

INTERNATIONAL GOOD PRACTICES IN THE TREATMENT OF PEOPLE CONVICTED OF A SEXUAL OFFENCE ("SEXUAL OFFENDERS") OUTSIDE PRISON

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WHO AM I?



Supporting Professionals
to Prevent Sexual Abuse



HM Prison &
Probation Service

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE



ATSA
MAKING SOCIETY SAFER[®]



European
Commission



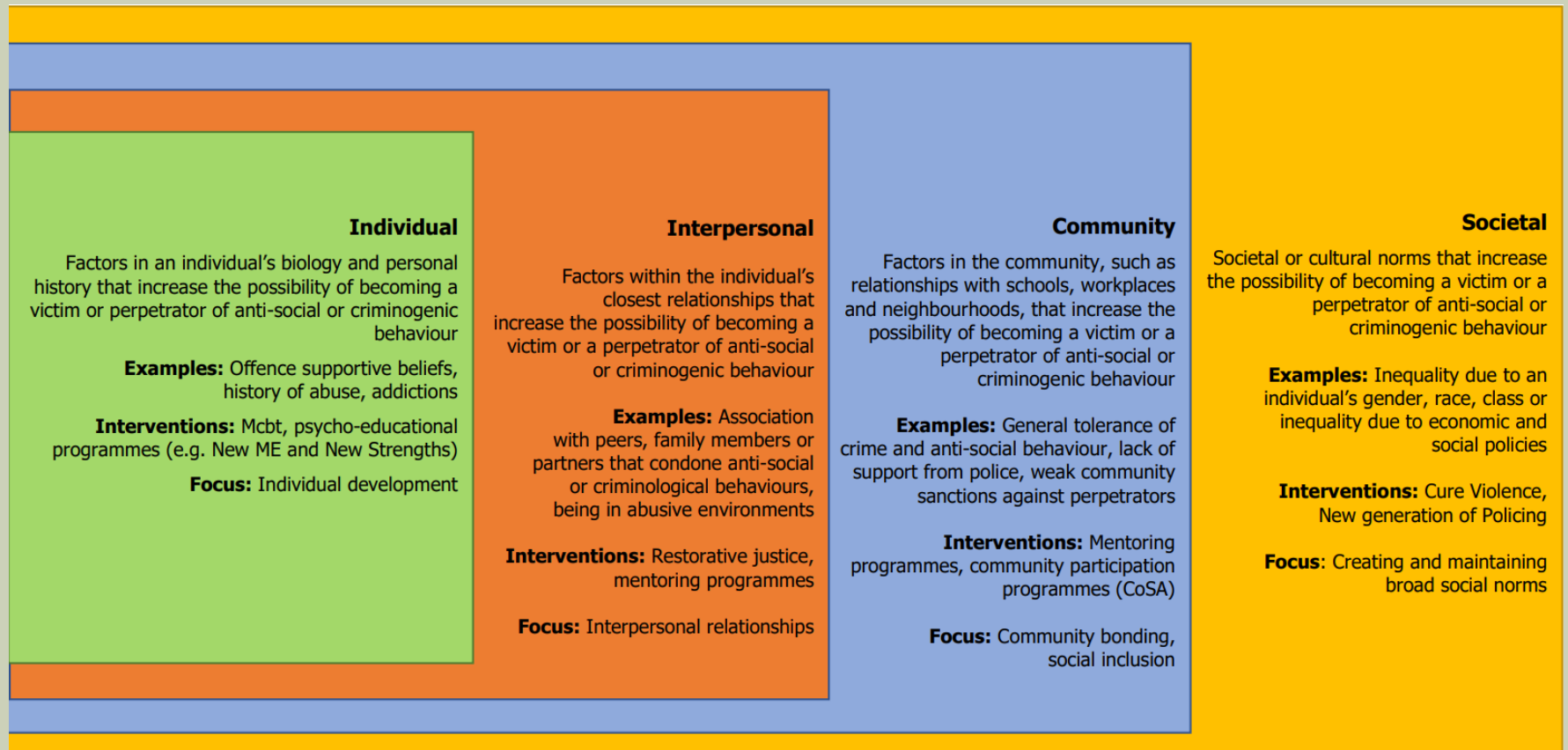
Confederation of European
Probation

CONTENTS

- The causes of and responses to sexual abuse
- Managing risk in the community
- Challenges of developing realistic policy and practice
- Moving forward

THE CAUSES OF AND RESPONSES TO SEXUAL ABUSE

SOCIO-ECOLOGY MODEL



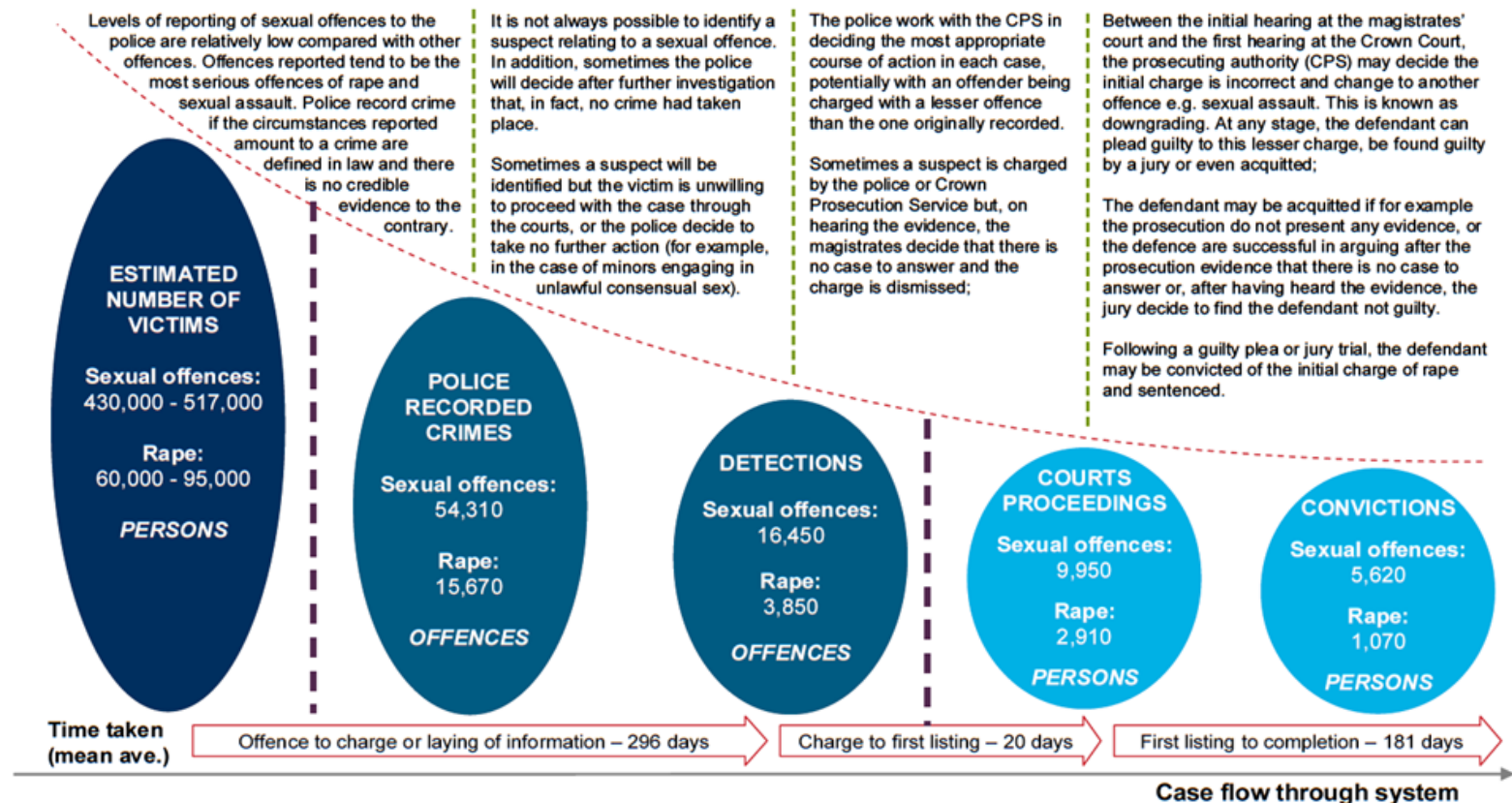
WHAT IS SEXUAL OFFENDING?

