



Adolescent Risk Reduction and Resilient Outcomes Work-Plan

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Risk Assessment Tools Are Widely Used

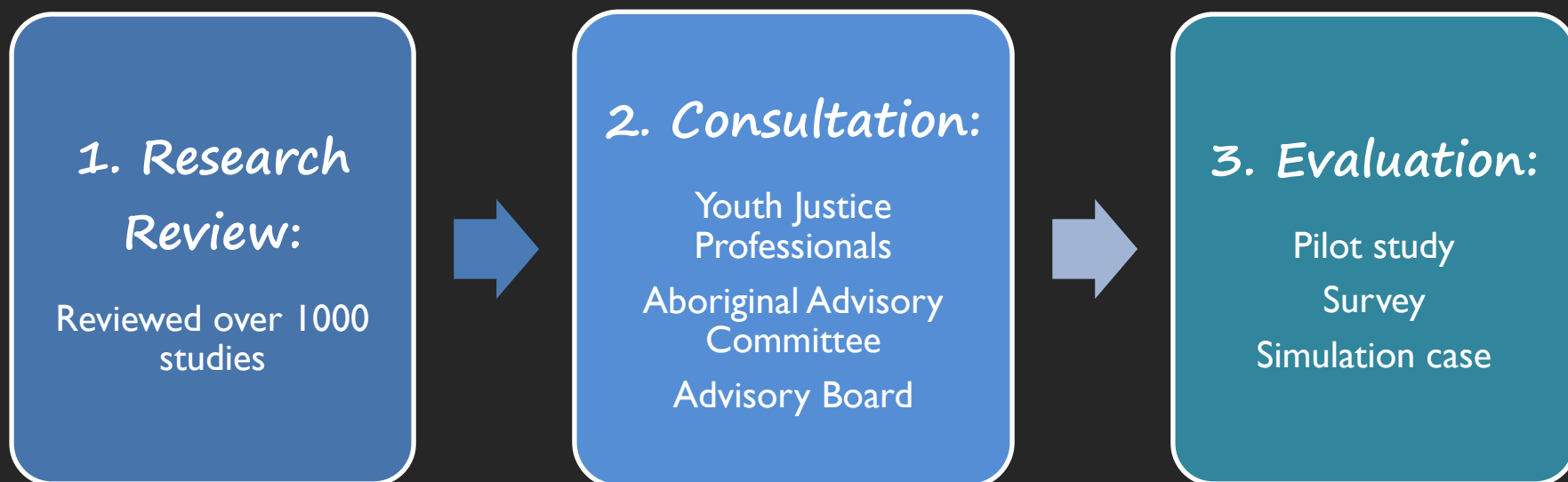
- Able to predict reoffending
- But don't provide much guidance on managing risk
 - Only 43% of YPOs use tools to guide treatment
 - Only 25-50% of identified risk factors are addressed

Impetus for ARROW



- Youth justice system contacted us
- Goal: bridge risk assessment to risk management
- Developed ARROW to respond to this request
 - Adolescent Risk Reduction & Resilient Outcomes Work-Plan
 - Risk management and intervention-planning guide

Steps in Development of ARROW



ARROW



- Based on risk-need-responsivity (RNR) model
- Plus the “what works” literature
- Maps on to SAVRY
- Configurable to other tools (e.g., YLS/CMI, START)



*Deal with
Crises & Safety
Issues*

**Plan for
Safety**

**Includes a Range
of Strategies**

Getting Ready

**Build
Motivation &
Rapport**

**Engage
Caregivers &
Support**

**Leverage
Existing
Strengths**

*Taking Active
Steps for
Change*

**Supervise and
Arrange
Activities**

Build Skills

**Coordinate
Services**

Components of ARROW



1. Intervention Plan Form

- Provides template
- Goal: increase adherence to RNR & best practices
- Checklist, embedded within existing forms
- Each item: 5-9 best practice strategies to choose

All strategies are “best practices”

Substance Use Difficulties

Check off the strategies you will use. When you have finished selecting, click the green button to continue.

- ☐ Use motivational interviewing strategies (AME program)
- ☐ Discuss supervision strategies with caregivers
- ☐ Encourage/arrange time with prosocial supports
- ☐ Provide incentives for reduced substance use
- ☐ Help youth to identify triggers
- ☐ Help youth problem-solve ways to avoid or resist substance use
- ☐ Refer youth for an assessment
- ☐ Refer families to a supported therapy (e.g., Functional Family Therapy)
- ☐ Refer youth to a supported therapy (e.g., cognitive behaviour therapy)
- ☐ Other

Professionals select what works for them and for youth



2. Guide

- Expands on form
- Compiles best practices for risk/protective factors
- Guidelines for Aboriginal youth

Goal is to provide one-stop source of information



Adolescent Risk Reduction and Resilient Outcomes Work-Place



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Item 19: Substance Use Difficulties

