THE SEX OFFENDER

OFFENDER EVALUATION AND PROGRAM STRATEGIES

VOLUME VI

Edited by Barbara K. Schwartz, Ph.D.



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To my granddaughter, Beatrice Gray Schwartz, whose joy and innocence those in this field strive to preserve in all children.

Preface

The field of treating sexual offenders is continuing to evolve as more and more is discovered about what works, what doesn't work, and how the species, *Homo sapiens*, actually works. Some of the most exciting research impacting our field is how early trauma actually affects our brains physiologically. This promises to open up a whole new area of therapy. Computer-based treatment ranging from webcam-based group therapy to virtual reality assessment and training techniques is evolving. The next decade promises to hold very exciting possibilities.

However, regressive trends are evident in public policy decisions, which have demonized those who have engaged in inappropriate sexual behavior ranging from those who truly meet the definition of "sexually violent predator" to young sexually abused children who are all being grouped together as threats to public safety.

Our field can develop all of the effective therapeutic modalties possible, but these developments cannot counteract social factors which make it impossible for a sex offender to find a job or housing, much less friends and acceptance back into the community. These individuals may and actually are committing crimes specifically so that they can return to prison where at least their physical survival is more likely.

Sex offender treatment specialists have no choice but to become political activists who attempt to educate the public on the facts related to the sensitive issue of sexual assault. Just as health educators and many of those in the gay and lesbian community fought preconceived notions regarding how the AIDS virus is spread to increase the acceptance of those suffering from this condition, so we too must take the unpopular stance of calming irrational fears of sexual abusers.

Fortunately, the Association for Sexual Abusers has become more proactive in advocating for those policies that will actively promote true public safety. It is hypocritical that the administration that has supported such regressive legislation as the Adam Walsh Act, which would permanently stigmatize children as young as 14 for the rest of their lives, has also eliminated funding for the Center for Sex Offender Management, the division of the Department of Justice dedicated to training jurisdictions on how to effectively deal with this most feared population. Ideally, future administrations will see the wisdom in restoring these funds.

Several years ago the public health approach to managing the problem of sexual abuse was being advocated, particularly by groups such as Stop It Now. Focusing on primary, secondary, and tertiary prevention promised to offer real hope in addressing a problem that costs this country and indeed the world billions in real dollars and more in human suffering. The response needs to be resurrected and advocated.

It is hoped that some of the information contained in this volume will be helpful in these public information efforts and will provide suggestions for understanding and treating this population.

A number of people have contributed to this volume. First I must thank the authors who worked diligently to present the content of this work. My editors at Civic Research Institute, including Deborah J. Launer, Leslie Gwyn, and Lori Jacobs. To my

colleagues in the sex offender treatment field including, but not limited to, Debbie Baker, Carol Ball, and John Bergman, who continue to inspire me, to the Counseling and Psychotherapy Center and the Maine Department of Correction for giving me the opportunity to "follow my bliss," and to the men for the R.U.L.E. Program who continue to inspire me with their courage. I also thank my husband, Ed, my children, Ben and his family, Betsy, and my service/therapy dogs, Thomas and Tembo.

Barbara Schwartz April 30, 2008

About the Authors

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Jill C. Anderson is a licensed clinical psychologist. She is a graduate of Argosy University/Atlanta and has ten years of experience working with children and families. Dr. Anderson specializes in helping children recover from trauma, with particular emphasis on those ages 4–12 who have been sexually abused. Dr. Anderson works as a therapist with Family Relations Program, Project Pathfinder, doing individual, family, and group work with sexually reactive children and adolescents with sexual behavior problems. She also conducts psychosexual evaluations. Dr. Anderson sees similar clients in private practice and serves as a consultant and trainer for therapists working with clients who have experienced trauma.

Lisa Berry-Ellis, L.C.S.W.

Lisa Berry-Ellis graduated from the University of Georgia in 1992 with a bachelor's degree in social work. She completed the advanced standing program, earning an M.S.W. in 1994. She was employed at Families First in Atlanta from 1994 until 1999 in the areas of specialized foster care, adoption, and partnership parenting. Ms. Berry-Ellis began at Project Pathfinder at the Family Relations Program in November 1999, working with sexually reactive children and adolescents with sexual behavior problems. She currently serves as the clinical director for Project Pathfinder.

