

Sex offender treatment is not punishment.

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Keywords:

sex offender treatment; punishment; ethics; criminal rehabilitation; human rights

Abstract:

The treatment of sexual offenders can be fraught with ethical dilemmas. Practitioners must balance the therapeutic needs of sex offender clients alongside the risks they might pose to others. These ethical challenges include balancing community safety with the rights of the offender, the privileged therapeutic relationship and the potential for coerced treatment. In this paper, we respond to Glaser's argument that treatment is punishment and that sex offender treatment providers breach ethical codes by violating confidentiality, engaging in coercion, and ultimately causing harm to clients. We first consider whether sex offender treatment is indeed punishment. We argue that it is not, and that mandated treatment can and should be conducted in a fashion consistent with professional codes of ethics familiar to mental health providers. We then discuss the human rights model, which we agree is an essential lens through which to view the psychological treatment of sexual offenders. We attempt, as have other scholars, to illustrate the ways in which human rights principles intersect with traditional mental health codes of ethics particularly in the case of sex offender treatment. We conclude that sex offender treatment can be conducted ethically, that treatment differs from punishment in clear and distinct ways, and that ethical treatment conforms to a human rights perspective. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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Sex offender treatment: Consumer satisfaction and engagement in therapy.

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Keywords:

sex offender treatment; consumer satisfaction; group therapy; therapeutic services

Abstract:

Convicted sex offenders attending an outpatient treatment program in Connecticut were surveyed about their experiences in therapy, their perceived importance of treatment content, their satisfaction with the help they receive, and their engagement in therapeutic services. There were strong correlations between perceived importance of content items and satisfaction with services. A robust correlation was also found between engagement and satisfaction. Clients rated accountability and victim empathy as the most important components of treatment. Other popular content areas were thinking errors, relapse prevention concepts, uncovering motivations to offend, and controlling deviant arousal. Most sex offenders valued the peer support and confrontation offered by group therapy. Though reduced recidivism is clearly the crucial measure of treatment success, clients who are engaged in the treatment process and develop healthy interpersonal skills by participating in therapy may be less likely to engage in abusive behavior. Implications for practitioners are discussed. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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Treatment experiences of civilly committed sex offenders: A consumer satisfaction survey.

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Keywords:

treatment experiences; civilly committed sex offenders; consumer satisfaction; prevention

Abstract:

The purpose of the study was to elicit feedback from sex offenders about the components of treatment that they believed to be most helpful in preventing reoffense. A sample of civilly committed sex offenders from the Sand Ridge Civil Commitment Center in Wisconsin (n = 44) was surveyed about their perceptions of treatment, including content, process, therapists, rules, and completion requirements. Clients were asked to rate the importance of treatment components to their recovery and to rate their satisfaction with the treatment they received for each component. Participants expressed fairly positive sentiments about their treatment experiences, though specific concerns were noted. There was an overall positive correlation between importance of and satisfaction with treatment, but ratings of importance were consistently higher than ratings of satisfaction. Implications for practice and future research are discussed.

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Perceptions of sex offenders about treatment: Satisfaction and engagement in group therapy.

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English

Keywords:

sex offenders perception; treatment; client satisfaction; client engagement; group therapy

Abstract:

Surveying the views of sex offender clients can help ensure that treatment is relevant and responsive to client needs. The purpose of this exploratory study is to elicit sex offender clients' perceptions of their experiences in treatment in order to better understand the components of treatment perceived to be helpful in preventing reoffense. Samples (N = 338) of male sex offenders in outpatient group therapy are found to be generally satisfied with treatment services and have positive perceptions of treatment effectiveness. Offenders in treatment value the role of group therapy, and they find accountability, victim empathy, relapse prevention, and "good lives" concepts to be most helpful in managing their behavior. Their engagement in group therapy is assessed using the Group Engagement Measure, and a positive correlation is found

between engagement and treatment satisfaction. Eliciting client opinions about the helpfulness of program content and process, and adjusting treatment protocols accordingly, is consistent with the principles of risk, need, and responsivity, a model recommended for therapeutic interventions with criminal offenders.

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“But I didn’t do it!”: Ethical treatment of sex offenders in denial.

Authors:

Levenson, Jill S.,

Sexual Abuse: Journal of Research and Treatment, Vol 23(3), Sep, 2011. pp. 346-364.