Item description:	This SAVRY item focuses on a youth's use of alcohol, drugs, and inhalants, particularly use that results in (or could result in) problems in health or life functioning (Borum et al., 2006).
When to include this item in your plan:	It is important to include this item in your plan if substance use plays a critical role in increasing the youth's risk for violence and offending (e.g., the youth offends when drunk or high; the youth steals in order to support a drug habit).
Best practice strategies:	☐ Use motivational interviewing strategies (AME program) ☐ Discuss supervision strategies with caregivers ☐ Encourage/arrange time with prosocial supports ☐ Provide incentives for reduced substance use ☐ Help youth to identify triggers ☐ Help youth problem-solve ways to avoid or resist substance use ☐ Refer youth for an assessment ☐ Refer families to a supported therapy (e.g., Functional Family Therapy) ☐ Refer youth to a supported therapy (e.g., cognitive behaviour therapy)

Build Motivation and Rapport

Use motivational interviewing strategies: Use the array of motivational interviewing tools and strategies. Telling a youth not to use substances is generally ineffective and can even increase the youth's resistance. Instead, elicit the youth's views and understand her perspectives (Miller & Rollnick, 2012). For instance, ask the youth about reasons that she might want to continue to use drugs or cut back on drugs. Pay attention to the youth's own motivations for change. As an example, if a youth tells you that she has thought about cutting back because she did something embarrassing when high that she now regrets, or she is upset that her family is worried about her, reinforce these as reasons to change and ask the youth to talk more about this. Use the [Reasons to Stay the Same](#) or [Change](#) tool or [Readiness Ruler](#) to facilitate discussions.

"They [my counsellors] weren't like 'they if you do drugs you are going to die.' They kind of left it up to me, being like 'okay well, why do you think this happened?' And then I would be like, 'oh cause I did meth' and then I would figure it out for myself. So I think that I ended up wanting the help because nobody was pushing me to do anything."

Former Adolescent Offender as cited in Watson (2014)

Engage Families and Social Supports

Discuss supervision strategies with caregivers: Some caregivers might be interested in or benefit from information about substance abuse (e.g., signs and symptoms that their teen may be using drugs or alcohol, the side effects of substances). In such cases, you could recommend these or similar resources:

- American Academy of Child and Adolescent Psychiatry (2013). [Facts for Families – Teens: Alcohol and Other Drugs](http://www.aacap.org/App_Themes/AACAP/docs/facts_for_families/03_teens_alcohol_and_other_drugs.pdf). http://www.aacap.org/App_Themes/AACAP/docs/facts_for_families/03_teens_alcohol_and_other_drugs.pdf
- Ketcham, K., & Pace, N. A. (2008). *Teens Under the Influence: The Truth About Kids, Alcohol, and Other Drugs-How to Recognize the Problem and What to Do About It*. Random House.

Also, you can suggest strategies to monitor and reduce the youth's substance use (e.g., help caregivers to spend increased time with their teen, encourage them to take an interest in their youth's activities and friends; Henderson et al., 2009). Provide caregivers with the [Information for Caregivers](#) pamphlet, as it contains suggestions.



3. Worksheets and Tools

- For youth (e.g., My Strengths, Reasons to Change)
- For professionals (e.g., Scenario-Planning, Inventory of Evidence-Based Services)

Starting point for conversations

My Triggers

Date: _____ Name: _____

Sometimes, certain people, situations, places, and other things can get you into trouble. For instance, some people are more likely to offend or use drugs when they are with certain people or in particular situations.

What are your triggers for _____?

People (e.g., friends, relatives, peers): I can help make sure that these relationships don't get me into trouble by . . .	Places (e.g., at home, at school, at the mall): I can avoid these places by . . .
Situations (e.g., peer pressure, being bored): I can avoid these situations or manage them by . . .	Emotions & thoughts (e.g., angry, sad, bored): I can handle my feelings and thoughts by . . .

Reasons to Stay the Same or Change

Date: _____ Name: _____

When we think about making changes, most of us don't really consider all sides in a complete way. Use this chart to see the pros and cons of staying the same or of changing. Fill it out in the order that the numbers are listed.

The behaviour I am thinking about changing is: _____

	Staying the Same	Making a Change
Positive Things	1.	4.
Negative Things	3.	2.

People in My Life

Date: _____ Name: _____

Everyone has a network of people around them who influence them and play a role in their life. Some people play a larger role than others, but all of these people are important and help shape who you are. In the following chart, list people who play a role in your life, who you value, and/or who influence you in some way. Then circle the people who help you to stay out of trouble (e.g., avoid offending or substance use).

Family:

Service providers:

Neighbours:

Teachers:

Friends:

Others:

You



4. Training Package

- Overview of ARROW
- Practice completing ARROW Intervention Plan
- Best practice strategies (e.g., problem-solving)

Training focuses on practical experience



Sebastian

- 16-year old male
- "Goth"
- Assaulted peers who



□ Include strategies to address **key risk factors**?

Example 1:
Has a whole bunch of risk factors!

Okay:
But the key factors get lost



Use motivational interviewing

Sebastian says therapy is useless. You have told him all the reasons why he needs to attend but it's not getting through.



Identify/challenge criminogenic thinking

cont'd

Sebastian seems to think aggression is a good way to deal with the bullies.

Sebastian: If I show them I'm not going to take it, they'll leave me alone.

How can you help him think about this differently?

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