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Sandra Boutin earned a master's degree in criminology at the Universitè de Montrèal in 1999. She has since worked as a vocational counselor in Los Angeles and as a probation officer for the Correctional Service of Canada. She now works as a counselor in a Crime Victims Assistance Centre in the region of Bas-St-Laurent, Quèbec.

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Mark S. Carich, Ph.D.

Mark Carich is currently employed with the Illinois Department of Corrections at Big Muddy River Correctional Center and on the faculty of the Counseling Department at Lindenwood University in St. Charles, Missouri. He has been with the Illinois Department of Corrections since 1985. At Big Muddy, he has been working with sex offender programs such as the Sexually Dangerous Persons (SDP) Assessment & Treatment Program since 1989 and coordinating the SDP Program since 1990. Dr. Carich received his master's degree in 1981 and his doctorate in 1985, both from St. Louis University. He received his bachelor's degree from Southern Illinois University at Edwardsville in 1979. He did his internship at Texas Tech University from 1984 to 1985 in counseling psychology. Dr. Carich has conducted training both nationally and internationally on topics relating to sex offender assessment and treatment. He has published extensively in the field of psychology assessment and treatment of sex offenders. He has edited three newsletters pertaining to sex offender assessment and treatment. Dr. Carich recently published the following: (1) Adult Sexual Offender Assessment Report (coauthor) (2003, Safer Press); (2) Handbook for Sexual Abuser Assessment and Treatment (coeditor) (2001, Safer Press); and (3) Contemporary Treatment of Adult Male Sex Offenders (coauthor) (2003, Russell House).

Deborah J. Cavanaugh, B.A., M.A., M.H.C.

Deborah Cavanaugh received her bachelor's and master's degrees in clinical psychology from Bridgewater State College. Her first research project involved an examination of the relationship between childhood conduct disorder, attention deficit/hyperactivity disorder, and handedness in adult sex offenders. This study was conducted at the Massachusetts Treatment Center for Sexually Dangerous Persons under the guidance of Dr. Robert Prentky and Dr. Martin Kafka. As a result, Ms. Cavanagh was awarded the first "Theo Seghorn Memorial Scholarship" for "Most Promising Graduate Student" in the field of sexual abusers from the Massachusetts Chapter of the Association for Treatment of Sexual Abusers (MATSA) in 2002. She

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Franca Cortoni received her doctorate in clinical and forensic psychology from Queen's University at Kingston, Ontario. Since 1989, she has worked with and conducted research on male and female offenders in a variety of Canadian and Australian penitentiaries and community settings. In addition, she has provided consultancy and training services in the assessment and treatment of sexual offenders in Canada, Australia, the United States, and England. Her research interests include factors associated with the development of sexual offending, risk assessment, and treatment issues in both male and female sexual offenders. She has made numerous presentations at national and international conferences and published on these topics.

John Douard, J.D., Ph.D.

John Douard is a criminal appellate attorney and adjunct professor of philosophy at Rutgers, the State University of New Jersey. He taught philosophy for fifteen years before attending law school, where he focused on criminal law and mental health law. For three years, he represented men who had served prison terms for committing sex offenses and were civilly committed under the New Jersey Sexually Violent Predator Act. He has published articles on sexually violent predator (person) acts, race and criminal confessions, AIDS and ethics, health care, and the history of technologies for visualizing human bodies in motion.

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Liam Ennis received his doctorate in counseling psychology from the University of Memphis in 2003 and completed his predoctoral training in forensic psychology at Florida State Hospital. He is an assistant clinical professor in the Department of Psychiatry at the University of Alberta and a former member of the Psychotherapy Research and Evaluation Unit at the University of Alberta Hospital. Dr. Ennis conducts evaluations of risk for violent and sexual offending at Alberta Hospital, Edmonton, and through his private practice. Dr. Ennis also serves as a consultant to provincial and federal agencies on issues related to threat assessment and violence risk management.

