



Sex Offender Treatment 101

INSTITUTIONAL AND COMMUNITY BASED TREATMENT SERVICES
PROVIDED BY THE DEPARTMENT OF CORRECTIONS

Logistics

- ▶ Typical groups range from 8 to 15 people.
- ▶ Group members can expect to spend one year in each program
 - one year in treatment within the institution
 - one year in community based treatment
- ▶ More than this is proven ineffective and often detrimental.
- ▶ Group uses a CBT model of therapy with a focus on Dynamic Risk Factors
- ▶ Group members are evaluated using the Stable 2007 and the Static 99 at the beginning of treatment
- ▶ Group members are reevaluated using the Stable 2007 again at the end of treatment

CBT

What is it?

- ▶ Cognitive behavioral therapy
- ▶ Reinforcement through rehearsal and habituation
- ▶ Identifies Goals, Seeks solutions through interventions

Manualization



Recently, the intuitions have sought to create continuity between institutional programs.

- ▶ Program evaluations
- ▶ Redesign of the assignments
 - manual divided into 8 chapters
- ▶ Positive focus, skills focused
- ▶ The community is currently developing a manual to enhance consistency among community therapists. This is being based on what has and has not been successful.

Dynamic Risk Factors

► Outlined as highly correlated with re-offense, research has demonstrated the more often or the more significantly a convicted offenders participate in the following factors, the more re-offense becomes likely.

- Hostility towards Women
- General Social Rejection and Loneliness
- Impulsive Acts
- Poor Problem Solving
- Significant Social Influences
- Sex as Coping
- Sexual Preoccupation
- Deviant Sexual Interests
- Capacity for Relationship Stability
- Lack of Concern for Others
- Negative Emotionality
- Emotional Identification with Children
- Cooperation with Supervision

Understanding deviancy and the Psychosexual side of treatment

- ▶ Cycle of reinforcement
- ▶ What is deviance? What is sexual preoccupation?
- ▶ Internal belief system

Research says....

- ▶ Victim empathy doesn't work
- ▶ Shame and guilt are more highly correlated with recidivism versus treatment efficacy
- ▶ Lliam Marshall's work indicated admitting guilt was not correlated with a reduction in recidivism however programs that allowed client to develop interventions across domains still demonstrate a reduction in risk (Marshall, WL. Self Esteem, shame, cognitive distortion and empathy in sexual offenders: Their integration and treatment implications. 2009)

Interventions

Internal Vs. External

- ▶ Internal:
 - Positive reframing/Reality Testing
 - Breathing exercises/mindful breathing
 - Reflective journaling
 - Body scans/ Sensation tracking
 - Boundary rehearsal
 - Active problem solving step consideration
 - Cold Water words
 - Emergency planning
- ▶ External:
 - Seeking supports
 - Actively participating in activities
 - Exercising
 - Schedule/structure adherence
 - Removal from trigger

Community SOTAP

- ▶ Skills focused
- ▶ Assignments often employ more traditional CBT interventions
 - Action Plans
 - Follow ups
 - Reframing
 - Journaling
 - Behavioral interventions: Breathing, refocusing, etc.
- ▶ Collaborative teamwork between CCOs, Offender and Treatment providers
- ▶ Treatment expectations are outlined versus supervisory expectations

General Therapy Expectations

1. Follow all conditions of your Judgment and Sentence and any conditions set by the Community Corrections Officer (CCO) and/or the ISRB.
2. Sign a release of information which allows the Community SOTAP therapist to be in contact with professional outside of DOC to share pertinent information regarding treatment.
3. Attend all scheduled appointments unless given prior approval for absence. A client with excessive absences or with three consecutive unexcused absences from treatment appointments (scheduled individual session or group) may be terminated from treatment.
4. Discuss offense related risks and behaviors with significant others, live-in partners and others who are relevant in your life (i.e., employer, clergy, family, close friends, etc.). A meeting may be called by the Community SOTAP therapist in order for a disclosure to happen.
5. Clients convicted of crimes against children agree not to date or establish relationships with persons with minor children living with or visiting them without the consent of the Community SOTAP Therapist.
6. I will not attend Sex Addicts Anonymous or other meetings to address sexual issues without Community SOTAP therapist approval.
7. **No contact, direct or indirect**, with any victim(s) without the written approval of the therapist, CCO, and the victim (in the case of minors, the victim's legal guardian/victim's therapist).
8. **No contact, direct or indirect**, with minors unless the Court, the ISRB and/or the CCO authorize such contact and it is permitted by the Community SOTAP therapist.
9. Talk in treatment about relationships, to include the person or persons with whom you are interested in being sexual with. Disclose your sexual offending history to any prospective partner **prior** to any sexual contact in the presence of the Community SOTAP therapist and CCO.
10. Do not observe (visual or audio) any sexually stimulating material (as defined by your Community SOTAP therapist), without prior consent from the Community SOTAP therapist.
11. Prior to accessing the internet, I agree to sign and abide by the Electronic Media User agreement.
12. I may be required to complete a safety plan prior to engaging in activities that could present a risk. Plans will be reviewed and approved by your treatment group, Community SOTAP therapist and CCO.
13. Clients will not consume alcohol, marijuana, or other non-prescription, mood-altering drugs while in treatment.
14. I will distribute my name and phone number to other group members for the purpose of enhancing my support system and accessing resources.
15. In addition to these general expectations and agreements, I agree to abide by the following conditions that are specifically related to my risks:

In signing this expectation form, I acknowledge reading the entire document and there has been an opportunity to ask and receive clarification on anything in this document that is not understood. I agree to follow these conditions for Community SOTAP treatment. When this agreement is signed, all parties will be provided with a copy.

The necessity of choice

Making an offender's world smaller often does the opposite of what you might think....

- ▶ Protective Factors
- ▶ Options allows for opportunity to build problem solving skills
- ▶ Creating space to make choices supports autonomy and ability to seek CCOs and Treatment providers as a resource
- ▶ Choices are best made when progressive versus all or nothing

Creating connection between CCOs and Treatment

- ▶ Clarification of Supervisory role versus Treatment Expectations
 - Who says 'yes' or 'no'
 - Safety plans
- ▶ Intraoffice and Interoffice communications
- ▶ Staffings and Interdisciplinary Team meetings

Biggest Issues seen in the community

- ▶ Undisclosed relationships
- ▶ Lack of appropriate disclosures
- ▶ Poor understanding of negative relationships in practical/tangible ways
- ▶ Pornography or sexually explicit material(s)
- ▶ Regular violations that prevent attendance
- ▶ Housing/Money/transportation
- ▶ Poor understanding of objectives and their contribution to long term outcomes
- ▶ Poor knowledge of resources
- ▶ Poor understanding of work conditions