- Understanding sexual behaviour (Helgott, 2008)
 - Normal sexuality
 - Sexual deviance
 - Sexual disorder
 - Sexual Dysfunctions (Organism disorders, sexual pain disorders, etc)
 - Paraphilias (Paedophilia, Exhibitionism, etc)
 - Sexual crime
 - Rape
 - Child sexual assault
 - Sexual homicide
- The linkages:
 - Between sexual disorders and sex crimes?
 - Certain paraphilias are not sexual crimes where as some are?
 - Pornography: viewing and doing?

REPORTING AND RECORDING

Figure 1.1 – Flow of sexual offence cases from victimisation to conviction (figures displayed are 3 year averages)

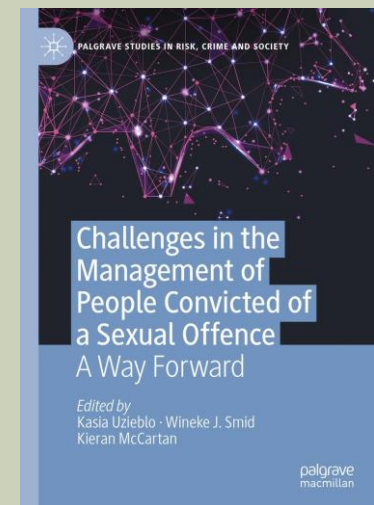
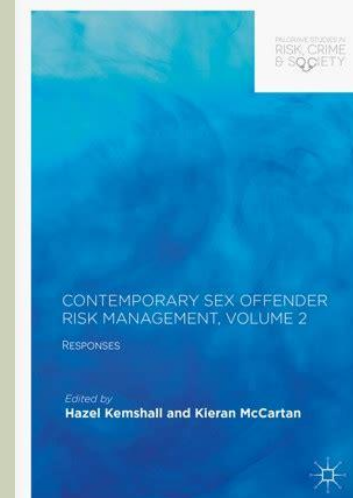
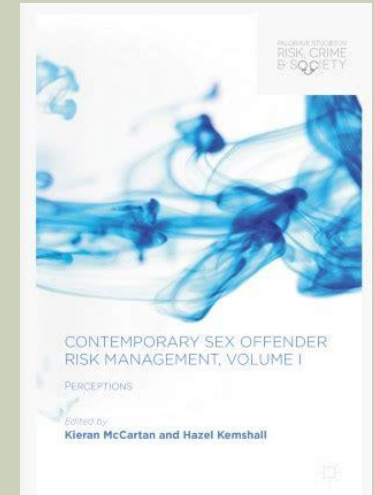
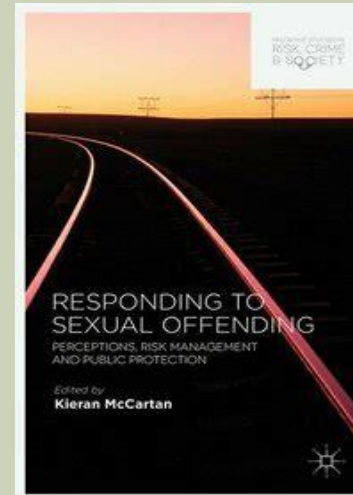
Not presented to scale. Victims and offenders may not relate to the same cases.



(ministry of Justice, Home Office and Office for National Statistics 2013)

CHARACTERISTICS

- Age
- Gender
- Ethnic minority
- Mental Health
- Emotional congruence
- Attachment
- Learning Disability



INDIVIDUALS THAT COMMIT SEXUAL ABUSE ONLINE

- Online and contact child sex offenders (Babchishin et al., 2010 and 2015).
 - offenders who committed contact sex offences were more likely to have access to children than those with only child pornography offences;
 - sex offenders against children and mixed offenders scored higher on indicators of antisociality than online offenders;
 - online offenders were more likely to have psychological barriers to sexual offending than sex offenders against children and mixed offenders (e.g., greater victim empathy).
 - offenders who restricted their offending behaviour to online child pornography offences were different from mixed offenders and offline sex offenders against children, and that mixed offenders were a particularly high risk group.
 - *contact-driven* and *fantasy-driven* respectively (Merdian et al., 2013)
- Existing knowledge about CSOs cannot just be transferred onto CSEM users but will need to be explored specifically for this offender group

INDIVIDUALS THAT COMMIT SEXUAL ABUSE ONLINE

Briggs et al., 2011; Merdian et al., 2015

CHILD SEXUAL EXPLOITATION MATERIAL (CSEM) OFFENDERS

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graph TD; A[CHILD SEXUAL EXPLOITATION MATERIAL (CSEM) OFFENDERS] --> B[FANTASY-DRIVEN USERS]; A --> C[CONTACT-DRIVEN USERS];
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FANTASY-DRIVEN USERS

- Offending is confined to the online environment
- Function: Explore sexual fantasies, or financial benefits of trading
- Low risk of “cross-over”

CONTACT-DRIVEN USERS

- Motivated by a desire for contact offending
- Function: Grooming of potential victims, or as a substitute
- Higher risk of “cross-over”

CHARACTERISTICS OF PEOPLE WHO COMMIT SEXUAL ABUSE

- People who commit sexual abuse are quite diverse, although there are some character traits and lifestyle variables that many offenders have in common (see Hanson, Harris, Scott, & Helmus, 2007; Hanson & Morton-Bourgon, 2005, Harrison, McCartan & Manning, 2010)
- Although we likely greatly underestimate the numbers of females engaging in sexual abuse, this is pretty clearly much more of a “male” problem.

AETIOLOGY

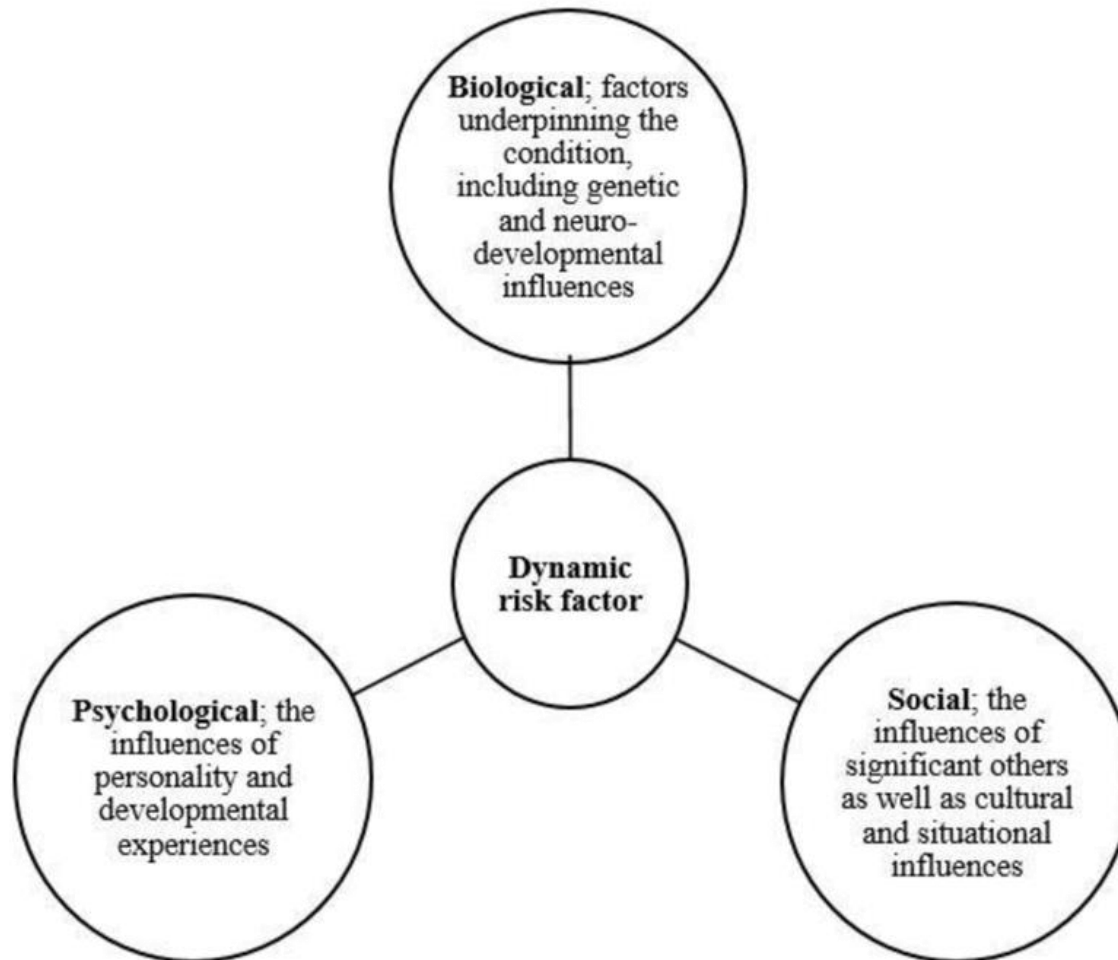
- 95% of sex offences are committed by “first time” offenders (Sandler et al, 2008)
- People who commit sexual abuse are quite diverse, although there are some character traits and lifestyle variables that many offenders have in common (see Hanson, Harris, Scott, & Helmus, 2007; Hanson & Morton-Bourgon, 2005, Harrison, McCartan & Manning, 2010)
- Victims of abuse? (Jespersen, Lalumière, and Seto, 2009).
- Sexual interest in children is not the only motivating factor why people sexually abuse children. There seems to be an association between formative life experiences and motivations (Sullivan & Sheehan, 2016).