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Robert Grant is a licensed independent clinical social worker in both Rhode Island and Massachusetts who specializes in the treatment of childhood sexual abuse and juvenile sex offending behaviors. Mr. Grant earned his master's degree in social work from Boston University in 1998. He joined St. Mary's Home for Children in 2000 and is a treatment specialist in the areas of childhood sexual abuse and sexual offending behaviors for the state of Rhode Island. Since that time, Mr. Grant has provided individual and group treatment for children and adolescents who are survivors of sexual abuse, clinical assessments of both victims and offenders, and individual and group treatment for juveniles who have been adjudicated for issues related to sexual offenders.

ing behaviors. In conjunction with his outpatient responsibilities, Mr. Grant is also the program coordinator for the CIS (Children's Intensive Services) program, a community-based treatment program providing intensive mental health services to children and their families.

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Cheryl Harrison is a licensed independent clinical social worker in Rhode Island and Massachusetts. She is a sexual abuse specialist for the state of Rhode Island, working primarily with child victims of sexual abuse and their families. Ms. Harrison received her master's degree in social work from Rhode Island College in 1997 and has provided individual, family, and group therapy to victims of trauma since that time. She joined St. Mary's Home for Children in 2001 as a clinician for the Shepherd Program, an outpatient therapeutic group that specializes in assessment and treatment for victims of sexual abuse, juveniles who have sexually offended, and their families. Since 2005, Ms. Harrison has been the director of the Shepherd Program, which in addition to the sexual abuse specialty interventions offers a Parent Resource Education Program and Children's Intensive Services.

Michaela Kadambi, Ph.D., R.Psych.

Michaela Kadambi received her doctorate in counseling psychology from the University of Alberta in 2003. She has provided counseling and psychotherapy to a wide range of client populations, including sex offenders. Dr. Kadambi is an active researcher who has investigated the impact and rewards of working with sex offenders and other difficult client populations. Her current areas of research interest include how psychotherapy impacts professionals, professional burnout, and resiliency in helping professionals. She is currently a registered psychologist at the University of Alberta and in private practice.

Eliot P. Kaplan, Ph.D., L.C.S.W., CAS

Eliot P. Kaplan received his master's degree insocial work from Rutgers University, and his doctorate in counseling psychology from Temple University. He also has postgraduate training in Gestalt Therapy and is a certified addiction specialist (CAS). Dr. Kaplan specializes in working with defiant and volatile youth, including sex offenders. For over ten years he presented at various national and international conferences on the treatment of youth who are involuntary or mandated, and present oppositional behavior. Dr. Kaplan's success is based on his integration of humor and paradoxical interventions that bypass client resistance and promote "free will" change. Most important, he has solved the theoretical riddle as to the mechanism behind paradox and how it is relevant to other treatment approaches. Currently Dr. Kaplan works as the problem sexual behavior (PSB) psychologist at the Children's Village residential youth facility located in Dobbs Ferry, New York. He is presenter at numerous sex offender conferences and is currently completing a book, *Changing Psychology: The Theory and Practice of Paradoxical Interventions*.

Thomas F. Leversee, L.C.S.W.

Mr. Leversee has more than thirty-three years of clinical and administrative experience in the Colorado Division of Youth Corrections and in private practice. This includes over twenty-six years of experience working with sexually abusive youth. He was on the National Task Force on Juvenile Sexual Offending that wrote *The*

Preliminary Report from the National Task Force on Juvenile Sexual Offending 1988 and the revised report in 1993. He has published the Moving Beyond Sexually Abusive Behavior curriculum through NEARI press, and has published pieces in a national newsletter, a journal, and a book. Mr. Leversee has conducted extensive training and presented at numerous national conferences. He was awarded the National Adolescent Perpetration Network's "Pioneer Award" in 2005 for his "twenty-one years of unique contributions to prevent perpetration of sexual abuse." Mr. Leversee is retiring from his current position as coordinator of sex offense specific services for the Colorado Division of Youth Corrections as of July 2008. He plans on continuing to work in the juvenile sexual offending field, providing clinical work as well as training, consultation, program development, and writing. He will also be an adjunct professor for the Graduate School of Social Work at the University of Denver.

Patrick Lussier, Ph.D.

