

## Short Version

### Section 5: An Overview of Sex Offender Treatment for a Non–Clinical Audience

#### *What to Look for in a Treatment Provider*

10 Minutes



#### **TOPIC: INTRODUCTION**

(1 Minutes)

*Use Slide #1: What to Look for in a Treatment Provider: Learning Objectives*

#### **Learning Objectives**

At the end of this section of the curriculum, participants will be able to:

- Identify basic qualifications of sex offender–specific treatment providers;
- Describe desirable traits of sex offender–specific treatment providers;
- Explain the importance of attitudes and practices supportive of multidisciplinary collaboration in sex offender treatment providers; and
- Identify referral sources to locate sex offender–specific treatment providers.



## **TOPIC: LACK OF STANDARDIZED CERTIFICATION OR OTHER CREDENTIALING IN MOST JURISDICTIONS (5 Minutes)**

### ***Use Slide #2: Lack of Standardization***

**Refer to Handouts:** Copies of the Colorado, Illinois, Texas, Virginia, and Washington standards and requirements are included among the participant materials.

### ***Use Slide #3: What to Look For in the Absence of Defined Standards***

We now have established that many sex offenders can benefit from appropriate treatment. But how do supervision professionals and others identify sex offender treatment providers in order to be able to work effectively with them?

Identifying qualified treatment providers can be a challenging task, in part because there is no standard certification or other universally-accepted credential that ensures necessary qualifications in sex offender treatment providers (see, e.g., O'Connell, Leberg, and Donaldson, 1990; Sinclair, 1998). Some states, including Colorado, Illinois, Texas, Virginia, and Washington, certify or otherwise regulate sex offender treatment providers. In these states, to become certified or licensed as sex offender treatment providers, mental health clinicians must obtain specific academic training, clinical experience, continuing education, and commit to specified ethical standards.

### **What to Look for in the Absence of Standards**

How do you know what to look for in a treatment provider if you are from a state that has no such regulations? Most community-based sex offender treatment providers have graduate degrees in such fields as social work, counseling, and psychology.<sup>1</sup> Some have doctoral degrees, and a few are M.D.'s (psychiatrists). There are not, however, any mainstream degree-granting programs that train students to treat sex offenders. As we've discussed in an earlier section, working with sex offenders typically involves working with individuals who do not want to be treated, at least initially. And many of them are very manipulative. Furthermore, there are specific skills and knowledge that are utilized with these individuals that typically are not used with other types of clients. Graduate school education rarely includes training that is necessary to work with sex offenders. Thus, a degree in psychology or social work is insufficient preparation to work effectively with sex offenders; additional training and supervised experience are required. Experience in working with involuntary clients is particularly important.

If the treatment provider is ineffective, the consequences are potentially quite serious—there may be additional victimization where effective treatment might have reduced the likelihood of that outcome. Thus, training, experience, and ethical practice are of utmost importance in the field of sex offender treatment.

### ***Slide #4 and Slide #5: ATSA Suggests Specialized Training***

### **Helpful Guidance from the Association for the Treatment of Sexual Abusers**

The Association for the Treatment of Sexual Abusers (ATSA) has developed Practice Standards and Guidelines for treatment providers.<sup>2</sup> These Standards indicate that providers should “have education, training and experience in the evaluation, treatment and management of sexual abusers.” They suggest that clinicians should have a relevant graduate degree, and for those who do not, they must have specific training and experience in working with sex offenders and work under the direct supervision of a qualified mental health professional. Further, they stipulate that before providing unsupervised clinical services to sex offenders, treatment providers must have at least 2,000 hours of experience working under the supervision of another skilled provider.

***Use Slide #6: Other ATSA Requirements for Treatment Providers***

More specifically, ATSA suggests that treatment providers complete courses and training, and gain experience in assessment, psychometric and psychophysiological testing, psychopathology, risk assessment, counseling and psychotherapy, cognitive therapy, couples and family therapy, family reunification, pharmacological therapy, relationship and social skills training, relapse prevention, sexual arousal control, social support networks, and victim awareness and empathy.

Sex offender treatment providers are expected to participate in continuing education as well. ATSA requires of its members a minimum of 15 hours of such continuing education annually. In addition, sex offender treatment providers are required to be informed about mandatory reporting requirements as they pertain to information obtained during their work.

***Slide #7 and Slide #8: Ethical Treatment Practice***

**Note:** Alert participants to the ATSA Web site where the Practice Standards and Guidelines and the Code of Ethics are available for purchase (currently \$40 for both documents). The Web site address is [www.atsa.com](http://www.atsa.com).

***Use Slide #9: Sex Offender Treatment Providers as Collaborative Partners***

In order to engage in ethical practice, sex offender treatment providers should adhere to conduct-related requirements, including obtaining informed consent of the individuals being evaluated and treated, maintaining appropriate confidentiality and informing the offenders in their care of the limits of confidentiality, providing for security of others and themselves, taking steps to provide continuity of care for offenders with whom they work, and maintaining appropriate boundaries. In the evaluation of sex offenders, treatment providers must base their assessments on information that is obtained from independent sources.