THE AETIOLOGY OF OFFENDING BEHAVIOUR

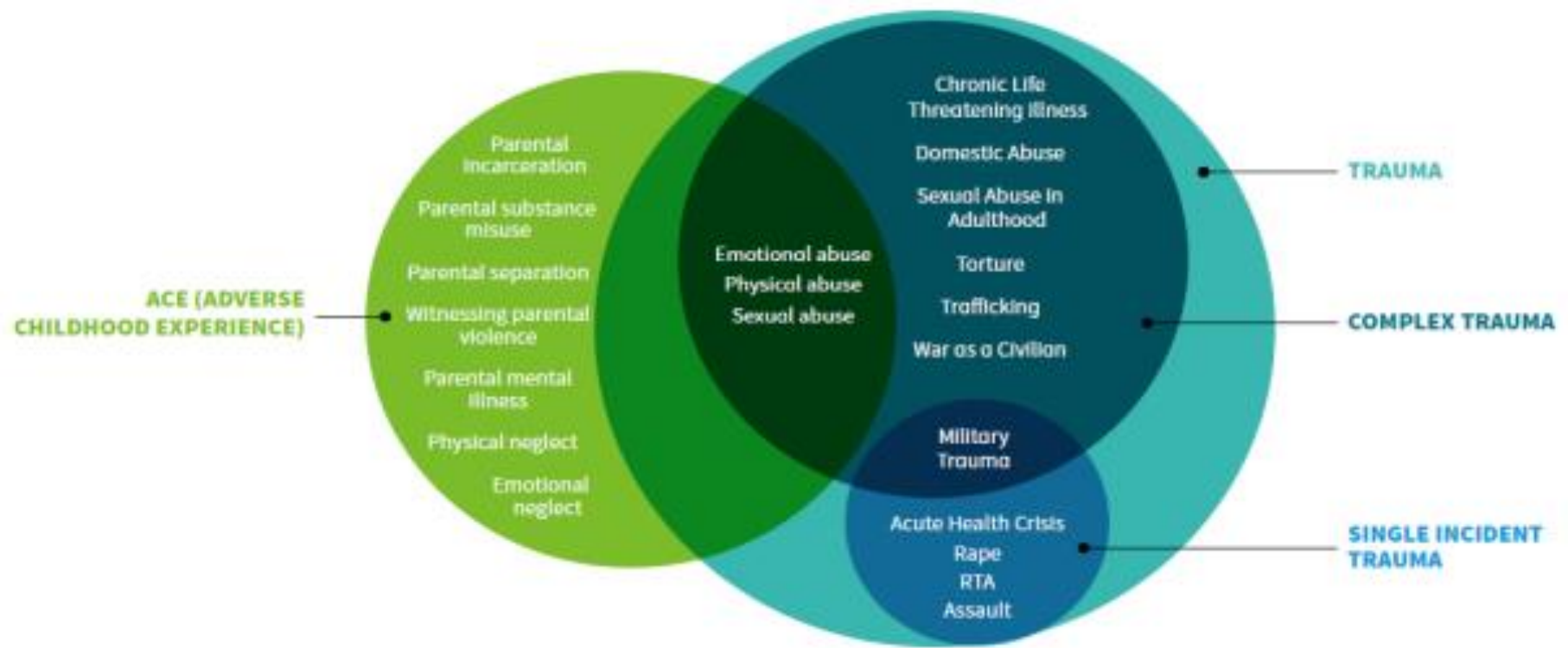
- People who commit crime are quite diverse, although there are some character traits and lifestyle variables that many offenders have in common
- Research and existing good practice also demonstrates The importance of risk and protective factors (Farrington, Loeber and Ttofi, 2014; Sapona et al., 2015).
 - **Risk factors** (i.e., increase the likelihood of committing an offence);
 - **Protective factors** (i.e., reduce the likelihood of committing an offence).

INTELLIGENCE	IMPULSIVITY
PERSONALITY	SOCIALIZATION
MAJOR LIFE EVENTS	HEALTH
SOCIO-ECONOMIC STAUS	CHILDHOOD DEVELOPMENT

BIOPSYCHOSOCIAL APPROACH



ACE & TRAUMA



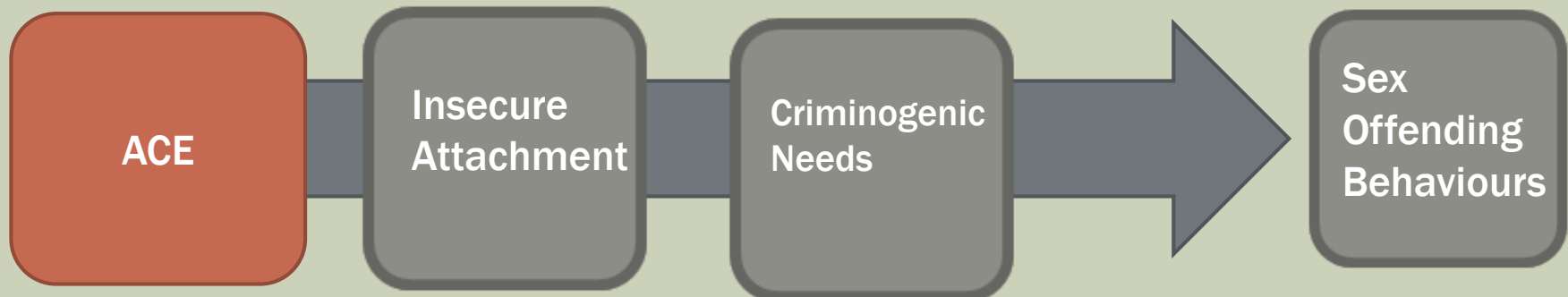
ACE'S & TRAUMA IN ADULTS WHO COMMIT SEXUAL OFFENCES

- People who commit sexual offences have been shown to have particularly extensive ACEs and past trauma (Drury, Heinrichs, Elbert, Tahja, DeLisi, & Caropreso, 2017).
- The prevalence of the ACE of sexual abuse among people who have committed a sexual offence has been estimated to be 15 times higher compared to those in the general population (Cohen et al., 2002).
- Males and females convicted of a sexual offence have significantly higher ACE scores than individuals in the general population (Levenson et al., 2014; Levenson, Willis, & Prescott, 2015; Reavis, Looman, Franco, & Rojas, 2013; Weeks & Widom, 1998).
- The prevalence of adverse childhood experiences is higher for females convicted of a sexual offence than for nonoffending women (Gannon, Rose, & Ward, 2008; Levenson et al., 2015; Turner, Miller, & Henderson, 2008; Wijkman, Bijleveld, & Hendriks, 2010).

ATTACHMENT?

Grady, Levenson, & Bolder (2016)

maltreatment and other adverse experiences disrupt children's socioemotional development (e.g., empathy and self-regulation) and their understandings of themselves (i.e., attachment formation), which then puts them at risk for later relational difficulties and possibly sexual offending.



PSYCHOLOGICAL RISK FACTORS FOR SEXUAL RECIDIVISM

Empirically supported risk factors	Promising risk factors	Not risk factors
<ul style="list-style-type: none">Sexual preoccupationAny deviant sexual interestOffence supportive attitudesEmotional congruence with childrenLack of emotionally intimate relationships with adultsLifestyle instabilityGeneral self-regulation problemsPoor cognitive problem solvingResistance to rules and supervisionGrievance/hostilityNegative social influences	<ul style="list-style-type: none">Hostility toward womenMachiavellianismCallousnessDysfunctional coping	<ul style="list-style-type: none">DepressionPoor social skillsPoor victim empathyLack of motivation for treatment at intake

Too much??

Offence Responsibility
&/or victim empathy

Need more?