Abstract:

This article addresses ethical questions and issues related to the treatment of sex offenders in denial, using the empirical research literature and the ethical codes of American Psychological Association (APA) and National Association of Social Workers (NASW) to guide the ethical decision-making process. The empirical literature does not provide an unequivocal link between denial and recidivism, though some studies suggest that decreased denial and increased accountability appear to be associated with greater therapeutic engagement and reduced recidivism for some offenders. The ethical codes of APA and NASW value the client’s self-determination and autonomy, and psychologists and social workers have a duty to empower individual well-being while doing no harm to clients or others. Clinicians should view denial not as a categorical construct but as a continuum of distorted cognitions requiring clinical attention. Denial might also be considered as a responsivity factor that can interfere with treatment progress. Offering a reasonable time period for therapeutic engagement might provide a better alternative than automatically refusing treatment to categorical deniers. (PsycINFO Database Record

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Engagement, Denial, and Treatment Progress Among Sex Offenders in Group Therapy.

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Keywords:

outpatient group therapy; male sex offenders; sex crime; treatment progress; denial; engagement

Abstract:

This study investigates the relationship between engagement, denial, and treatment progress among a sample of 61 male sex offenders in outpatient group therapy. Three hypotheses were posed: (1) that denial is inversely related to engagement in group therapy; (2) that denial is inversely related to treatment progress, and (3) that engagement is correlated with treatment progress. Results revealed a strong correlation between engagement in group therapy, measured by the Group Engagement Measure, and sex offender treatment progress, assessed by the Sex Offender Treatment Rating Scale. Denial, measured by the Facets of Sexual Offender Denial Scale, demonstrated a strong inverse relationship to treatment progress. Engagement and denial were also strongly inversely related. Together, engagement and denial explained a significant amount of the variance in treatment progress. The findings provide support for current standards of practice that maintain that admitting to a sex crime is a necessary condition for progress and engagement in treatment. Strategies for increasing engagement and treatment progress, and reducing denial, are discussed.

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Psychometrics of the Group Engagement Measure With Male Sex Offenders.

Authors:

MacGowan, Mark J., Florida International U, School of Social Work, FL, US

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Small Group Behavior

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Keywords:

psychometric properties; Group Engagement Measure; male sex offenders; group treatment

Abstract:

This study examined the psychometric properties of the Group Engagement Measure (GEM) with a purposive sample of 61 adult male sex offenders in long-term, open-ended treatment groups. The GEM was highly internally consistent with a low standard error of measurement. Construct validity consisted of assessing the correlations between the GEM and the Group Attitude Scale, the Sex Offender Treatment Rating Scale, and the Facets of Sexual Offender Denial at the scale and subscale levels. The entire scale was favorably correlated with the

constructs, and the subscales had mostly significant associations, with correlations ranging from mild to strong, depending on the measure or subscale.

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Child sexual abusers' views on treatment: A study of convicted and imprisoned adult male offenders.

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Journal of Child Sexual Abuse: Research, Treatment, & Program Innovations for Victims, Survivors, & Offenders, Vol 18(3), May, 2009. pp. 320-338.

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Keywords:

child sexual abusers; adult male offenders; prison treatment program; recidivism

Abstract:

In spite of an increasing focus on the assessment and treatment of sexual offenders over the past two decades, much debate persists as to the effectiveness of treatment in reducing recidivism. Given the dearth of research on offenders' perspectives in this area and the potential for offenders' views to inform the development of effective treatment, we consider the views of 35 adult male child sexual abusers on the prison treatment program. Focusing on a number of key themes, namely victim empathy, strategies for desistance, group or individual treatment, motivation, and postprogram support. In doing so, the extent to which this work furthers knowledge in this area and future research directions was considered.

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Advances in the treatment of adult incarcerated **sex offenders**.

Authors:

[Mann, Ruth E.](#), HM Prison Service England and Wales, United Kingdom

[Marshall, William L.](#), Rockwood Psychological Services, Canada

Source:

Assessment and treatment of sex offenders: A handbook. Beech, Anthony R. (Ed.); Craig, Leam A. (Ed.); Browne, Kevin D. (Ed.); pp. 329-347. New York, NY, US: John Wiley & Sons Ltd, 2009. xxvii, 582 pp.

