

# Leverhulme Trust



## Working with Persons who have Sexually Offended: *Current knowledge and trends*

**Robin J. Wilson, Ph.D., ABPP**

*dr.wilsonrj@verizon.net*

*www.robinjwilson.com*

# The Realities of Sexual Offending

- ❖ 95% (or more) of offenders are male
- ❖ The largest age cohort of people who sexually offend is boys aged 13-15
- ❖ People who sexually offend have more than three times the number of adverse childhood experiences
  - ❖ They have complex needs
- ❖ As many as 95% of people who sexually offend coming into the system are first time caught (Sandler et al., 2008)

# The Realities of Sexual Offending

- ❖ Reoffense rates are lower than most people think
- ❖ Meta-analytic studies show that about 15% will reoffend within 5-7 years post-release
- ❖ Most States and the Federal government (BJS) now report lower rates (e.g., 10% in 10 years)
- ❖ Identified offenders are more likely to be returned to prison because of technical violations than because they committed a new "crime"
  - ❖ Reiterating that they have complex needs
- ❖ Initiatives like CoSA address complex needs

# Tips to Increase the Efficacy of Risk Management

- ❖ Follow the RNR principles
- ❖ Be data driven
- ❖ Consider those data when setting policy and practice guidelines
  - Evidence-based decision-making, not decision-based evidence-making
- ❖ Collaborate with others (in your work and advocacy)
- ❖ Involve the community-at-large, they can do it
- ❖ Engage in knowledge transfer whenever possible
- ❖ Beware paradoxical communication



# Risk Assessment

# Established risk factors for sexual offender recidivism

*(Hanson & Yates, 2013)*

## Sexual deviance

- Any deviant sexual preference
  - Sexual preference for children
  - Sexualized violence
  - Multiple paraphilias
- Sexual preoccupations
- Attitudes tolerant of sexual assault

## Lifestyle instability/criminality

- Childhood behaviour problems (e.g., running away, grade failure)
- Juvenile delinquency
- Any prior offences
- Lifestyle instability (reckless behaviour, employment instability)
- Personality disorder (antisocial, psychopathy)
- Grievance/hostility

## Social problems/intimacy deficits

- Single (never married)
- Conflicts with intimate partners
- Hostility toward women
- Emotional congruence with children
- Negative social influences

