Learning Session 1:
The Assessment of Adult Male Sex Offenders

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Learning Session 1: Assessment of Adult Male Sex Offenders

- Welcome, Introductions & Overview
- Pre-test
- Feature Presentation & Q/A
- Post-test
- Interactive Discussion on Implementation Challenges
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PRE-TEST
The Assessment of Adult Male Sex Offenders

Barbara K Schwartz PhD
Why Assess?

- Any type of treatment plan must be based on a thorough assessment.
- There are two different types of assessments with sex offenders.
  - Treatment planning
  - Risk assessment
Types of Assessments

- Pre-adjudication
- Post-adjudication (but pre-sentencing)
- Civil commitment
- Registration and community notification
- Probation and parole management
Importance of Sex Offender Assessments

- A sex offender assessment can have life changing ramifications.
- It could determine whether
  - A person goes to prison
  - A person’s identity is disseminated to the general public
  - A person is civilly committed
  - These reports may go into records that are accessed decades later to make life and death decisions
Thomas Grisso of the University of Massachusetts Medical Center has conducted workshops regarding forensic report writing for years for the American Academy of Forensic Psychology, and he has provided training on this topic for examiners of the American Board of Forensic Psychology. He has distilled his advice regarding forensic report writing to six principles.
Let the referral question be your guide

- The referral question should guide what information is included in and excluded from the report. Does this information shed any light on the referral question? If the answer is no, then the evaluator can safely eliminate that information.
Report what’s necessary and don’t report what’s not necessary

• This maxim is a corollary to the first maxim. Only put in the report what is necessary to address the referral question.
Sequence and describe the information in a way that makes sense to your reader

The report should have a logical flow. In sex offender evaluation reports, these data can take a number of forms:

- Relevant background from the records; observations during an interview;
- Reports of collateral sources;
- Scores on structured risk assessment scales;
- Responses during psychological testing.

Always keep in mind who will be reading the report.
Separate facts from opinion

- The evaluator should be careful to separate the observations—that is, the data—from the inferences.
- The evaluator should make clear what facts he or she is assuming in conducting the evaluation. At times, the best that one can do is to propose a range of risk that the offender presents, depending upon what facts are assumed.
- The evaluator should realize that he or she is not a finder of fact; that is the role of the court or the appropriate agency, such as the child protection agency.
Explain opinions and conclusions

- One should always remember, from a quote attributed to Grisso, that is explanations, not opinions, that makes one an expert.
- By the time the reader reaches the end of the report, the reader should have a clear sense of
  - What data the evaluator used,
  - What inferences the evaluator drew,
  - How the evaluator drew those inferences, and
  - How those inferences led to the evaluator’s conclusion—a conclusion that should relate directly to the original referral question.
The evaluator’s findings will be more persuasive and the evaluator seen as more credible if he or she directly addresses any alternative interpretations, indicating the evidence for and against the evaluator’s conclusion. In this way the evaluator can demonstrate the reasoning that he or she followed in considering but dismissing alternative interpretations.
Subsections of Assessments

- Identifying information----age, race, reason for assessment
- Description of charges and/or convictions including official description of offenses (police reports, court documents) and offender’s description
- Social history
- Criminal history
- Health and Mental Health History
- Relevant psychological tests
- Risk assessments
- Diagnoses and Conclusions
Psychological Tests

- Clearly distinguish identifying treatment needs from risk.
- Projective tests can be helpful identifying personality characteristics for treatment but do not use to assess risk.
- MMPI, MSI, IQ, Neuropsych screens, screens for depression, AD/HD, Aspergers, OCD, etc.
Approaches to Risk Assessment

- **Actuarial Risk Assessment**---the risk assessment is based totally on one of the standard risk assessments (Static-99R, SORAG, PCL-R, RRASOR, etc). These instruments provide data about large groups but not about individuals. They may state that groups with a certain score have a recidivism rate of X percent but do not identify whether a particular individual is in the recidivating or non-recidivating group.
Some actuarials include a Confidence Interval which is a range of scores within which a single individual’s score probably falls. For example, IQ scores may be reported as 100+/-6 points. This indicates that there is a 95% chance that this individual’s true IQ score falls between 94 and 106.

Hart, Michie and Cook (2007) reported that for an individual score of 6 on the Static-99R, the 95% Confidence Interval for reoffense ranges from a 6% rate of recidivism to a 95%.

Other problems include the necessity of training, exclusionary criteria, the implicit assumption that treatment does not matter and controversy over whether to use a single or multiple assessments. Lehmann (2013) recommends using multiple instruments vs Seto (2005) who recommends using only a single instrument.
Structured Professional Judgment—this approach relies on the clinician to base their assessment on empirically derived risk factors but do not include actuarial estimates of risk.