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Keywords:

adult sexual **offenders**; incarcerated **sex offenders**; treatment advances; relapse prevention; cognitive distortions; victim empathy; clinical developments

Abstract:

(from the chapter) The purpose of this chapter is to explore how treatment procedures for adult sexual **offenders** have advanced in the last two decades. In particular, this chapter will examine some popular treatment targets for sexual **offenders** such as cognitive distortions,victim empathy and relapse prevention. Have these approaches stood the test of time,or do adjustments need to be made to long-standing treatment models to incorporate the latest research and clinical developments? We will summarize the evidence base for modern treatment procedures and draw conclusions about the current state of the art in terms of content, style and implementation of treatment.

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Treating Sexual Dysfunction in **Sex Offenders**: A Case Example.

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English

sexual dysfunction; treatment; **sex offenders**; comorbidity; sexual health; life satisfaction; quality of life;
sex offense recidivism

Sex offender treatment as a specialized procedure is maturing, and more comprehensive approaches that treat co-morbid patient problems (e.g., mood and anxiety disorders, relationship conflicts, social skills deficits) have emerged. However, little attention has been given to the role of sexual dysfunction in the **assessment** and treatment of **sex offenders**. We propose that: (a) sexual dysfunction is a prevalent co-occurring sexual disorder in **sex offenders**; (b) sexual dysfunction is, by definition, a lack of sexual health, which diminishes overall life satisfaction; and (c) sexual dysfunction can be a contributing factor for some in maintaining offense-related arousal patterns and therefore is a potential contributor to **sex**-offense risk. This article describes the importance of treating **sex** dysfunction in selected cases when it is present among men in **sex offender** treatment, in order to improve the men's quality of life and to deter **sex** offense recidivism. A brief case example of a 45-yr-old man illustrates this benefit. "Bob" had a lengthy history of exhibitionism and was court ordered to **sex-offender** treatment for enacted pedophilia. He also experienced long-standing ED. A clinical decision was made to treat his **sex** dysfunction as part of his comprehensive **sex-offender** treatment.

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Treatment of adult sexual **offenders**: A therapeutic cognitive-behavioural model of intervention.

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Current Approaches, Research, and Techniques. pp. 195-232.

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English

adult **sex offender** treatment; adult **sex offender assessment**; cognitive behavioural therapy; treatment methods; therapist characteristics

Recent research indicates that, of the various forms of treatment available to sexual **offenders**, cognitive-behavioural methods are likely to have the greatest impact in reducing rates of sexual re-offending. Cognitive-behavioural treatment typically targets attitudes that support sexual offending, anger management, victim empathy, deviant sexual arousal, and relapse prevention. More recently, treatment has targeted cognitive processes more generally, management of other emotional states in addition to anger, intimacy deficits, and risk self-management (Marshall, Anderson, & Fernandez, 1999; Yates, Goguen, Nicholaichuk, Williams, & Long, 2000). This article describes the components of cognitive-behavioural treatment with sexual **offenders**, including recent developments, **assessment**, treatment methods, and the importance of therapist characteristics on the therapeutic process and on treatment outcome.

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psychological **assessment**, treatment, and outcome with **sex offenders**.

Authors:

Wood, Raymond M., Sexually Violent Persons Program, Sheridan, IL, US
Grossman, Linda S.
Fichtner, Christopher G.

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Behavioral Sciences & the Law, Vol 18(1), 2000. pp. 23-41.

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psychological **assessment** & treatment & outcome & recidivism, **sex offenders**

The frequency and impact of sexual offenses have led to the recent enactment of sexual "predator" laws. Such laws are intended to reduce sexual violence through treatment and involuntary confinement. 60 yrs ago, similar laws identifying "sexual psychopaths" were enacted and, in many states, eventually repealed for multiple reasons; among those reasons was an inability to demonstrate that treatment had any significant impact on recidivism. That inability forced psychologists to reexamine, among other issues, the population(s) which undergo treatment, the outcomes that are used to measure treatment effectiveness, and the processes that constitute treatment itself. This paper considers those issues through a review of treatment programs based on psychodynamic, behavioral, and cognitive-behavioral theories. Although the evidence is sparse, it is fair to conclude that the latter have been found to be effective. The authors call for dynamic measures, effective treatments, and the resources necessary for both developments.

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