Patrick Lussier received his doctorate in criminology from the University of Montreal in 2004, followed by postdoctoral studies at the Institute of Criminology at Cambridge University, UK. Dr. Lussier is now an assistant professor at the School of Criminology at Simon Fraser University. He is the co-principal investigator of the Vancouver Longitudinal Study on the Psychosocial Development of Children, which looks at the development of aggression and sexual behavior from birth. He is also the lead investigator of the Chrome pilot project, a quasi-experimental study on the impact of an intensive supervision program for high-risk sex offenders in the community. Dr. Lussier's research interests include life-course developmental criminology, the origins of sexual violence, risk assessment and risk prediction, and the understanding of the unfolding of the criminal activity of violent offenders over the life course. His work has been published in journals such as Criminology, Criminal Justice and Behavior, Journal of Interpersonal Violence, and Sexual Abuse: A Journal of Research and Treatment. Dr. Lussier has presented in various national and international conferences on developmental issues related to interpersonal violence and sexually deviant behaviors as well as the criminal career of sex offenders.

Liam Marshall, M.A.

Mr. Marshall received his master's degree in psychology in 2003 from Queen's University in Kingston, Canada, and is currently completing his doctoral thesis. He has worked directly with sexual offenders in correctional settings for more than twelve years. He has helped develop and been a therapist for Preparatory, Moderate-Intensity, Adapted, Deniers, and Maintenance Sexual Offender Programs, as well as Anger Management and Self-Esteem Programs. Mr. Marshall's current position is co-chair of research and consultant to a facility for seriously mentally ill offenders.

He has trained therapists in the delivery of programming for prison services in seven countries. He is on the editorial board of the *Journal of Sexual Addiction and Compulsivity*, has authored a number of journal articles and book chapters, is a coeditor and coauthor of two books, and has made numerous presentations on a wide range of sexual offender issues.

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Following this he was employed at HMPS HQ where he was involved in ensuring national quality standards for sexual offender treatment. Mr. O'Brien has trained therapists in the delivery of sexual offender programs for prison services across the United Kingdom. He has spoken at a number of national and international conferences on a variety of subjects and has authored and coauthored a number of journal articles in this area. Mr. O'Brien is currently delivering Preparatory, Maintenance, and Deniers programs in Canadian federal institutions.

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Dr. Prentky teaches in the Department of Psychology at Fairleigh Dickinson University and is director of the master's degree program in forensic psychology. He has practiced as a forensic psychologist for the past twenty-five years, and in that capacity assessed or supervised the assessment of over 2,000 sexual offenders. He has been the principal or co-principal investigator on fourteen state and federal grants and served as an ad hoc reviewer for seventeen professional journals. Dr. Prentky chaired

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Joanne Schladale has been working in the field of interpersonal violence since 1981. She has a master's degree in family studies and post-master's certificate in marriage and family therapy. In 1991, as faculty at the University of Louisville, she developed and coordinated the Juvenile Sexual Offender Counselor Certification Program. She continues to teach courses focusing on a collaborative response to stop youth violence and sexual harm. As founder and executive director of Resources for Resolving Violence, Inc., Ms. Schladale provides extensive consultation, program development and evaluation, clinical supervision, staff development, and training focusing on empirically driven assessment and treatment. She is a clinical member, and approved supervisor, of the American Association for Marriage and Family Therapy, and a clinical member of the Association for Treatment of Sexual Abusers. Ms. Schladale has received professional awards and made hundreds of presentations throughout North America and Europe focusing on violence and sexual abuse. She authored *The T.O.P. Workbook for Taming Violence and Sexual Aggression* which was published in June 2002.

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Pamela D. Schultz is an associate professor of communication sudies at Alfred University in Alfred, New York. In addition to journal and newspaper articles focusing on child sexual abuse, sex offenders, and public policy such as Megan's Law, Dr. Schultz is the author of two books: *A Critical Analysis of the Rhetoric of Child Sexual Abuse* (2001) and *Not Monsters: Analyzing the Stories of Child Molesters* (2005).