Sexual self-regulation; sexual interests; offence supportive attitudes; impulsivity; problem solving; coping; Grievance, hostility, callousness; social support; intimacy support; activities

TREATMENT & MANAGEMENT IN THE UK



Impact evaluation of the prison-based Core Sex Offender Treatment Programme

Aidan Mews, Laura Di Bella and Mark Purver
Ministry of Justice

Ministry of Justice Analytical Series
2017

- Removed existing SOTP and introduced 2 new programs.
- **Kaizen** is based upon Risk, Need and Responsivity; multidimensional views of needs and interventions to be holistic, therefore incorporating biological, psychological and social aspects; strengths based approaches; desistance; and adaptive, appropriate and easy to engage with approaches to learning.
- **Horizon** is based upon criminogenic needs and the recognition that sex offenders and non-sex offenders are similar and therefore addresses poor problem solving skills, poor self-regulation and relationship problems.
- Challenges, thoughts and concerns...
 - Both strengths based
 - Build on SOTP
 - Not aimed at low risk individuals
 - Capacity for “Deniers”/”individuals who are maintain their innocence”
 - Evidence informed not evidence based....no pilot, no research evidence
- Teresa Gannon Meta-Analysis

RISK/REOFFENDING

- Majority of people convicted of a sexual offence are unknown to the system at time of arrest for sexual offences
- 70% of sexual offenders are at low to low-moderate risk to reoffend, while approximately 10% are at high risk to reoffend (Phenix et al., 2012).
- If a sexual offender is going to reoffend sexually, he is most likely to do so within the first five years post-release (Hanson et al., 2016; Helmus, 2009).
- The findings of Hanson et al. are also clear that the longer someone remains offense-free in the community, the more likely it is that they will continue to be successful. Overall, these trends towards desistence appear most pronounced with high risk populations.

RE-OFFENDING

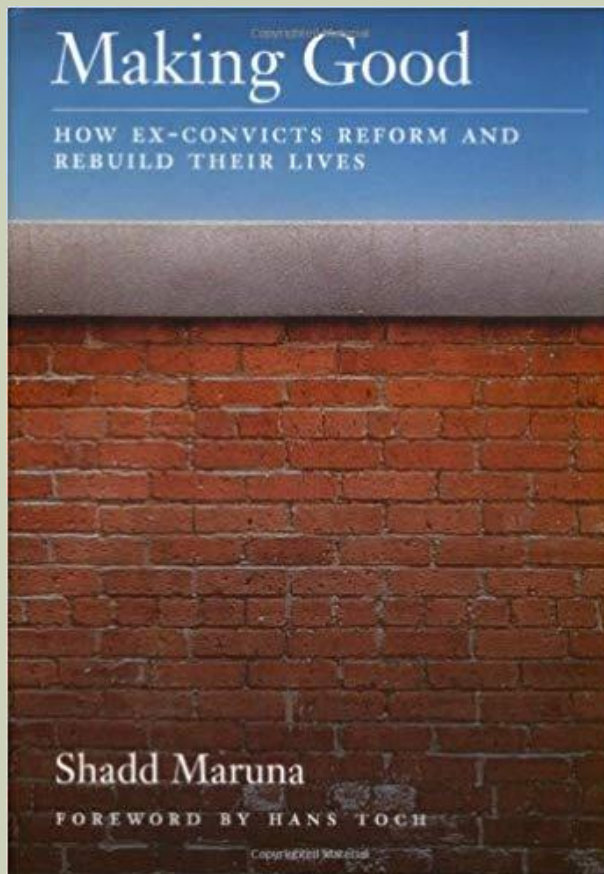
- Recidivism base rates are unstable over time and across jurisdictions, with recent research of adult sexual recidivism rates have demonstrated that sexual recidivism rates appear to have dropped dramatically in recent decades (Duwe, 2014; Helmus, 2009; Wisconsin Department of Corrections, 2015).
- Approximately 70% of sexual offenders are at low to low-moderate risk to reoffend, while approximately 10% are at high risk to reoffend (Phenix et al., 2012).
- Research on the recidivism rates of sexual offenders indicates that they have one of the lowest recidivism rates of any offending population (Levenson, Brannon, Fortney, & Baker, 2007), although that is contested by some authors (Bierie, 2015) and the fear of reoffending, especially by high risk sex offenders, is what drives risk management and the sex offenders register (Brierie, 2014; Thomas, 2010).

DESISTENCE

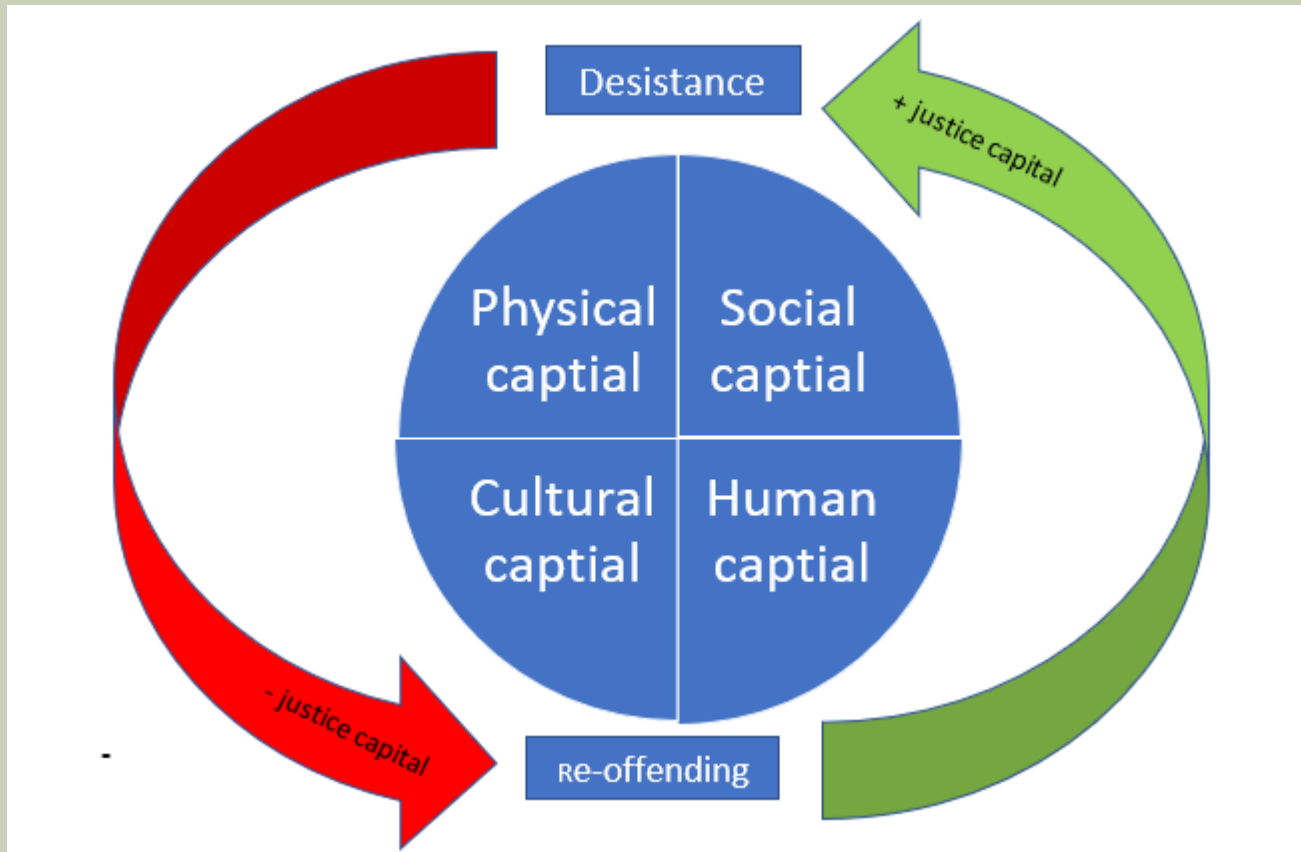
- Research indicates that the large proportion of sexual offenders stop offending (Farrall & Calverley, 2006; Göbbels, Ward, & Willis, 2012; Hanson, Harris, Helmus, & Thornton, 2014; Harris, 2014; Harris & Cudmore, 2015; Laws & Ward, 2011).
- Evidence indicates that offenders desist because of a multiple of explanations including
 - individual (e.g., age, motivations, aspirations, self-perceptions and self-efficacy),
 - relational (e.g., relationships, marriage, parenthood and social as well as faith-based groups) and
 - structural (e.g., housing, finances, employment) (Weaver and Barry, 2014).
 - these factors interact differently for each offender and there is no one single explanation of desistence that encompasses all offenders (Maruna, 2001; Laws & Ward, 2011; Weaver and Barry, 2014).
- Desistence from sexual offending incorporates all of these factors (Laws & Ward, 2011; Weaver and Barry, 2014; Harris, forthcoming) and is supported, in part, through
 - treatment (Risk Need Responsivity; Good Lives Model; Sex Offender Treatment Programme),
 - social support (Circles of Support and Accountability) and
 - risk management organizations (MAPPA, Probation).

