchetti, Toth, & Maughan, 2000), are grounded in the assumption of the presence of risk factors in children and their environment. In general, risk factors are characteristics that have been shown in empirical research to be associated with an increased likelihood of the occurrence of a specific problem, although these associations are not necessarily causal in nature. Risk factors can be either static or dynamic (Andrews & Bonta, 1994): Static risk factors (e.g., gender or age of first criminal offense) can be strong predictors of the problem at hand, but are not readily changeable and can therefore not be considered as treatment targets. In contrast, dynamic risk factors (e.g., inadequate parenting behavior or having delinquent friends) are changeable, and when changed, a corresponding decrease (or increase) in risk can be expected. It has been widely acknowledged that it is the additive effect of multiple risk factors in different domains, rather than the effect of single risk factors, that accounts for the occurrence of delinquency (e.g., Loeber, Burke, & Pardini, 2009; Loeber, Farrington, Stouthamer-Loeber, & White, 2008; Sameroff, Bartko, Baldwin, Baldwin, & Seifer, 1998) or various forms of child abuse and neglect (e.g., Belsky, 1980, 1993; Cicchetti, Toth, & Maughan, 2000; MacKenzie, Kotch, & Lee, 2011). In short, several influential theoretical models have been built upon risk factors and the models central to the present dissertation are described below.
1.2 A Look at Three Theoretical Models

A first key question that arises is where risk factors for juvenile delinquency and (victimization of) child abuse and neglect are to be identified. In answering this question, in particular two complementary theoretical models are of great value. The ecological model of Bronfenbrenner (1979; Bronfenbrenner & Morris, 1998) has been widely used to explain how problematic behavior, such as delinquency, develops in children. In this model, children are studied in the context of a number of social environments (i.e., ecological systems) that interact with each other and influence a child’s development. This implies that the child is not only affected by his own characteristics at the individual level, but also by interactions with his immediate environment (microsystem) and interactions between different microsystems (mesosystem). Further, the child is indirectly affected by more distal and broader social settings (exosystem), which, in turn, are influenced by social and cultural values of the society in which a child is growing up (macrosystem). Finally, the child is affected by transitions and shifts taking place over the child’s lifespan (chronosystem). At the individual level and in all these ecological systems, risk factors for juvenile delinquency can be present. For instance, being male, prior antisocial behaviors, and being impulsive at the individual level; low family cohesion, inadequate parenting practices, and peers’ delinquency in the microsystems; poor communication between parents and the school in the mesosystem; parents dealing with difficulties at work in the exosystem; and changes in the family’s residence in the chronosystem. Bronfenbrenner argued that environments most proximal to children exert a more direct and larger influence on their development than environments more distal to children. As a consequence, most scientific studies guided by this ecological perspective have been directed at studying individual child characteristics and/or potential risk factors in the micro- and mesosystems.

Belsky (1980, 1993) applied Bronfenbrenner’s ecological perspective on child development to the process of child abuse and constructed a model in which risk factors can be found at four different levels of analysis varying in proximity to the child. At the first level (ontogenetic development), parental risk factors can be found representing the risks parents bring to their parenting role (e.g., experiences of child abuse during their own childhood). Child characteristics that increase the risk for abuse, such as having a mental or physical disability, may also be present at this level. Risk factors in the family contributing to the occurrence of child abuse can be found at the second level (microsystem), such as a high level of inter-parental conflict. At the third level (exosystem), risk factors in the community and the social system surrounding the family can be found, such as low availability of social services. Finally, risks regarding a society’s attitude towards children and abuse can be found at the fourth level (macrosystem),
such as the general acceptability of physical punishment as a proper disciplinary method. Belsky argued that at all these levels of analysis, multiple risk factors interacting with risks at other levels may be present, indicating that child abuse is a multifactorial determined phenomenon.

