

# Mental Health Issues ...and Other Complications in Sex Offender Treatment

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# Thames Valley Sex Offender Groupwork Programme

- Foundation block – 2 weeks
- Victim empathy block – 8 sessions
- Life skills block – 20 sessions
- Relapse prevention block – 24 sessions

# Aims of Treatment

- Increase disclosure of and insight into sexually deviant behaviour and tendencies
- Identify and modify rationalisations of offending behaviour
- Identify, modify and avert deviant sexual fantasy
- Increase victim empathy
- Increase relapse prevention skills

# Exclusion criteria

- Absolute denial of the offence
- Denial of deviant sexual intent
- Refusal to complete psychometric assessment and/or sign contract of attendance
- Severe substance misuse within last six months
- Unable to speak/understand English without the aid of an interpreter

# Exclusion criteria (contd.)

Identified by assessment by forensic psychologist if deemed necessary

- Mental illness within last six months
- Learning disability (IQ under 80)
- Score of 25+ on Hare Psychopathy Checklist

# Case study

# MAPPA

... as a communication network

- Probation
- Hostel
- Community Mental Health Team
- Forensic Psychiatry - medication
- Forensic Psychology – specialised treatments
- Drugs agencies
- Housing on move-on

# Research 2005

Total referrals to TV-SOGP: 216

Suitable for treatment	121	
No other information	11	
Total unsuitable for treatment	84	38.9%
Total denial	29	34.5%
Denial of deviant sexual intent	11	13.1%
Did not attend for assessment	10	11.9%
No assessment - custody inevitable	9	10.7%
IQ < 80	6	7.1%
Under 21	4	4.7%
English language	4	4.7%
Mental health problems	3	3.6%
Physical health problems	2	2.4%
Substance abuse problems	2	2.4%
SOPo order assessment only	2	2.4%
Other unsuitable	2	2.4%

# Working with denial

# First level of denial

(with apologies to Dante)

- ‘Physical’ denial (Salter, 1988)  
e.g. categorical or absolute denial
- No knowledge of offence/victim whatsoever.

# Second level of denial

- Knowledge of victim
- Admit presence at the time
- But deny any sexual wrongdoing at all
- Claim falsely accused

# Third level of denial

- “Partial deniers” (Marshall, 1999)
- Denial of problematic/abusive sexual behaviour
- Knowledge of victim/admit presence/some behaviour but not deviant and/or sexual intent (e.g. behaviour was accidental)

# Fourth level of denial

- Knowledge of victim
- Admit presence and sexual behaviour
- Deny knowledge that it was wrong (e.g. thought consenting or over-age of consent)

# Fifth level of denial

- Not denying but states unable to remember anything happening due to alcohol/drugs/ black-out/amnesia.
- Saying the victim “would not lie”.

# Minimising admitters (Scully, 1990)

- Admittance of knowing illegal sexual behaviour but blaming victim
- Admittance of knowing illegal sexual behaviour but denying certain acts
- Admittance of knowing illegal sexual behaviour but denying planning
- Admittance of knowing illegal sexual behaviour and planning denying (masturbational) fantasy
- Admittance of future risk of fantasy and relapse
- Full admittance

## Reasons for denial

- Innocent
- Impact on relationship with significant others (partner, family, friends, peer group)
- Fear of negative reprisals e.g. vigilante action, prison bullying

- Protecting self-image
- Anti-establishment/litigious stance
- Maintaining secrecy about offending tendencies due to desire to continue with them

# Research

- Indicates that denial of guilt is not a predictor for future recidivism (Kennedy and Grubin, 1992; Hanson and Bussiere, 1998; Maletsky and Steinhauser, 1998)
- However participation in treatment IS linked to reduced reconviction (Hanson and Bussiere, 1998) and denial means treatment not feasible.

# Suggested Areas of Work

“Sexual Conviction Issues Group”

# Overall approach

- Make clear the intention **not to challenge denial** or require them to discuss the details of the offence they deny
- Identify issues in their lives (lifestyle, behaviours, attitudes, associates) that led them into situations where allegations were made against them.
- The concept of private vs. public denial

# Relationships

- Identify difficulties in adult attachment
- Identify difficulties in loneliness
- Relationship skills
- Relationship types
  - e.g. friendship, parent, intimate

# Consequences of conviction

- Will this lead to entrenched denial/blaming of victim?
- For:
  - Offender
  - Family members
  - Friends
  - Victim
- Identify consequences of further conviction

# Re-appraisal of offending situation

- What was your responsibility in the situation?
- What would you have done differently if you could turn the clock back?
- At what point would you have done things differently?

# Coping styles

- Using personal examples of coping with recent stresses
- Task-focussed coping rather than avoidant or emotional
- Learning new coping styles and skills

# Victim empathy

- Vignettes
- Videos
- Personal survivor accounts
- Identify and discuss long-term and short-term impact of sexual and non-sexual victimisation

# Relapse Prevention

## Further allegations

Recognise that given the high levels of evidence required to get a sexual conviction they must have made significant errors of judgement in order for the case against them to be so strong.

- Identifying risky situations
- Coping mechanisms