TREATMENT, DESISTENCE & MANAGEMENT

Strengths based approaches, recovery capital, the service use voice & Desistance

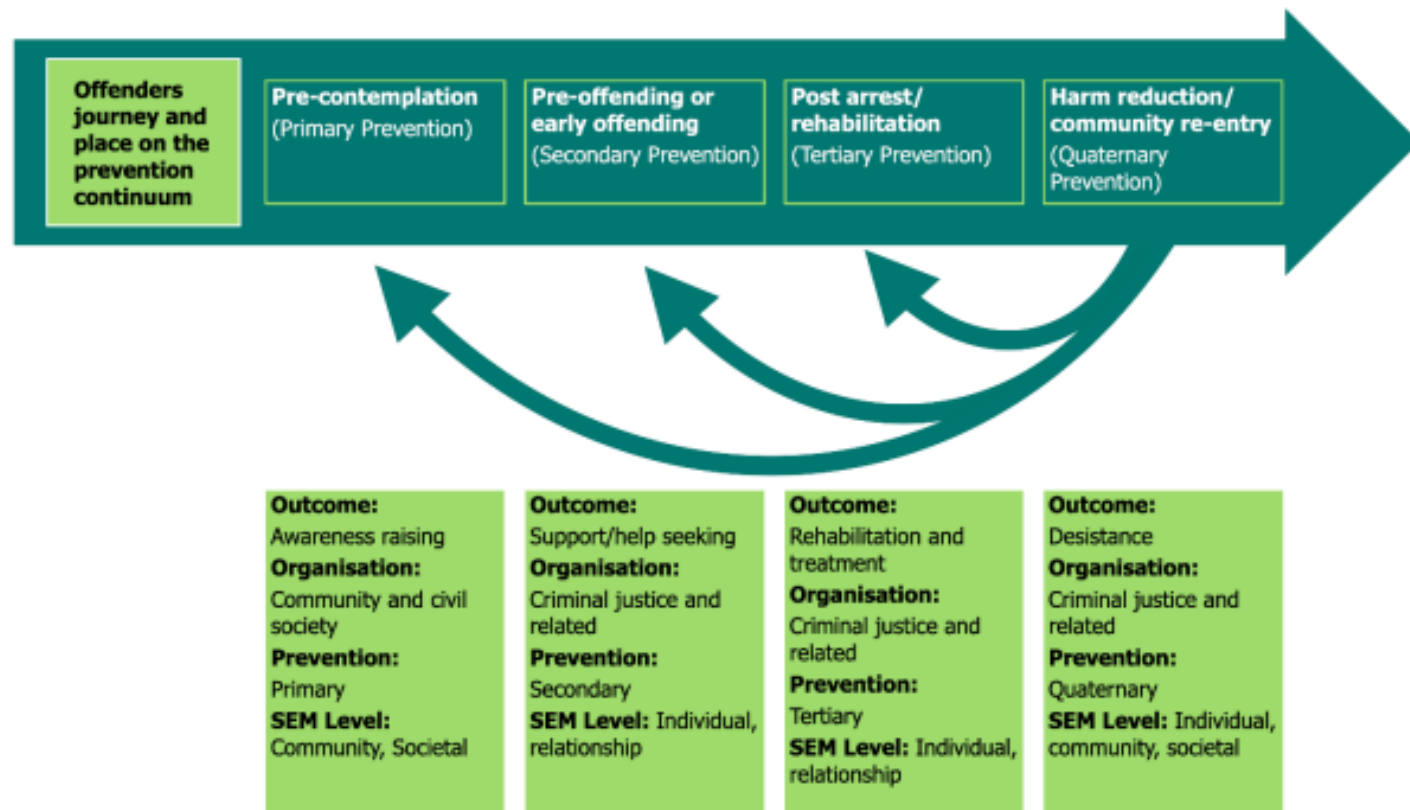


TREATMENT, DESISTENCE, HARM REDUCTION & RECOVERY CAPITAL



SERVICE USER VOICE, DESISTENCE AND PREVENTION

Figure 3: Continuum of sexual offending prevention (McCartan and Kemshall, 2021)



MANAGING RISK IN THE COMMUNITY

THE CURRENT NARRATIVE ON RISK MANAGEMENT

- The ever increasing sex offender population places additional pressure on existing risk management services (i.e., Police, Probation, Prison, etc.) already under financial, political and practical strain.
- Such strain ultimately means that the management and treatment of people who have been convicted of sexual offences becomes about bureaucracy, cost saving, risk aversion and an audit culture rather than innovation and adaption.
- Challenges of balancing public protection, risk management and community integration.
- How can we think outside of the box?

WHAT IS RISK & DANGEROUSNESS?

- Crime and risk have become intertwined in contemporary discourses, policy and practice , meaning that crime control is based upon risk, risk management and directly tied to the proliferation of the 'audit society' (Kemshall, 2006)
- Difference between:
 - **Risk** – how likely it is that an offender will reoffend.
 - **Dangerousness** – level of danger/adverse outcomes of this offending to the victim of said crime



The level of serious harm is defined by the likelihood of it happening:

Low: current evidence does not indicate a likelihood of causing serious harm

Medium: there are identifiable indicators of serious harm. The offender has the potential to cause such harm in the right circumstances.

High: there are identifiable indicators of serious harm. The potential event could happen at any time and the impact would be serious

Very high: there is an imminent risk of serious harm. The potential event is more likely than not to happen as soon as the opportunity arises and the impact would be serious. 'Opportunity' can include the removal or overcoming of controls, and changes in circumstance

HIGH-RISK OF HARM ASSESSMENT TOOLS

Risk Matrix 2000

Sexual and violent offending conducted by sexual offenders.

Based on static risk factors (statistical probability) of previous criminal behaviour for example:

- Convictions of physical and/or sexual assault
- Child abuse
- Domestic abuse
- Intimate relationships
- Escalation in the severity or frequency of violence

ARMS (Active risk management system)

Considers the dynamic risk factors of sexual and violent offending conducted by sexual offenders, including:

- Dishonesty/substance misuse/mental health
- Hostility and aggression
- Impulsiveness
- Distorted sexual beliefs (e.g. sexual entitlement)
- Preoccupation with sex or 'abnormal' sexual preferences
- Distorted attitudes

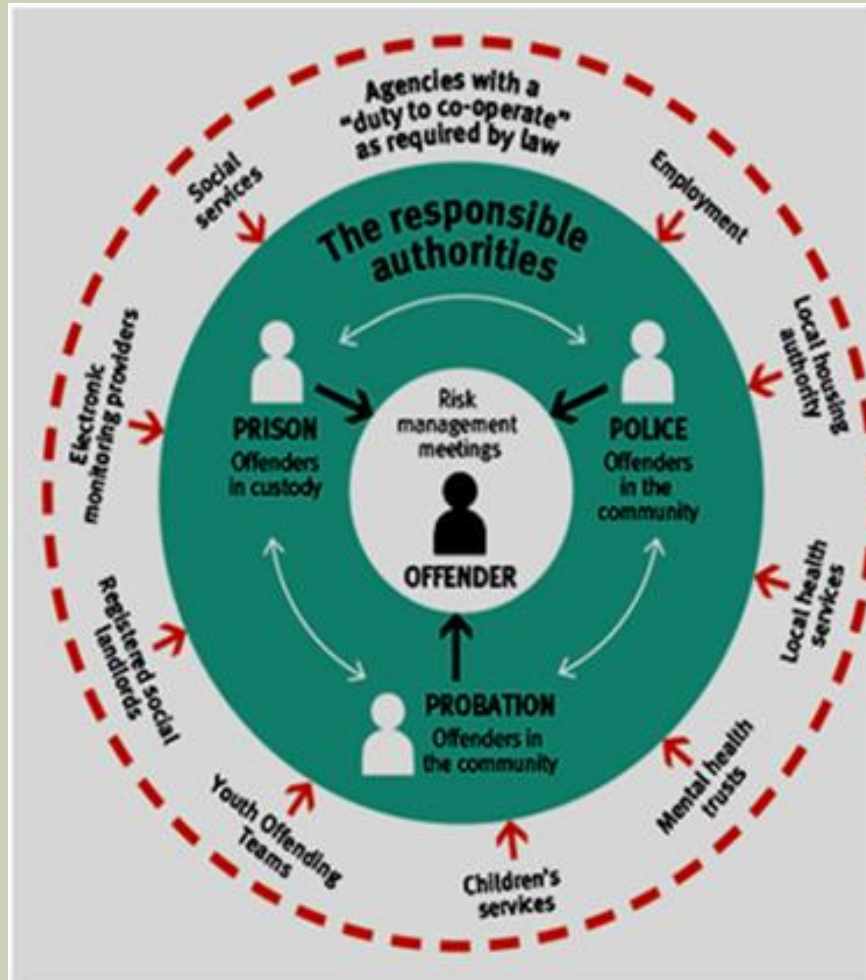
RISK ASSESSMENT

- Sex offenders show a positively skewed distribution of risk (Phenix et al., 2012), with many more offenders being on the lower end of the continuum than the higher end.
- The distribution of nominal risk ratings on the Static-99R (Phenix et al., 2012) shows
 - 70% of offenders in the sample would be regarded as moderate-low or lower risk to reoffend;
 - 10% of the sample would be considered to be at high risk.
- Helmus et al (2012)
 - Relative risk should be separated from absolute risk
 - Static-99R and Static-2002R are consistent across diverse settings and samples when used to determine which sex offenders were riskier than others, but
 - there was substantial variation in the absolute recidivism rates associated with the same risk score – therefore could lead to meaningfully different conclusions concerning an offender's likelihood of recidivism