Now that two well-known ecological models for identifying risk factors have been presented, the second key question concerns what role risk factors have in the effectiveness of forensic youth care. The risk-need-responsivity model (RNR; Andrews & Bonta, 2010; Bonta & Andrews 2007, 2010; Andrews, Bonta, & Hoge, 1990) has been widely acknowledged as the most prominent model for guiding criminal offender assessment and treatment. Basically, the RNR model prescribes how a mere risk for criminal recidivism should be translated to clinical practice in order to successfully intervene when needed, and is built upon three core principles. The risk principle states that the intensity of treatment should match the offender’s risk to reoffend, implying that more intense treatment should be offered to offenders presenting a high risk, whereas less intense (or no) treatment should be offered to offenders with a low risk profile. According to the need principle, treatment should be focused on targeting the criminogenic needs of offenders, that is, the dynamic risk factors present in an offender’s life, so that the risk for recidivism is reduced. Finally, the responsivity principle states that the style and mode of treatment should be matched to the offender’s learning style and abilities.

The RNR model (Andrews & Bonta, 2010; Bonta & Andrews 2007, 2010; Andrews et al., 1990) specifically focuses on assessing and treating criminal offenders with the purpose to reduce recidivism; its fruitfulness was proven in several review studies (e.g., Andrews, Zinger, Hoge, Bonta, Gendreau, & Cullen, 1990; Dowden & Andrews, 1999a, 1999b; Koehler, Lösel, Akoensi, & Humphreys, 2012). However, the RNR framework may also be useful in forensic care aimed at the prevention of (the recurrence of) various forms of child abuse and neglect. This can be argued because both juvenile delinquent behavior (Loeber, Slot, & Stouthamer-Loeber, 2008) and child abuse (Belsky, 1980, 1993) are determined by the presence and absence of a variety of risk and protective factors in children and different environmental systems around children, as envisioned in the ecological perspective on child development. Furthermore, there is considerable similarity in risks for juvenile delinquency and risks for victimization of child abuse and neglect, of which mental problems of children and different familial problems, such as high levels of family stress and spousal violence, are good examples. Finally, as already mentioned, it is the accumulation of risks, rather than a single risk factor, that increases the likelihood of juvenile delinquent behavior (e.g., Loeber, Burke, & Pardini, 2009; Loeber, Farrington, Stouthamer-Loeber, & White, 2008; Sameroff, Bartko, Baldwin, Baldwin, & Seifer, 1998) as well as victimization of child abuse (e.g., Belsky, 1980, 1993; Cicchetti, Toth, & Maughan, 2000; MacKenzie, Kotch, & Lee, 2011).
1.3 Needs and Opportunities for Research

Throughout the years, a large number of studies have been directed at examining risk factors for persistent delinquent behavior, and as a result, many qualitatively different risk factors have been identified. However, what is lacking in previous work is a clear overview of these factors along with an indication of the corresponding effects, providing insight into the risk factors that contribute most to persistent delinquency. Besides this shortcoming in the field of crime and delinquency, a similar paucity exists in scientific literature on child abuse and neglect. In this field, there has also been a constant progress in identifying different risk factors for various forms of child abuse. In 2009, a large review of Stith and colleagues was published in which these researchers presented the relative strengths of different risk factors for child physical abuse and neglect. However, the review of Stith et al. was not directed at risk factors for child sexual abuse, which is a rather common form of child abuse (Stoltenborgh, Van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011) with serious negative effects for victims (see, for instance, the extensive review of Maniglio, 2009). Hence, a clear overview of risk factors for victimization of child sexual abuse is both lacking and needed. The present dissertation adds to the existing literature by the presentation of two comprehensive meta-analytic reviews, one on the effects of risk factors for persistent delinquency and one on the effects of risk factors for victimization of child sexual abuse.

