

Using sex offenders' views in service delivery

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How do sex offenders see themselves and their risk to others?

- A need to see how the sex offenders view themselves, their treatment and their change. We do it with other prisoners, clients and “service users” so why not sex offenders?
- Growing recognition especially within MAPPA that we do not really ask or know
- Technique to do this which is ‘user friendly’ and easy to administer, and...
- Facilitates offender disclosures

Alternative evaluation methodologies

- In terms of treatment programs, risk management and reintegration....
- Should we be looking at sex offender changes in psychology and social engagement outside of pure risk assessments?
 - Social and community contacts;
 - pro social activities;
 - capacity to self regulate; and
 - desistance.
- Alternative Methodologies:
 - Look to personality and social psychology scales as a mechanism to measure?
 - Volume, frequency and extent of pro social connections.
 - Social network analysis as an alternative method?
 - Social Return on Investment methodology?
 - Qualitative methodologies, a better fit than pure psychometrics?
(McCartan & Kemshall, 2013)

Uses of thought maps

- To gain the user voice
- To inform risk assessment
- To inform risk management
- To assist with case reviews
- To assist with the review and reflection of treatment

Examples of thought maps

- Completed thought maps were provided by Hazel Kemshall, DMU; and Andrew Edwards, Dyfed Powys MAPPA.
- Please contact kemshall@dmu.ac.uk for more information as the thought maps are covered by Intellectual Property Right.

Offender views of MAPPA

- *“I understand they have a responsibility to the public to ensure that I do not cross any boundaries”.*
- *“I know they are part of the sex offender team but they didn’t really go into it too much”.*
- *“Basically it is to monitor people like myself, it is to do with a risk assessment and stuff like that”.*
- *“A risk management panel”.*

Offender views continued

- 14 out of 15 spoke positively of programmes, particularly to develop self management strategies
- One declined programme on grounds 'too emotionally demanding'
- Fear of self-exposure in the group setting was a concern across the respondents

Evidencing behavioural change

- How reliable can self report be?
- Clear descriptions of self management techniques, relapse prevention strategies
- Recognition of victim impact
- Use of distraction techniques to avoid inappropriate thoughts when seeing children
- These views were repeated by a COSA cohort 2012-13.

Reported variable impact of restrictions

- The unintended consequences can be resented (i.e. losing employment of failing to gain it)
- Offenders were more ready to comply if restrictions were explained by staff and were seen as reasonably matched to their risks and behaviours of concern
- Where offenders recognised the seriousness of their offending restrictions were accepted
- Those who felt they were not a risk resented them
- Blanket and more general restrictions were more resented.

Cosa Evaluation

- No service user involvement
- The development of exit interviews as a means for getting Core member views of the process, but no real time judgment.
- Dynamic Risk Reviews – parallel analysis
 - A tool developed to help facilitate a conversation between lay members of the circle and the co-ordinator
 - Redeveloped to be a parallel reporting mechanism, between
 - Core Member and co-ordinator
 - Co-ordinator and the lay members of the Circle
 - Helps identify issues (for core member and lay participants), disparities, areas for future development and can feed into risk/dangerousness.
 - Core Member and co-ordinator
 - Co-ordinator and the lay members of the Circle

Comparing the DDR's

DDR about the CM

- Is there evidence that the CM is struggling with problematic sexual thoughts?
- Has the CM spoken to an excessive and/or inappropriate degree about sexual matters in general?
- Has the CM expressed any sexualised attitudes towards children?
- Has the CM expressed hostile or negative views towards women?
- Is there evidence that the CM is displaying a high emotional identification with children?
- Is there evidence that the CM is experiencing feelings of emotional loneliness?
- Is there evidence that the CM is experiencing feelings of inadequacy in relationships?
- Does the CM have stable emotional relationships with any other people outside the Circle?
- Is there evidence that the CM is experiencing feelings of powerlessness or hopelessness?
- Has the CM demonstrated reckless behaviour?
- Has the CM expressed any hostile feelings or angry outbursts?
- Does the CM demonstrate appropriate problem solving abilities?
- Does the CM maintain realistic relapse prevention strategies?
- Is there evidence that the CM is experiencing any feelings of low self-esteem?
- Does the CM engage in appropriate activities and hobbies?
- Is the CM in stable and suitable accommodation?
- Is the CM involved in any paid or voluntary work?

DDR with CM

- How do you feel you are you getting on with managing and controlling your sexual behaviour and attitudes? (*looking particularly for attraction to children, women and sexual deviance*) (Links to DRR questions 1, 2, 3, 4, 5)
- To what degree do you feel that you have people you can share your feelings with? (Links to DRR question 6)
- How would you say your relationships are developing? (q7) Especially regarding any outside of your Circle? (Links to DRR question 8)
- How do you think that your sense of self-worth/self-esteem may be changing, if it is? Either for the better or the worse? (Links to DRR question 14)
- To what extent do you think you are making more careful decisions? Could you give an example (Links to DRR questions 10, 12)
- How do you feel that you are getting on with managing difficult feelings? i.e., being angry or upset, etc. (Links to DRR question 11)
- Can you say how you think that you are managing to keep to your original relapse prevention plan? (Links to DRR question 13)
- Tell me about some of the hobbies and activities that you enjoy? Have you started any new ones recently or further developed existing ones? (Links to DRR questions 13 & 15)
- Can you tell me how your circumstances? Is your accommodation ok, have you been able to get a job, take up any voluntary activities? (Links to DRR questions 16, 17)
- Has being involved with Circles of Support and Accountability impacted, positively or negatively, with your social reintegration? Could you please give an example?

Examples 1

- Managing sexual thoughts

5

Admits it is a problem when stressed but is using distraction such as his playstation to overcome

4 _____ 5

CM said he has felt slightly more aware of girls as opposed to adult women in the last couple of months ...noticing younger women though says not in a deviant way “not making memories”. CM feels that it relates to the summer – more young girls/children around. CM says he uses a meditation method to check himself and make sure he doesn’t “make a memory” – effective self-auditing. CM says he recognises the value to himself of meditation and uses this method frequently.

Examples 2

- **Problem solving abilities**

0√ Not at all

Does not deal with any problems. Does not face the issues. Puts everything off. As said previously 'buries his head in the sand' and hopes things will be solved without his input.

0√ Not at all

Decisions are not being carefully made because of gambling. Has no money for food or household bills. Gambling links in with his obsessive/irrational behaviour and makes him more likely to reoffend sexually.

Issues in using sex offender feedback on services

- How to gather it rigorously and by what techniques
 - Qual vs Quant?
 - Counteraction techniques and inter-rater reliability
- Reliability of what is collected
 - Researcher bias.
 - Viability of tools
 - User engagement, understanding and reliability of us
 - Effectiveness in practice (so will it be incorporated into treatment programmes etc)
- Honesty, feedback and Trust
- Political acceptability of the sex offender service user voice

Questions?