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Barbara K. Schwartz received her doctorate in psychology/criminology from the University of New Mexico. She has treated sex offenders since 1971 and directed statewide programs in New Mexico, Washington State, Massachusetts, New Jersey, Missouri, and Maine. Dr. Schwartz has also been the clinical consultant to programs for juvenile sex offenders in Connecticut and Massachusetts. She has consulted with over forty states in establishing and evaluating sex offender programs as well as providing training through the National Institute of Corrections and the Center for Sex Offender Management. She was retained by the government of Israel to help establish their national program. She has published numerous peer-reviewed articles and edited eight books, and her works have been published in five languages.

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Geris Serran is the clinical director of Rockwood Psychological Services' Sexual Offender Program at Bath Institution. In addition, her research interests include therapeutic processes, coping strategies, and treatment of sexual offenders. She has coedited several books, authored book chapters and journal articles, and presented at international conferences in these domains.

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Karen Spilman received her master's degree in social work from Southern Illinois University Carbondale in 1997. Mrs. Spilman completed her clinical internship in the child psychiatric unit of St. Mary's Hospital, followed by several years as a legal advocate for sexually abused children. Since 2000, Mrs. Spilman has worked as a therapist in the Sexually Dangerous Persons Program at Big Muddy River Correctional Center in Illinois. In addition to facilitating therapy groups at that facility, Mrs. Spilman is a member of the recovery evaluation team that conducts sociopsychiatric evaluations for the courts and routinely provides expert testimony in the recovery evaluations of civilly committed persons. Mrs. Spilman has coauthored a number of articles, book chapters, and assessments with her colleague, Mark S. Carich, Ph.D.

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Nancy M. Steele received her doctorate in clinical psychology from Ohio University in Athens, Ohio, in 1973. She has developed, administered, and worked in sex offender programs in prison and in the community for thirty years. She started the first program for sex offenders in the Minnesota prisons in 1978. Dr. Steele has served as a consultant for the National Institute of Corrections in over fifteen different states and developed and taught a class at Longmont, Colorado, for corrections administrators for three years. She has testified in court in a number of states as an expert witness in sexual predator hearings, civil commitment cases, and issues involving sentencing and administration of sex offenders programs. Dr. Steele has presented numerous training and workshops around the country for staff in the community and in the prisons working with sex offenders.

Introduction

This volume represents the sixth in a series that actually began in the 1980s with the National Institute of Corrections' initiative to train correctional professionals in the treatment of sex offenders. The efforts to train teams from almost all states was summarized in a volume titled Treating the Incarcerated Male Sex Offender, edited by myself and Dr. Hank Cellini, which was published by the U.S. Department of Justice in 1988. At that time the editors and authors were concerned with educating the public on the extent and consequences of sexual abuse. Perhaps we made our point too well. Beginning with the publication of Volume 1 of The Sex Offender by Civic Research Institute (Schwartz & Cellini, 1995), the country had begun to move toward increasingly repressive control techniques for sex offenders. With each volume those measures have increased and become more and more draconian and less and less based on research or proven efficacy (Schwartz & Cellini, 1997; Schwartz, 1999, 2002, 2005). However, perhaps the public or perhaps the courts are beginning to recognize that efforts to protect the public from sex offenders may be having the opposite effect. The Sex Offender volumes have presented approaches to the treatment and control of sex offenders with proven efficacy. It continues to be my hope that evidence-based approaches will direct public policy.

In September 2007 Human Rights Watch issued a monograph titled "No Easy Answers: Sex Offender Laws in the US." On the cover is a *poignant* picture of a woman holding a photograph of a young boy. This woman is Patty Wetterling. She is holding a picture of her son, Jacob, who disappeared at age 11 in 1989. Patty is a long-term advocate of public policies to prevent the sexual assault of children. Why would she be on the cover of a publication that criticizes current policies, including the recently passed Adam Walsh Act, which includes Jacob's name in its official title? When asked this question, she replied: "People want a silver bullet that will protect their children, (but) there is no silver bullet. There is no simple cure to the very complex problem of sexual violence" (Human Rights Watch, 2007, p. 2) This incredibly courageous mother is willing to attend to the research and base her opinions on that data, rather than what public hysteria dictates. She was also quoted as elaborating on her stance on public notification of sex offenders by stating:

I based my support of broad-based community notification laws on my assumption that sex offenders have the highest recidivism rates of any criminal. But the high recidivism rates I assumed to be true do not exist. It has made me rethink the value of broad-based community notification laws, which operate on the assumption that most sex offenders are high-risk dangers to the community they are released into. (Human Rights Watch, 2007, p. 4)

If only the media and the crafters of public policy could look at what the research tells us in such an open manner.