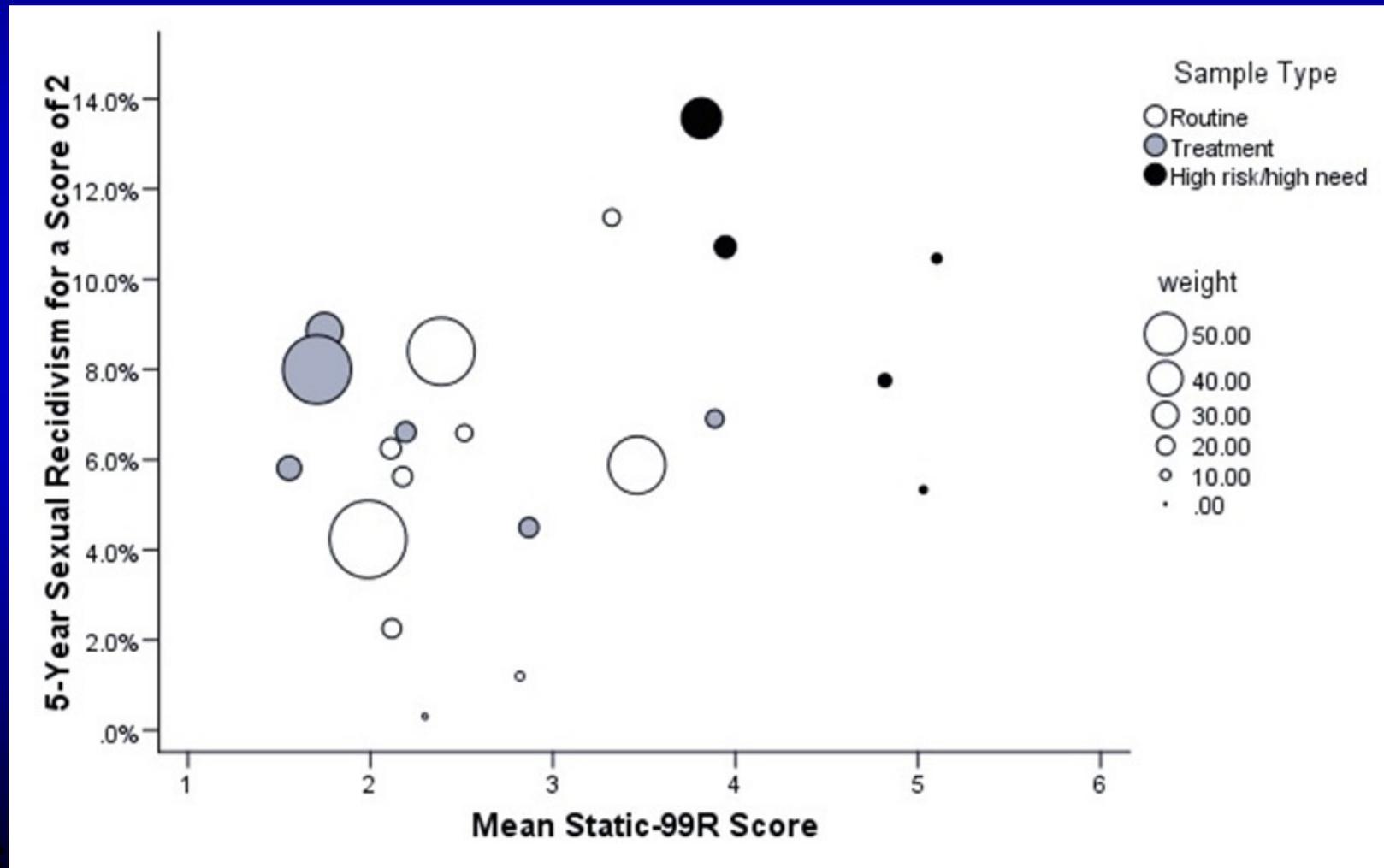
## Response to treatment/supervision

- Treatment drop-out
- Non-compliance with supervision
- Violation of conditional release

## Poor cognitive problem-solving

Age (young)

# Meta-analytic findings S-99R *from Helmus, 2014*



# Assessment of In-Treatment Change with Sexual Offenders

- ❖ Measurement of status on dynamic factors (also known as psychologically meaningful risk factors) can help us to tell if the intervention is being effective
- ❖ Dynamic factors should be those criminogenic needs identified for the population of interest, in our case sexual offenders

# Principles of Effective Interventions Evidence-based Treatment



**Risk, Needs, Responsivity**  
**Outcomes and Interpretations**

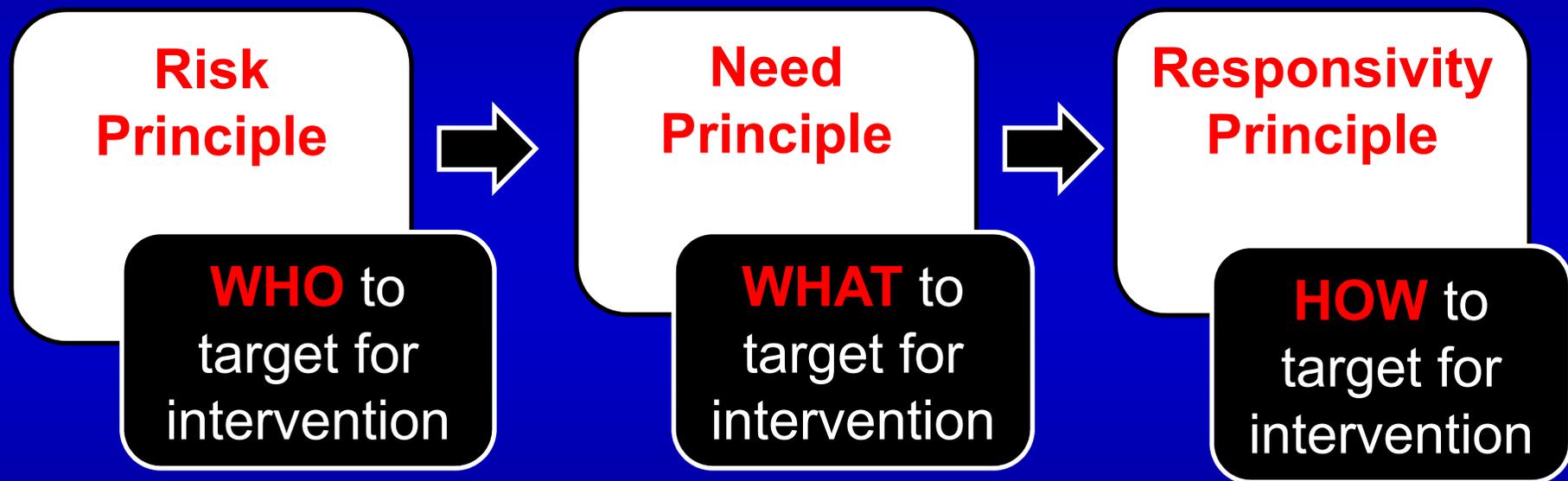
# Agents of Change

As clinicians and other concerned practitioners, our goal is to assist all residents in the development of a

**balanced, self-determined lifestyle.**

Contemporary research in our field suggests that learning to live a “good life” is inconsistent with antisocial behavior.