**Sex Offender Treatment Providers as Collaborative Partners**

As you have learned throughout this training, in order to be effective, sex offender treatment providers must collaborate with other professionals.<sup>3</sup> These other professionals include supervision officers, other treatment providers (such as those treating the offender’s victim(s) and other family members), polygraph examiners, plethysmograph and Abel Assessment evaluators, victim advocates, attorneys, prosecutors and other criminal justice representatives, and others. A willingness on the

part of the treatment provider to fully engage in these collaborative relationships and freely exchange information relevant to the effective treatment and management of the offender is, therefore, another important quality to look for in treatment providers.



## **TOPIC: LOCATING SEX OFFENDER–SPECIFIC TREATMENT PROVIDERS (4 Minutes)**

### ***Use Slide #10: Locating Sex Offender–Specific Treatment Providers***

Some of you might be wondering how to locate qualified and competent sex offender–specific treatment providers in your jurisdiction. If you live in a state where treatment providers are regulated in some way, your task might be quite simple. A list of treatment providers, typically referred to as approved or certified providers, is usually available from your state or local regulatory body (typically a sex offender management task force or council). However, this is likely to be the case in only a minority of states. If you live in a state without a regulatory body, you may have to look further to identify well qualified sex offender–specific treatment providers. There are two national sources of information that might be of help to you.

ATSA  
4900 S.W. Griffith Drive, Suite 274  
Beaverton, OR 97005  
(503) 643–1023  
atsa@atsa.com  
www.atsa.com

Safer Society Foundation  
P.O. Box 340  
Brandon, VT 05733–0340  
(802) 247–3132  
www.safersociety.org

The Association for the Treatment of Sexual Abusers maintains a state–by–state list of all of its members, which numbers well over 2,000 nationally. Most states also have active State Chapters. ATSA can provide you key contact information for its membership in your state.

The Safer Society Foundation is another source of information and is particularly helpful in identifying treatment programs, both outpatient and residential (you’ll recall that Safer Society conducted the national survey we reviewed earlier).

The contact information for both of these organizations is on the slide.

Here are a few other suggestions and ideas about locating sex offender–specific treatment providers and building treatment capacity in your jurisdiction.

- Success in finding and courting potential providers can be enhanced with the appropriate incentives. If there are trained and knowledgeable treatment providers and probation/parole agents in your area, those individuals might offer free training, and ongoing supervision and consultation services, to other providers who are interested in working with this offender population.
- When reaching out to potential treatment providers, probation and parole agencies will want to emphasize the notable goal of preventing sexual abuse and be as reasonable as possible in terms of the number of referrals and payment for

services. That is, it is unlikely that treatment providers will want to work with large numbers of sex offenders for minimal (or no) payment.

- Treatment providers who work in the area of substance abuse and domestic violence often can make a relatively easy transition to working with sex offenders. Many of the treatment principles and approaches are similar, though sex offender–specific training is still entirely necessary.
- You may also want to consult O’Connell’s, Leberg’s, and Donaldson’s book (1990) entitled “Working with Sex Offenders: Guidelines for Therapist Selection.” It provides an excellent description of treatment provider qualifications and attributes.



## **TOPIC: TRAINING SUMMARY**

### ***Use Slide #11: Training Summary***

We have covered lots of ground today. Let's spend a few minutes summing up some of the critical take-away points from our discussions. They are as follows:

- The primary goal of sex offender-specific treatment is the protection of the community.
- The most recent, largest scale, and best designed treatment outcome study to date (Hanson et al., 2002) found that, overall, there is strong evidence that treatment works.
- The four domains of sex offender-specific treatment are: sexual interests, distorted attitudes, interpersonal functioning, and behavior management.
- The most widely accepted form of treatment used around the country is cognitive-behavioral treatment.
- For sex offender-specific treatment providers to be as effective as possible, they must work in close collaboration with other professionals who are involved in the management of these offenders.

## REFERENCES AND RESOURCES

Association for the Treatment of Sexual Abusers (2001). *Association for the Treatment of Sexual Abusers Professional Code of Ethics*. Beaverton, OR.

Association for the Treatment of Sexual Abusers (2001). *Practice Standards and Guidelines for Members of the Association for the Treatment of Sexual Abusers*. Beaverton, OR.

O'Connell, M.A., Leberg, E., & Donaldson, C.R. (1990). *Working with Sex Offenders: Guidelines for Therapist Selection*. Thousand Oaks, CA: Sage Publications.

## NOTES

1. McGrath, Cumming, and Burchard, 2003.
2. Association for the Treatment of Sexual Abusers, 2005.
3. Association for the Treatment of Sexual Abusers, 2005; Carter, Bumby, and Talbot, 2004; Center for Sex Offender Management, 2000; Cumming and McGrath, 2000, 2005; English, et al., 1996, 2003.