On the contrary, the impulse has been to proceed with a blind eye. The result is probably to make matters worse—not better. A brief historic overview may give some

context to these misdirected efforts to improve public safety. Laws aimed at protecting the public from sex offenders date back to the 1930s when Michigan passed the first law permitting civil commitment of sex offenders. While a number of states followed suit, only a few, including Minnesota and Washington, actively pursued this option. In 1977 the Group for the Advancement of Psychiatry issued a document denouncing this approach for a number of different reasons and, by 1990, new civil commitments had virtually ceased. However, when a highly dangerous sex offender, Earl Shriner, was released from a Washington prison and kidnapped and castrated a 7-year-old boy, civil commitment was reinstituted in that state and since then eighteen more states have resurrected this process. Along with civil commitment, registration, public notification, and residential restrictions have proliferated across the country.

After the disappearance of their son, Jerry and Patty Wetterling established a foundation in the name of Jacob which was instrumental in the passage of Crimes Against Children and the Sex Offender Registration Act. Efforts to register sex offender had been attempted since the 1940s when California and Arizona passed registration laws. However, no other states emulated them until the Wetterling Act was passed by Congress in 1994 and mandated all states to require sex offenders to register with the police for five years. This legislation permitted but did not mandate that this information be made public. That was mandated by Megan's Law passed after the rape and murder of 7-year-old Megan Nichole Kanka. Since that time states have wrestled with ways to inform the public without creating a vigilante response to all individuals convicted of a sex offense. Unfortuately, this has not always been possible. The first individual in the state of Washington to be publicly identified had his home burned down. In 2006 William Elliott, who was convicted at the age of 19 for having sex with his 15-year-old girl friend, was murdered by a Canadian who found Mr. Elliott and another sex offender's name on the Maine Sex Offender Registry. The assailant killed both individuals and then killed himself.

The cost of the civil commitment is staggering. Shortly after the initial legislation was passed in the 1990s, states found that the expenses connected with housing, treating and legally committing, and retaining "sexually violent predators" far exceeded initial estimates. Minnesota spends four times the amount to detain an individual who is civilly committed than to incarcerate a prisoner (Johnson, 1999). Florida has had a similar experience (Johnson, 1999). When California's statute went into effect in 1996, the state initially budgeted \$10.8 million to administer the program (La Fond, 1998, p. 482). However, after one year the budget had to be increased by 53 percent. This was before the state had to build a whole new facility. These costs do not include numerous legal expenses incurred through lawsuits filed by residents, some of which, such as in Washington State, have involved extremely expensive consent decrees.

The basic problems with civil commitment are many and varied and have been written about extensively in other sources. The governmental departments that have been charged with establishing these programs are not responsible for the decisions of their legislators or of the courts. However, they are the determiners of how these programs operate and of the personnel who staff these institutions. Too often the staff are perceived as more interested in keeping the residents institutionalized than in providing comprehensive treatment or real opportunities for reintegration. Only Arizona has

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released a significant number of its civilly committed population with the support of the facility.

The most recent public policy response to controlling sex offenders has been residency restrictions which are now in place in eighteen states and numerous communities. These laws greatly expanded after 9-year-old Jessica Lunsford was abducted, raped, and murdered by a neighbor who was a convicted child molester. Some jurisdictions have such restrictive laws that sex offenders basically cannot live those communities. Sex offenders in Miami can only live under a freeway bridge or in the Everglades.

The latest national legislation is the Adam Walsh Child Protection and Safety Act, signed into law on July 27, 2006. This draconian document mandates minimum sentences; establishes a national registry, which includes juveniles as young as 14 and is based on crime on conviction as opposed to an empirically based risk assessment; encourages the establishment of civil commitment facilities; and makes funds available for tracking technology but not for treatment or modern supervisory approaches.

Will any of these approaches lower the recidivism rate while protecting the rights of all citizens to live without fear and under equal protection?