MANAGEMENT OF RISK

- Main approaches to risk management (Crighton, 2010):
 - Risk avoidance - avoiding hazards/issues which would lead to adverse repercussions
 - Risk reduction – reducing the probability of risk occurring
 - Risk retention – acceptance of risk and the outcomes; accepting that not all risks can be avoided
 - Risk transfer – moving/diverting risks to other people or organisations
 - Frameworks – mechanisms for keeping ‘tabs’ on risky individuals (i.e., sex offenders register)

MAPPA



RESTORATIVE JUSTICE

- Restorative justice is not a new concept and is just a lot across the criminal justice system, but it is seen as controversial in the field of sexual abuse,
 - Potentially revictimizing the victims, potentially traumatizing to victims at the individuals who have committed the sexual abuse,
 - Potentially allowing the individuals who have committed sexual abuse to relive and gain power over their victims.
- The challenge of restorative justice is often the packaging that it comes in and the months that surround it, these are important to challenge and debunk before we even discuss sexual offending.
 - Language:
 - Perception:
 - Process
 - Safety and Risk
 - Clarity:
- While sexual abuse was a challenging issue, restorative justice was used in other challenging forums and with challenging topics, and it was the skill of the practitioner that was central to success as was the motivation and engagement of the participants.

CIRCLES OF SUPPORT AND ACCOUNTABILITY



Quaternary prevention (McCartan & Kemshall, under review)

Action taken to protect individuals:

- (1) “Supporting rehabilitation” &
- (2) “Aiding community reintegration”

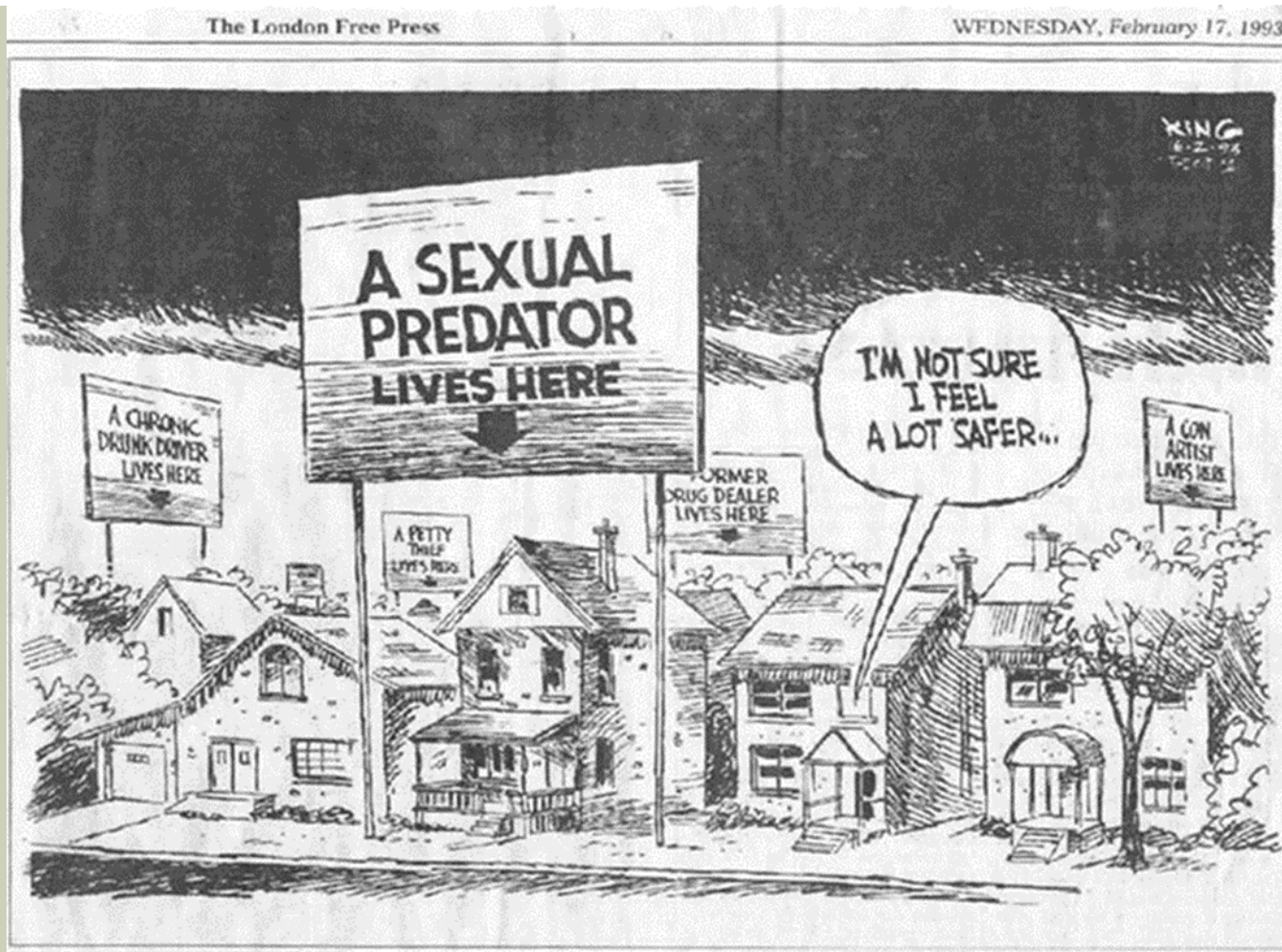
individuals with a criminal conviction:
(3) “Having a holistic, rounded view of the client/service user”

criminal justice interventions:
(4) “Reducing the negative impact of [overly] adverse criminal justice policies, practices, & risk management strategies”

increase desistance:
(5) “Promoting desistance”

reduce risk of reoffending:
(6) “Reducing re-offending & re-conviction”

SEX OFFENDER REGISTRATION



IATSO SPECIAL ED

Sexual Offender Treatment, Volume 13 (2018), Issue1/2

Special issue: International approaches to sex offender risk assessment and management

The sentencing and supervision of individuals convicted of sexual offences in Australia - Harris, D., & McPhedran, S.

A Matter of Shared Responsibility: How Practitioners, Policy Makers, and Media shape Sex Offender Risk Assessment in Belgium - Uzieblo, K., Merckx, I., Vertommen, T., De Boeck, M., & Huys, W.

Canadian Content, Context, Current Practices, and Controversies in Sexual Violence Risk Assessment - Olver, M. E., & Helmus, L. M.

Understanding and managing risk of sexual offenders in Germany – A criminological success story or punitive hysteria? - ettenberger, M.

Sex Offences in Israel - Public opinions, Risk Management and Treatment - Shanee, N. S.

Italian Criminal Justice System and Sexual Offending: An Overview - Xella, C. M.

Attitudes towards sex offenders and their risk in the Netherlands - Smid, W.

Risk assessment and management of perpetrators of sexual abuse in New Zealand - McCartan, K. F., with Laws, M-A.

Risk Management of Youth Sexual Offenders: The Singapore Context - Ting, M. H., Zeng, G. R., & Chu, C. M.

Sex offender assessment and risk management in Sweden: Adolescents and Adults - Birgersson, A.

Risk assessment and management of individuals convicted of a sexual offence in the UK - McCartan, K. F., Hoggett, J., & Kemshall, H.

Sex offender management practices in the United States - Schlank, A.

