Rolling Sex Offender Treatment Programme UK



Type of intervention



Target group, levels of prevention and sub-groups:



Target population

Men aged 18 years or over with a conviction for any contact sexual offence other than sexual murder, who have a low risk of reconviction according to an RM2000. It is also targeted at men aged 18 years or over with a conviction for offences which relate solely to the downloading, possession, making and/or distribution of indecent images of children and who are low, medium or high risk of reconviction according to the an RM2000.

Group members must have an IQ greater than 80.

Delivery organisation

National Offender Management Service (England and Wales)

Mode and context of delivery

The treatment method is broadly cognitive-behavioural. That is, methods aim to intervene in the pathway to offending by restructuring attitudes that support or permit sexual offending and changing previous dysfunctional behaviours by building new skills and resources. This is a group based treatment approach for nine adult male sexual offenders in custody settings.

The Rolling Sex Offender Treatment Programme (SOTP) is an accredited treatment programme. As such, all providers of the Rolling programme are subject to audit procedures. The purpose of audit is to ensure that the programmes are

being delivered as intended, both operationally and clinically. Operationally, audit ensures that programmes receive appropriate management support and attention, that delivery is not compromised by insufficient resources, that staff are supported and that assessments and other paperwork are completed in an appropriate and timely way. The clinical assurance process ensures that the quality of treatment delivery is in line with expectations. Each programme is rated against two criteria; the quality of delivery of the programme and the quality of treatment management. The QA process involves examination of treatment documents such as "products" (work completed by participants) and logs and reports by programme staff; viewing at least three recordings of sessions and examining the supervisor's records (such as observational notes and supervision records).

Level/Nature of staff expertise required

Sex Offender Treatment Programmes (SOTP) are designed to be delivered by "para professional" staff, for example prison officers, education officers and assistant psychologists. Suitability for this work is competency based, not based on professional qualifications or background. All staff working on sex offender programmes in custody undergo a nationally-prescribed comprehensive selection process followed by residential training during which their understanding, competencies and abilities will be assessed. Staff must first be assessed as suitable to become a facilitator. This will involve completion of various psychometric assessments and interviews with local managers. They then have to pass an assessment. Those who are successful will attend training in the fundamental skills associated with working with sexual offenders and then the Rolling Programme specific training. Staff who pass the training provide treatment under the supervision of a Treatment Manager or designated supervisor.

Intensity/extent of engagement with target group(s)

Each group member will complete between 35 and 45 sessions in total. Each session is approximately 2.5 hours in length. Treatment takes place up to five times per week.

Description of intervention

This programme is delivered in a rolling format. This means that there is no start or end to the group. The group runs continuously and each group member will be at a different stage of treatment. As senior group members complete their treatment pathway and leave the group, new members join the group.

Group members follow their own individual treatment plan which means it is not structured by block, but rather by assignment. Assignments within the Rolling Programme are listed below.

Compulsory Individual Assignments:

- Introduction
- Life Description
- Identifying factors that contributed to your offending
- Risk factors and warning signs
- Protective factors and goals
- Self-Management

Compulsory Group Assignments:

• Victim's diary entry

- Support list
- Coping strategies
- Attachment style

Personal Assignments are individually designed assignments whereby the group member is required to practice new skills relevant to their treatment needs.

Optional Assignments:

- Self Esteem
- Emotional Awareness
- Interpersonal Skills
- Why I am attractive?
- Choosing a partner
- Relationship activities
- Being alone
- Coping with jealousy
- Sexuality and sexual myths

Evaluation

A number of studies have shown that, for offenders classed as low risk of general recidivism, treatment has either only a mild effect in reducing recidivism (Andrews & Bonta, 2006; Andrews & Dowden, 2006), or that, in the case of some intensive programmes, treatment can actually increase recidivism rates (Andrews et al., 1990; Andrews & Dowden, 2006; Lowenkamp, Latessa, & Holsinger, 2006; Bonta, Wallace-Capretta & Ronney, 2000). Research with sexual offenders attending Core SOTP indicated that, in terms of recidivism rates, low risk offenders did not benefit significantly from treatment (Friendship, Mann & Beech, 2003). Barnett, Wakeling and Howard (2010) found that, over a four year follow-up, less than one percent of the low risk sexual offenders in their sample had a proven sexual reoffense. This is similar to the rate of sexual offending found in nonsexual offender samples (Thornton, 2013). As such, it is important that we articulate carefully why a treatment approach for lower risk sexual offenders is available.

Firstly, society expects us to provide treatment to all sexual offenders prior to release (regardless of their risk classification). Further, if no intervention were available, criminal justice staff are likely to take steps to create alternatives, which in the long run, may prove to be more costly and/ or inappropriate. A short, structured programme can enable low risk sexual offenders to work out how they can craft a good life for themselves while dealing with restrictions placed upon them in response to their conviction. Further, regular attendance on a programme has been found to improve compliance with the other terms of orders and licenses, for those under the supervision of the probation service. Finally our experience suggests that once work in treatment begins with some "low risk" offenders, they disclose patterns of behaviour which are more serious than those disclosed during the initial assessment. The low risk programme may therefore, for a small group of offenders, provide a useful way of determining further treatment needs which might need to be met via a longer/ more intensive treatment intervention.

References

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Contact details

Dr Adam Carter, Head of SOTP, 4th Floor, Clive House, 70 Petty France, London SW1H 9EX Email: adam.carter@noms.gsi.gov.uk Telephone: 03000475631