Registration and community notification were passed without the benefit of legislative hearings or other opportunities to challenge the basic assumptions of the laws. Establishing a method for police departments to track the whereabouts of sex offenders in their communities is generally considered by all, including sex offenders (in this volume the term "sex offender" is always used to refer to individuals adjudicated for a sex crime or a crime with sexual connotations according to their local jurisdiction) themselves, to be a reasonable public safety precaution. It is primarily a matter of more easily compiling information that is available to the police through other sources. Certainly in the case of Jacob Wetterling had the police been able to immediately identify sex offenders in the local area, it may have aided their investigation. However, public notification is fraught with problems.

There are a variety of approaches which states can take to announcing to the public the presence of a sex offender in their midst. The methods are either "reactive" or "proactive." The first proactive approach is the "self-identification model" which requires offenders (Solomon, Lee, & Batchelder, 2007) to assume the burden of proclaiming to their neighbors their whereabouts. This approach is used in Louisiana where law enforcement officers may require an offender to place a sign in his or her front yard, deliver pamphlets to his or her neighbors, or place a bumper sticker on his or her car. The second method is the "police discretion model" in which local law enforcement can decide whether and how to inform the public of the presence of a sex offender. This method would include the establishment of a computer-based tracking system. The third method is the "public book method" in which citizens can come to the police department and request information. The final method is the "telephone request method," such as the one used in California in which citizens can request information through a 900 number.

Several states have verified a decrease in reported sex offenses since the implementation of their registries, including New Jersey, Minnesota, and Washington. However, all these states also implemented or increased the use of civil commitment at the same time and furthermore these studies did not also account for the general

decrease in sex offenses over the past decade. In addition, a decrease may also indicate that sex offenders are also being reimprisoned for failing to register. Also, although this would certainly be beneficial, the same effect could be obtained through laws regarding failure to register.

Human Rights Watch (2007) found:

An investigation in 10 states led researchers to conclude that registration and community notification did not appear to yield systematic reductions in sex crime rates. In six states, sexual assault rates did not change significantly in the three years after the implementation of community notification and online registering. In three states there were significant reductions in sex crime rates. In one, the incidence of rapes increased. Research in Wisconsin and Iowa also found no statistically significant impact from community notification laws in those states. [footnotes omitted] (n.p.)

Finally, ongoing research in New Jersey suggests that the decline in sex crimes against children began several years before a community notification law went into effect in the state in 1994 (Human Rights Watch, 2007, p. 60).

While the efficacy of public notification is certainly questionable, the negative effects are clearly documented. Research by Jill Levenson (2006) indicates that one-third to one-half of sex offenders reported dire events such as loss of home or job or serious damage to property, with 16 percent reporting physical assaults. Nineteen percent reported negative consequences to family members including their victims. Two have been murdered, including the aforementioned 19-year-old boy who had sex with his 15-year-old girlfriend.

Law enforcement officials have been quite vocal in pointing out that public notification and residency restrictions have caused sex offenders to go underground. More and more sex offenders are demanding trials rather than accepting plea bargains. Thus fewer victims are inclined to report. One of the significant benefits of Washington State's Special Sex Offender Sentencing Act, which allowed up to 40 percent of individuals convicted of sex offenses to defer sentencing based on their agreement to complete treatment, was that it encouraged the reporting of these crimes. This approach was strongly supported by victim groups.

At least twenty states and hundreds of municipalities have passed residency restrictions which typically forbid sex offenders from living within 2,000 feet of a school, park, day-care center, and so on. However, some of these jurisdictions have included school bus stops which virtually eliminates residential neighborhoods. Officials from states such as Iowa, California, Oklahoma, and Georgia have openly criticized their laws, pointing out that they have lost touch with many of the sex offenders formerly on their registries.

Is it not patently apparent that a sex offender who has a job, who is living in a stable environment with an educated support system is less dangerous than one who is homeless, unemployed, lonely, and desperate for life's basics? Are these public policies driving these individuals to commit more crimes in order to come back to prison where at least they are fed and have a warm bed?