Identifying variables as risk factors and acquiring knowledge on the magnitude of their effects are the first steps towards successfully bringing the risk and need principles of the RNR model (Andrews & Bonta, 2010; Bonta & Andrews 2007, 2010; Andrews et al., 1990) into the practice of forensic child and youth care. A following step is that valid and reliable assessment instruments are developed using the available knowledge on risk factors. Prior to determining the precise care needs of juveniles, it is first necessary to categorize juveniles according to their risk profile, so that high risk juveniles who are in need of care can be identified. After all, and in accordance with the risk principle of the RNR model, it is the matching between the level of risk and the levels of treatment services that represents the bridge between assessment and effective treatment. Although numerous risk assessment instruments have been developed and reported on in scientific literature, there is a lack of valid and reliable risk assessment instruments tailored to the individual agencies that together form the forensic child and youth care system.

In the Netherlands, an important link in the chain of youth care agencies is the Dutch police, as large groups of juvenile offenders as well as juvenile non-offenders (i.e., juveniles involved in an offense, but not in the role of a suspect) are registered in the police system. Currently, a number of risk assessment instruments tailored to juvenile
offenders and specifically for use by Dutch police officers is already available (e.g., Van der Put & Stams, 2013; Van der Put, 2014). However, for prevention purposes, it is also important that police officers are able to identify juvenile non-offenders presenting a high risk for becoming delinquent as well as juvenile non-offenders with a high risk for future care needs because of problems in their rearing environment. Until now, there were no risk assessment instruments available serving this purpose, and therefore this dissertation is partly aimed at developing such instruments.

1.4 Aims and Outline of the Present Dissertation

In sum, my dissertation aims to (1) increase the body of knowledge on risk factors and the magnitude of their effects leading to forensic care needs of juveniles, and (2) improve risk assessment procedures of the forensic child and youth care system by developing and validating two instruments for risk assessment that can be used by the police. In pursuing both these aims, four studies have been conducted and are covered in the present dissertation. The first two studies concern the criminal context of forensic youth care, whereas the last two studies concern the civil context.

The first study (Chapter 2) involves a quantitative review of the effect of different risk factors for life-course persistent offending relative to adolescence-limited offending. Specifically, this study was aimed at generating more knowledge on the strength of associations between different risk factors and life-course persistent offending by meta-analytically estimating the mean effect of several risk domains (i.e., groups of more or less conceptually similar risk factors), and by identifying factors that may moderate these mean effects.

The second study (Chapter 3) describes the development and validation of the Youth Actuarial Risk Assessment Tool for First-Time Offending (Y-ARAT-FO), which is a risk assessment tool that can be used by Dutch police officers for estimating the risk for the onset of general delinquency among juveniles who were involved in a criminal offense, but not in the role of a suspect. In developing this tool, an actuarial approach was used in which only variables stored in the Dutch police system were examined as potential risk factors. By implementing this instrument, the Dutch police can play an important role in timely identifying juveniles who are not yet delinquent, but are at risk for becoming a delinquent, and thus in need of care. High-risk juveniles can then be referred to specialized youth care services for more thorough assessment and treatment, if necessary.

In Chapter 4, a meta-analytic review on the effects of different risk factors for victimization of child sexual abuse is presented. In this review, mean effects of a number of risk domains were estimated and potential moderating variables were examined. In
In this way, knowledge of the risk factors contributing most to victimization of child sexual abuse is advanced, leading to a better understanding of the etiology of child sexual abuse victimization.

In the final study of this dissertation (Chapter 5), the development and validation of the Youth Actuarial Care Needs Assessment Tool for Non-Offenders (Y-ACNAT-NO) is described. The Y-ACNAT-NO is like the Y-ARAT-FO an actuarial risk assessment tool that can be used by police officers in the initial stage of risk assessment. More specifically, this instrument enables police officers to estimate the risk for a problematic child-rearing environment among juveniles who have been involved in a criminal offense, but not in the role of a suspect. Juveniles with a high-risk profile can be identified and referred to specialized youth care services for further and more thorough assessment of the juvenile’s safety and the problems in his environment.

In closing, Chapter 6 presents a summary of the main findings, discusses the strengths and limitations of the four studies comprising this dissertation, and describes implications for clinical practice as well as directions for future research.