<http://sexual-offender-treatment.org/sot-1-2-2018.html>

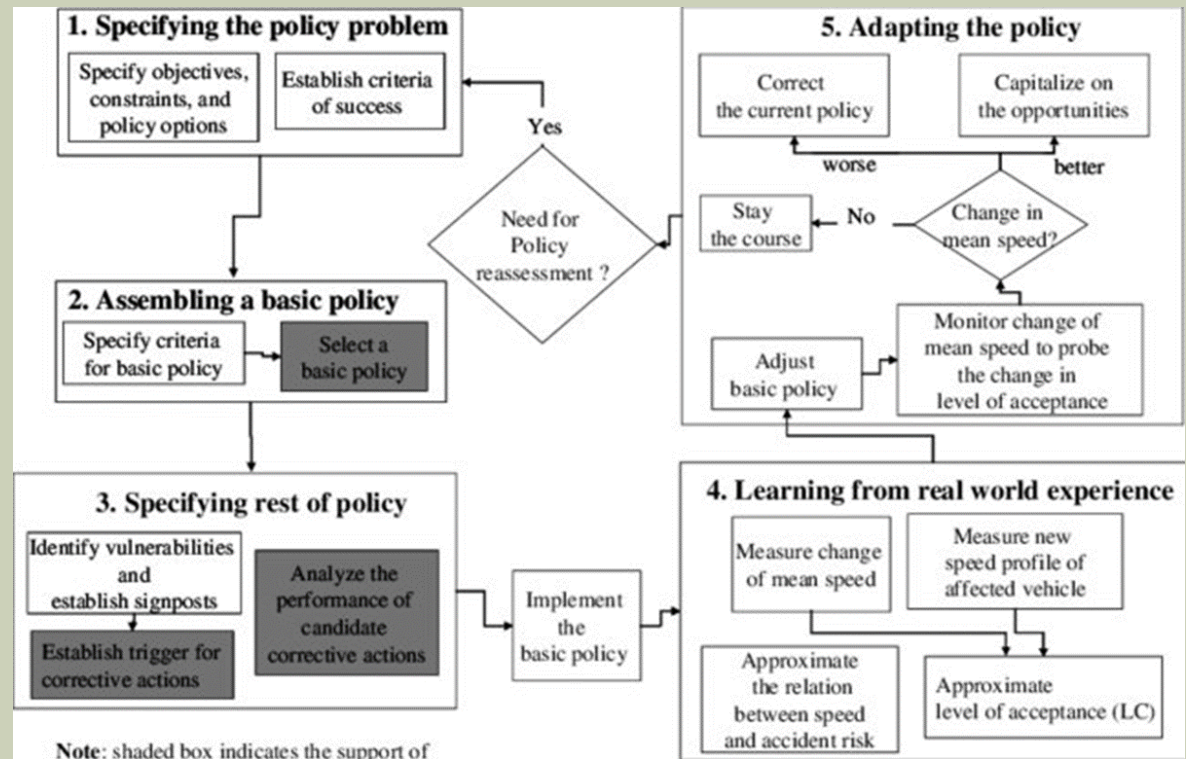
CHALLENGES OF DEVELOPING REALISTIC POLICY AND PRACTICE

'The successful policy needs to combine this evidence-based approach with political instinct, foresight and creativity. This means the modern policy maker ... need[s] to be sophisticated in applying research; knowing when evidence and different types of evidence are appropriate.'

National Audit Office (2003)

Using the evidence base is important and good practice, but what is important is that it should not be blindly copied across to different contexts. Instead, it needs to be considered and adapted to the needs, limits, professional knowledge and current working practices/policies of the organisations introducing it. Evidence based means understanding the evidence base, not just being able to use it.

King-Hill & McCartan (2020)



DUAL PROCESS MODEL OF POLICY???

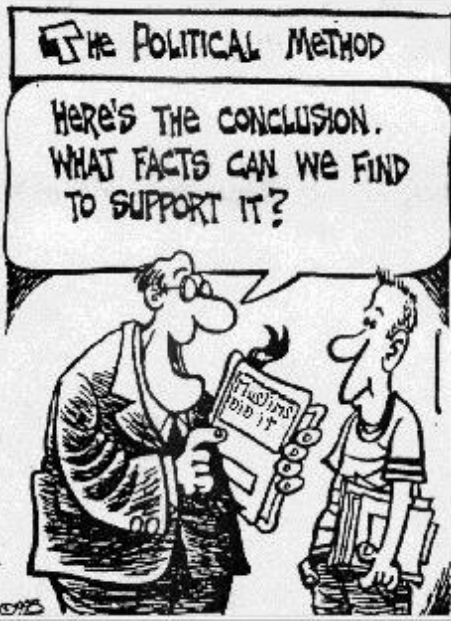
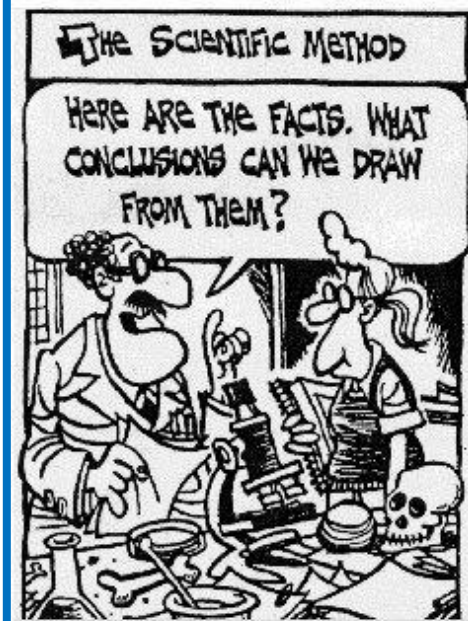


Table 1. Clusters of Attributes Frequently Associated With Dual-Process and Dual-System Theories of Higher Cognition

Type 1 process (intuitive)	Type 2 process (reflective)
Defining features	
<i>Does not require working memory</i>	<i>Requires working memory</i>
<i>Autonomous</i>	<i>Cognitive decoupling; mental simulation</i>
Typical correlates	
Fast	Slow
High capacity	Capacity limited
Parallel	Serial
Nonconscious	Conscious
Biased responses	Normative responses
Contextualized	Abstract
Automatic	Controlled
Associative	Rule-based
Experience-based decision making	Consequential decision making
Independent of cognitive ability	Correlated with cognitive ability
System 1 (old mind)	System 2 (new mind)
Evolved early	Evolved late
Similar to animal cognition	Distinctively human
Implicit knowledge	Explicit knowledge
Basic emotions	Complex emotions

Note. Italicized attributes are the proposed defining characteristics in the current article. Authors proposing two systems include the features attributed to Type 1 and 2 processing but may also include the additional features named.



The reality is that the majority of Sexual Abuse policy is type 1 (intuitive) when we need it to be type 2 (reflective), but how do we achieve this. Can we bridge the two processes?

Arrest & Prosecution

Risk assessment of individuals

Incarceration/prison

Treatment

Community management

Registration & disclosure/notification practices

Data sharing within and between countries

**INCONSISTENT
RISK
ASSESSMENT,
TREATMENT &
MANAGEMENT
PRACTICES
ACROSS
EUROPE**



Prevention of sexual abuse,

Life-course perspectives

Alternatives to traditional criminal justice

Victim issues & needs,

The “service user” voice.

Desistence.

Treatment vs management.

Consider the “Key Performance Indicators

Training, selection and support of staff

**EMERGING
ISSUES/
DEBATES
(GLOBALLY)**



**Recommendation CM/Rec(2021)6
of the Committee of Ministers to member States
regarding the assessment, management and reintegration of persons accused or
convicted of a sexual offence**

*(Adopted by the Committee of Ministers on 20 October 2021
at the 1415th meeting of the Ministers' Deputies)*

The Committee of Ministers, under the terms of Article 15.b of the Statute of the Council of Europe,

Having regard to the European Convention on Human Rights (CETS No. 5) and the case law of the European Court of Human Rights;

Having regard also to the work carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) and in particular the standards it has developed in its general reports;

Noting that sexual offences cause significant and lasting harm, including physical and mental harm, to victims and their immediate environment and that therefore it is vital to reduce sexual reoffending through targeted risk assessment and individualised treatment and intervention plans in order to achieve successful social reintegration;

Noting further that sexual offences also have a serious impact on society in terms of health and wellbeing and the cost to public services in the areas of both health and criminal justice, and increasingly have national, international and transnational implications;

Aware that assessment, treatment and interventions in the management as well as the reintegration of persons who are accused or convicted of a sexual offence are a challenge for many prison services and probation agencies of the Council of Europe member States and beyond;