- The following instruments utilize this method (Sexual Violence Risk-20, Risk for Sexual Violence Protocol and the STABLE 2007 and the ACUTE 2007. The latter two utilize dynamic factors.
- The problem is that these approaches do not include specific estimates of risk and rely heavily on clinical judgment.
- These instruments can be very helpful in developing treatment plans.
Clinical Judgment

- The “seat of the pants” approach
- Older professionals may rely on this based on their years of experience.
- Research has shown that this is accurate less than 50% of the time.
So Which Method To Choose?

- What is the purpose of the evaluation? Treatment or court testimony? The more objective the method, the easier it is to defend in court. However, experts may choose the method and even the specific instrument that best supports their side.
- If you choose to use a particular instrument, what are its statistical qualities?
- Do you have the appropriate training from a qualified trainer?
- Do you have all of the information necessary to complete that instruments?
- Does your client meet the criteria for the use of that instrument?
BASIC RISK ASSESSMENT STATISTICS

Reliability

• Intraclass Correlation Coefficient is a statistic used to assess whether different raters come up with the same score when scoring an instrument.
• Without reliability an instrument can not have validity because one does not know what the true score is.

Validity

• Validity shows whether an instrument is actually measuring what it is suppose to be measuring.
• The following two tests along with others tell us whether SO risk assessments can actually identify recidivists.
BASIC RISK ASSESSMENT STATISTICS

- The Receiver Operating Characteristics Under the Curve (ROC AUC)
  - This is a classification statistic which is used to categorize items or people.
  - In this case, it is a measure of how accurately an actuarial instrument is in classifying a sex offender as a recidivist or a non-recidivist.
  - Or “...the probability that a randomly selected recidivist would have a higher score than a randomly selected non-recidivist”
  - Higher numbers are associated with greater validity: values above .7 with small confidence intervals and statistical significance ($p < .05$ or greater) are considered acceptable.
Cox Regression and Survival Curves

- Cox regression is a nonparametric technique that estimates the effect of multiple explanatory variables (or covariates) on whether a particular event will occur over a period of time.
- It is used to calculate a survival curve which can indicate what variables predict that a sex offender will reoffend considering different individuals get out of prison at different times.
- A California study found that having multiple types of victims was the most predictive with SOs with multiple types of victims being 8x times more likely to reoffend.
SELECTING RISK ASSESSMENT INSTRUMENTS

Static vs Dynamic

- There is a great debate about the usefulness of dynamic factors.
  - Some researchers state that static factors are sufficient (Rice and Harris).
  - These researchers led by Vernon Quinsey PhD also argue that treatment is ineffective.
  - They repeatedly cite their own experience in treating “criminally insane” SO’s with a short course of behavioral treatment.
- However, most researchers including Hansen and Thornton who developed the first static instruments have gone on to develop instruments which measure dynamics factors.
POPULAR ACTUARIALS
Static-99/R

- Male victim
- Age
- Prior sex offense
- Prior nonsexual violence
- Prior sentencing dates

- Unrelated victims
- Stranger victims
- Index nonsexual violence
- Non-contact sex offense
- Single
Static-2002R

- Age at release
- Prior sex offenses
- Juvenile arrest for SO and separate adult conviction
- Rate of sex offending
- Non-contact sex offense
- Male victim
- Young, unrelated victim

- Any unrelated victim
- Any stranger victim
- Prior criminal record
- Prior sentences
- Community supervision violation
- Years free prior to index SO
- Prior non-sexual violence
SRA-FV

- Must be used with the STATIC-99R to identify norms
- Sexual interest in children
- Sexualized violence
- Sexual preoccupation
- Long term intimate emotional relation
- Emotional congruence with children
- Callousness (4 PCLR items)
- Internal grievance thinking
- Poorly managed anger
- Lifestyle impulsivity (5 PCLR items)
- Resistance to rules (5 PCLR items)
- Dysfunctional Coping
STABLE 2007

- Significant social influences
- Capacity for stable relationships
- Emotional ID with children
- Hostility towards women
- General social rejection
- Lack of concern for others
- Impulsive

- Poor problem solving skills
- Negative emotionality
- Sex drive/preoccupation
- Deviant sexual preference
- Co-operation with supervision
Psychopathic Check List-Revised

- Glibness/superficial charm
- Grandiose sense of self-worth
- Pathological lying
- Cunning/manipulative
- Lack of remorse or guilt
- Shallow affect (genuine emotion is short-lived and egocentric)
- Callousness;
- Lack of empathy