The Adam Walsh Act will only aggravate the negative consequences of these poorly thought out policies. It will seriously compromise the future of thousands of Introduction xxi

children who have in many cases responded to their own abuse by abusing others but may have little likelihood of reoffending. Its mandatory sentencing and encouragement of civil commitment will cost taxpayers millions of dollars. This law is basically targeted at the stranger who kidnaps, rapes, and murders children, a highly unlikely event. A November 2006 Department of Justice report indicates that there is an average of less than sixty victims a year of this type of crime. Of course, every one of those lives was precious. However, so are the lives of the children as young as 7 who do offend against their peers, often in response to their own victimization, and who will be on sex offender registries for the rest of their life.

However, there is some evidence that the tide is turning. The Maine Supreme Court has ruled that retrospectively placing sex offenders on the state's registry may be punitive. Federal court judge Gerard Lynch recently instructed New York State that it could not retain individuals in its civil commitment facility while the individuals were awaiting commitment proceedings. The Georgia Supreme Court has just overturned the state's residency restrictions. Connecticut is considering a \$10 million bill to provide housing to sex offenders. The media is beginning to question the wisdom of presenting all sex offenders as if they are equally dangerous and painting them with the same broad brush.

There are alternatives. Such approaches as treatment and the use of the containment model have been extensively discussed in preceding volumes of this work. Approaches which turn to a totally different paradigm may hold much more promise for healing the victim, the offender, and the community. Based on the traditions of indigenous peoples for dealing with conflicts within their communities, restorative justice offers a variety of methods which could have much more positive long-term results. For example, in Canada, Circles of Support and Accountability have offered friendship and supervision to sex offenders, which has resulted in a significant reduction in recidivism.

Approaches aimed at healing the victim, the offender, and the community are reflected in the restorative justice model. Small-scale approaches are being tried throughout the country. A college in Arizona initiated an approach to the problem of date rape on campus by allowing the victim to chose a mediation in which the offender can apologize to the victim, make restitution and agree to pursue treatment. The victim is saved from the degrading experience of the trial with a defense attorney attacking his or her credibility. The offender is offered a chance to make restitution directly to a victim as well as being offered a chance to make significant changes through treatment. In addition, the community is not only saved the cost of incarceration but also has a chance to salvage a potentially productive member of society.

Currently the rate of sexual abuse is decreasing. It has been decreasing since prior to the enactment of a number of the aforementioned public policies. Utilizing a public health approach with networking between professionals to provide appropriate supervision and control has offered hope that most sex offenders can be effectively managed without incurring the costs in human suffering and in public funds that expensive and ineffective punitive tactics expend.

The chapters in this volume have been selected because they explore topics of either theoretical or practical interest to the professional working with individuals who have committed sexually inappropriate acts as well as their families. They represent a heterogeneous approach to treatment ranging from basic cognitive-behavioral

approaches to the application of the spiritual practices of indigenous peoples. While evidence-based practice (EBP) is "all the rage," every such practice was at one time an idea in the mind of a practitioner and then an experiment. The pioneers are not limited by EBP, which may limit creativity. These volumes contain and will continue to present the ideas that should be evaluated and may become the EBPs of the future. It has now become axiomatic to state that only cognitive-behavioral treatments (CBT) should be used with sex offenders. It should be pointed out that while most sex offender programs have some aspects in common, very few are duplicates. Communitybased groups lasting for ninety minutes one day a week bear little resemblance to therapeutic communities in prisons. Juvenile programs should not resemble adult programs and programs for females should be quite distinct from their counterparts for males. Even CBT programs can be almost unrecognizable when compared with each other depending on the amount of time available for the program, the talents of the therapists, and the flexibility of the setting. I have run six prison-based statewide programs for departments of corrections. Each treated incarcerated adult male sex offenders incorporating CBT techniques, yet each was unique. Therefore, when evaluators declare that CBT is the only way to treat sex offenders, their statements are not based on any comparative studies or standardized designs and certainly do not account for adjunct treatments which may be offered within such programs.

Sexual abuse is a significant problem. It directly impacts a significant proportion of the population and indirectly impacts millions more each year. Methods have been developed to deal with the adults and, yes, the children who perpetrate this abuse while enhancing their lives as well. However, the tide of public opinion and political bias threatens to make the implementation of these approaches impossible. Agendas based on hate and revenge do not advance what must be the overriding goal: *no more victims*.

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