# Principles of RNR Model



(Andrews & Bonta, 2010)

# Points to Consider

- ❖ Sexual offender treatment has a long history of confrontational and punitive approaches
- ❖ Studies also show that confrontational style results in poorer treatment outcome (Marshall, 2005)
- ❖ Research shows that failure to complete treatment not only predicts re-offense, but can elevate level of risk (Hanson & Morton-Bourgon, 2004)

# Nothing Works?

- ❖ One review of studies relating to the effectiveness of treatment found that far more studies reported positive results (treated group with significantly lower recidivist rates than untreated) than inconclusive results.
- ❖ Meta-analytic results typically show a 40% decrease in reoffending with treatment completion.

# California Sex Offender Treatment & Evaluation Project

- ❖ No differences were found when comparing treatment participants, volunteer controls, and non-volunteer controls.
  - Follow-up was just over eight years
  - Sexual reoffending  $\approx 20\%$  for all groups.
- ❖ However, those participants who actually “got” the material reoffended at half the rate of those who did not.

# Paradoxical Language

- ❖ You need to be more motivated to change.
- ❖ Please be honest and straightforward with us; evidence that you don't agree with us will be understood as resistance.
- ❖ It is our job to point out your thinking errors. However it is not acceptable to observe when we are using thinking errors.

# Paradoxical Language

- ❖ You need to display good decision making, even as we restrict the number of choices you actually have.
- ❖ You need to participate fully in treatment regimens that we professionals cannot agree on ourselves.
- ❖ Treatment makes some offenders worse; it is important that you participate.

# Sexual Offenders in the Community



**What should we do?**

**When should we do it?**

**How do we know it's working?**

# Stakeholders

- ❖ people who have been or might be victimized
- ❖ citizens
- ❖ law enforcement
- ❖ legal and correctional personnel
- ❖ mental health personnel
- ❖ the media
  
- ❖ persons who have sexually abused

# Official Control

There are several “official” means by which to control offenders in the community ...

- ❖ Court Diversion
- ❖ Probation & Parole
- ❖ Court Orders / Orders of Prohibition
- ❖ Specialized Peace Bonds
- ❖ Community Notification
- ❖ Sex Offender Registries
- ❖ 1000/2000/2500 feet rules
- ❖ Electronic/GPS Monitoring
- ❖ Long Term Supervision Orders / Lifetime probation
- ❖ 3 Strikes / Civil Commitment

# Paying Attention to RNR

- ❖ I won't tell you that each and every one of these measures is inappropriate all the time.
- ❖ Clearly, there are some offenders on whom special attention must be focused, using the tools and risk management options available.
- ❖ However, it would be my contention that we consistently fail to apply risk and need considerations in regard to implementation, ultimately washing out any potential gains.

# What bang for our buck?

- ❖ Overall, little evidence exists that community notification, residency restrictions, or maintaining SORs reduce reoffending (CSOM, 2008)
- ❖ There are, however, unintended consequences for many offenders, including residence and job instability, along with difficulties establishing social contacts (Levenson & Hern, 2007)
- ❖ The literature on dynamic risk management tells us that problems in these areas increases risk (Hanson et al., 2007)

# Intensive Collaboration



**Containment**

**MAPPA**

**CASOM**

**CoSA**

# Containment

- ❖ Specially trained supervising agents
  - Smaller caseloads
  - In instances where supervising agents are few, law enforcement becomes involved through registration and ensuring compliance with conditions
- ❖ Polygraph examinations
- ❖ GPS

# MAPPA

In the UK, Multi-Agency Public Protection Arrangements help to manage a partnership of statutory agencies tasked with increasing public safety

- ❖ Police, Probation, Social Services
- ❖ Circles-UK has become an important part of the MAPPA process

# CASOM: Comprehensive Approaches to Sex Offender Management

- ❖ Training and funding agenda sponsored by SMART Office
- ❖ Recognizes that comprehensive approaches are the most effective way to manage sexual offenders within communities
  - Aim is to develop effective public policies and practices that will promote public safety and to respond effectively to the needs of victims of sexual offending
  - Best practices are currently being investigated and promoted