- Failure to accept responsibility for his or her own actions
- Impulsiveness
- Irresponsibility
- Juvenile delinquency
- Early behavior problems
- Revocation of conditional release
- Criminal versatility
Additional Items on PCL-R Not Related To Factors

- Promiscuous sexual behavior
- Many short-term (marital) relationships
- Acquired behavioral sociopathy/sociological conditioning (Item 21: a newly identified trait i.e., a person relying on sociological strategies and tricks to deceive)
Level of Service/Case Management Inventory

- Criminal history
- Education/Employment
- Family/Marital
- Leisure/Recreational
- Companions
- Alcohol/Drug Problems
- Antisocial Patterns

- Procriminal Attitude Orientation
- Barriers to Release
- Case Management Plan
- Discharge Summary
- Specific Risk/Needs Factor
- Prison Experience
- Special Responsivity Consideration
AUC Rates for Actuarials

- Static-99/R--------.70-.72
- Static-2002/R-------.69
- SRA-FV--------------.73
- PCL-R----------------.69
- LS/CMI---------------.62
Problems with Actuarials

- While it is important to use actuarials in assessing risks, it is also vital to be aware of the problems associated with their use.
  - These results could be literally a matter of life and death.
  - You may well be called to testify in court and a sophisticated lawyer can destroy your testimony if you are unaware of the problems.
Problems with Actuarials

- Adversarial Alliance—the tendency for forensic evaluators to form opinions in a manner that better supports the party that retains them.
  - Murrie and Boccaccini recruited SO experts and had them review 4 case files and spend 15 minutes with their retaining attorney.
  - In one fourth of the cases there was an average of 6 points difference in the expected directions on the PCL-R.
  - A similar, although milder effect, was found with the Static-99R
Problem with Reliability

- The ICCs (Intraclass Correlation Coefficients) reported in the instrument’s manuals were much higher than those found in field research.
  - Static-99/R--.85 (manual) vs .60-.78 (field)
  - MnSOST-R--.85 (manual) vs .38-.74 (field)
  - PCL-R--.84 (manual) to .47
Recidivism Rates and Static-99/R and Static-2002/R

- When recidivism rates associated with the scores for the above instruments were compared, they varied significantly.
- Depending upon the sample the average sex offender score (Score 2) could be associated with a recidivism rate ranging from 4% to 12% after 5 years and 6% to 22% after 10 years. The same range was true for higher scores.
The authors who developed these instruments concluded that “The current findings indicate that evaluators cannot, in an unqualified way, associate a single reliable recidivism rate with a single score on the Static 99/R or the Static 2002/R.

These tools do much better when ranking sex offenders as to whom is more at risk.

This could be useful in allocating limited resources, eg. Treatment slots or parole/probation attention.
Efforts to Correct This

- Authors first developed three sets of norms---1.) routine, 2.) selected for treatment and 3.) high risk with which to compare the scores.
- Definitions of these categories were confusing and rejected by courts.
- These authors developed the SRA-FV which uses dynamic factors to help define the different groups by a score. However, this is a new approach that is not without its critics.
California Recommendations

- SARATSO (State Authorized Risk Assessment Tool for Sex Offenders) Review Committee dictates that the following tools be utilized.
  - Static-99/R
  - SRA-FV
  - LS/CMI
  - Others may be used as supplements

- It is significant that only those evaluators accredited by the Ca. Sex Offender Management Board can evaluate sex offenders.
Conclusion

- Remember that California limits which agencies and which evaluators can assess sex offenders.
- Evaluators must be fully trained.
- Sex offender evaluations can have life and death consequences.
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QUESTIONS
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POST-TEST
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INTERACTIVE DISCUSSION ON IMPLEMENTATION CHALLENGES
Discussion Questions

1. What are the three biggest hurdles to initiating programming for sex offenders in your agency?

2. What tactics (formal and informal) have you tried in an effort to foster greater will and planning for programming for sex offenders in your agency?
Schedule of Upcoming Learning Sessions

LEARNING SESSION 2:
Clinical Theories in the Treatment of Sex Offenders
Dr. Henry Cellini
March 6, 2014, Thursday, 9:00 AM – 11:00 AM

LEARNING SESSION 3:
Treatment Methods for Adult Sex Offenders
Dr. Carol Ball
April 10, 2014, Thursday, 9:00 AM – 11:00 AM

LEARNING SESSION 4:
Clinical Issues in the Treatment of Adolescents Who Have Engaged in Sexually Abusive Behavior
Dr. Heather Bowlds
May 8, 2014, Thursday, 9:00 AM – 11:00 AM
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THANK YOU