# Circles of Support & Accountability



Professionals



Circle coordinator



Volunteers



Core member





**Are high-risk offenders  
high-risk forever?**

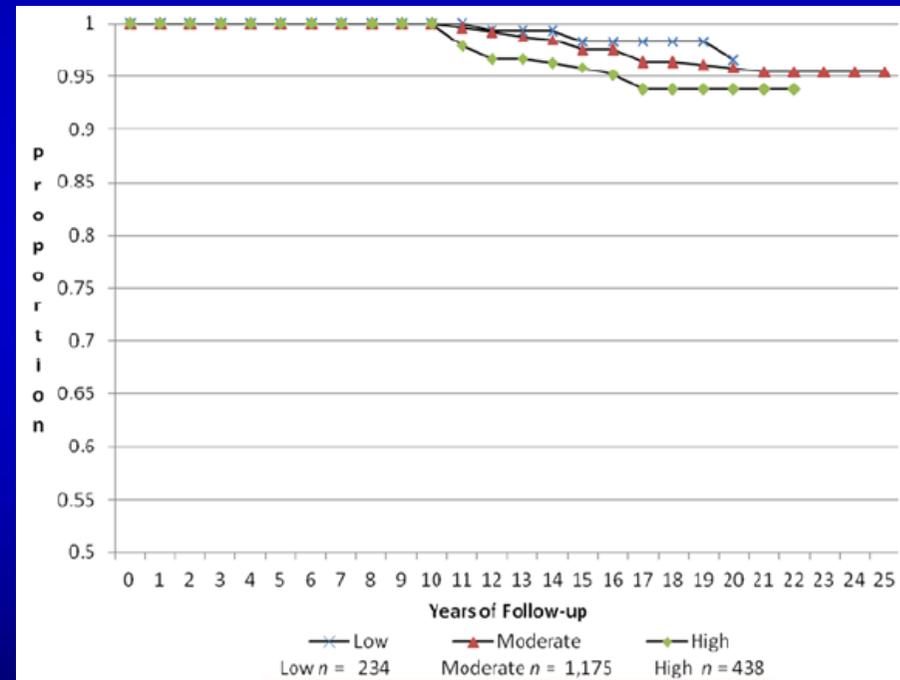
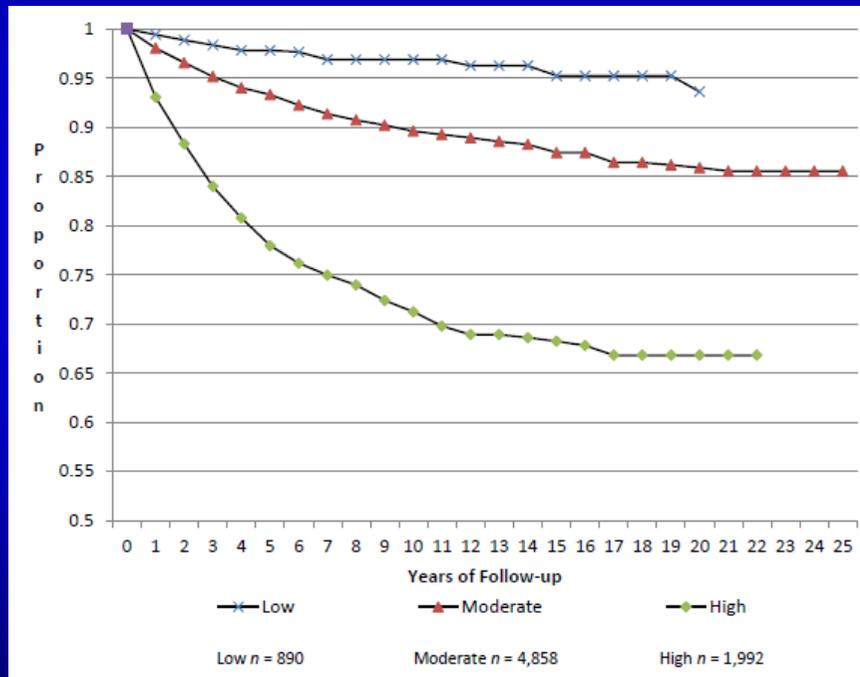
# Are “high risk” sexual offenders “high risk” forever?

*(Hanson et al., 2014)*

- ❖ If they are going to, most sexual offenders will reoffend within 5 years post-release.
- ❖ The longer they remain offense-free in the community, the more likely it is that they will continue to be offense-free.
- ❖ The effect appears most pronounced in higher risk offenders.

# Are “high risk” sexual offenders “high risk” forever?

*(Hanson et al., 2014)*



# The Bottom Line

Science-based Risk Assessment

+ Treatment

+ Collaboration Efforts

= Effective Practice

and Safer Communities

# Contact

**Robin J. Wilson, Ph.D., ABPP**

Department of Psychiatry & Behavioural Neurosciences

McMaster University, Hamilton, ON

Wilson Psychological Services LLC

Sarasota, FL

941-806-9788

*dr.wilsonrj@verizon.net*

*www.robinjwilson.com*