Noting that there are disparities among jurisdictions regarding the definitions of different sexual offences, the age of sexual consent and the types of sanctions applicable, which have developed over time due to cultural, social and legal differences; there are nevertheless universally accepted principles across the Council of Europe member States regarding assessment, treatment and intervention in the management and the reintegration of persons accused or convicted of a sexual offence;

Having regard to the standards contained in the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (CETS No. 201) and in the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (CETS No. 210) and in the Convention for the Protection of Individuals with regard to Automatic Processing of Personal Data (CETS No. 108), as amended by its Protocol (CETS No. 223);

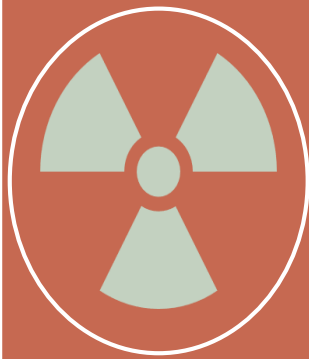
Having also regard to the standards contained in the recommendations of the Committee of Ministers of the Council of Europe, which relate to specific aspects of penal policy and practice and in particular Recommendations: Rec(2005)2-rev of the Committee of Ministers to member States on the European Prison Rules and CM/Rec(2010)1 on the Council of Europe Probation Rules;

Recommendation CM/Rec(2021)6 of the Committee of Ministers to member States regarding the assessment, management and reintegration of persons accused or convicted of a sexual offence

(Adopted by the Committee of Ministers on 20 October
2021)

https://search.coe.int/cm/Pages/result_details.aspx?ObjID=0900001680a4397a

OVERARCHING PRINCIPLES



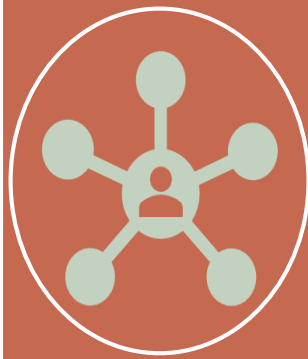
Risk levels and
risk
management



Person-centred
approach



Professional
practice



Multi-disciplinary
approaches

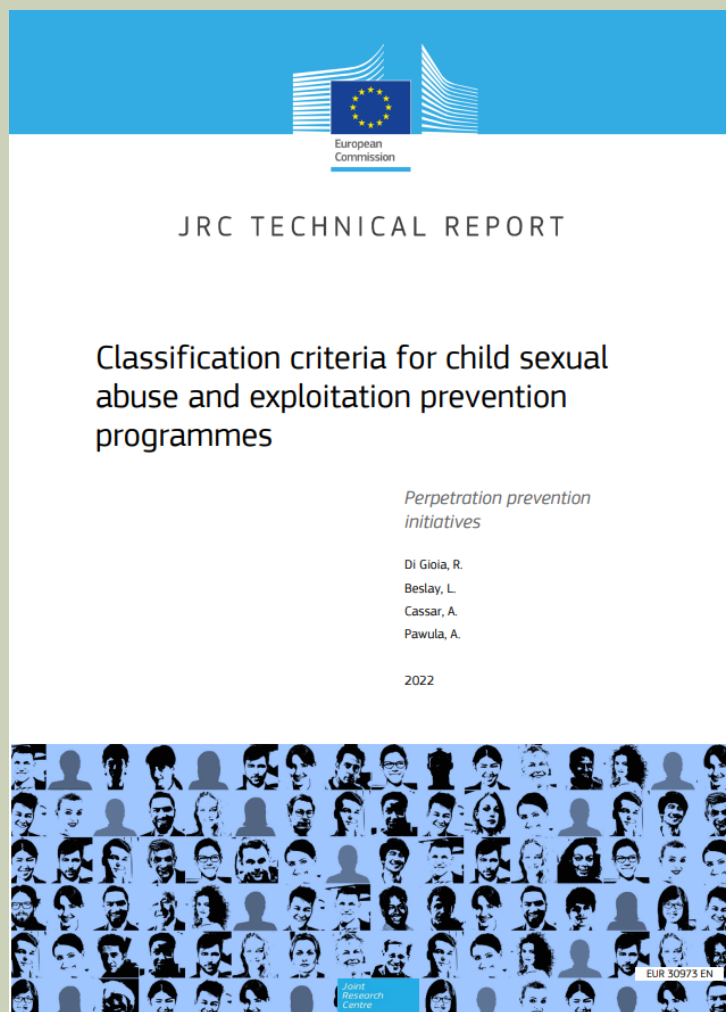


Evidence-based
practice



KEY RECOMMENDATIONS

- Risk and needs assessment
- Management, interventions, and treatment in prisons
- Management, interventions, and treatment in probation
- Data collection, information sharing and work in partnership
- Victims and community support
- Staff selection and training
- Media and communications strategy
- Research, evaluation, and development



Di Gioia, R., Beslay, L., Cassar, A. and Pawula, A., Classification criteria for child sexual abuse and exploitation prevention programmes, EUR 30973 EN, Publications Office of the European Union, Luxembourg.

[JRC Publications Repository - Classification criteria for child sexual abuse and exploitation prevention programmes \(europa.eu\)](#)

No.	CRITERION	DESCRIPTION
1	TARGET	It identifies to whom the initiative is addressed. It might be either one target only or multiple targets and related persons.
2	CONTEXT	It refers to the environment where the abuse takes place. It can be in offline or, online in its different modalities (e.g. grooming, streaming, etc.) but it could also be related to Child Sexual Abuse Material (CSAM) production, dissemination, trading and usage.
3	METHODOLOGY	It refers to the treatment and program proposed to the target.
4	ORGANISATION	It refers to the nature and main activities of the entity which is offering the program and/or treatment.
5	FUNDING	It refers to the money allocated to the program and/or treatment. It can also include possibilities to access specific funding to set up the programme.
6	BUDGET	It refers the both the costs that would be sustained by the entity proposing/setting up the program and/or treatment and the cost for the target (if any).
7	PREVENTION LEVELS	In the proposed map, we refer to the four concepts of prevention stages as described by McCartan and al. under primary/secondary/tertiary and quaternary prevention.
8	ASSESSMENT	It refers to the evaluation of programs and treatments offered. It comprises of the risk factors assessment to identify which targets are appropriate for the programme. It looks at whether the methods are evidence based, how the organisation evaluates them, if the methods are experimental or well established. It considers the presence of an ethical and/or advisory board. It considers whether intervention manuals/programs are openly available. It verifies if there are any published reports about statistics and results from the organisation's work. It may include considerations on the scalability of the methods proposed.
9	LEGISLATION	It refers to the legal national framework under which the specific programme/intervention is being deployed.
10	COMMUNICATION	It refers to the societal-cultural dimension of child sexual exploitation, including: <ul style="list-style-type: none"> - how preventive programmes are received by general public. - how media advertise them - which are the communication channels used. - how the government, educational entities and other preventative organisations are supporting these programmes.
11	COLLABORATION	It refers to the collaboration that must be set up with different entities for the programme/intervention to work such as: LEAs, educational entities, Research and Academic institutes, religious institutions, Government, prisons, patient representatives, pedophiles' communities, etc.
12	TARGETS' RIGHTS	It refers to the targets' rights in terms of privacy, anonymity, confidentiality (particularly when supporting individuals to seek and participate in treatment). It also considers informed treatment and care, empathy, etc.
13	LANGUAGE	It refers on the language provided on websites, documents and communications related to the intervention, including ease of access, and use of appropriate terminology.

Categories	Prevention stages	Rational	Stage in offending
People who fear they may offend (1)	Primary & Secondary	These are people at risk of committing a sexual offence who can be reached by either general (primary) or specific (secondary) messaging.	Pre offence
Index or offence arrested for			
Convicted offenders in prisons (2)	Tertiary	These are people, post-conviction, who are incarcerated and are undergoing treatment and rehabilitation directly related to their offending behavior (tertiary).	Post offence
Convicted offenders after they leave the prison to fight against recidivism (3)	Tertiary & Quaternary	These are people in the community who maybe under license (i.e., in contact with police and or probation) that are receiving direct support and assistance. This support can be directly related to their offence (tertiary) or more ongoing, social inclusion and harm reduction related (quaternary)	Post intimal offence and, potentially, pre-recidivism.

Definition in the four Stages				
Domain	Primary	Secondary	Tertiary	Quaternary
Public Health	Action to prevent disease in people who feel well	Action to detect disease at an early state in people who feel well	Action to reduce symptoms and complications of disease in people	Action taken to protect people from interventions that are likely to cause more harm than good
Criminal Justice	Action to prevent criminogenic &/or risky behaviour in people who are not criminogenic &/or risky	A behaviour at an early stage in people without a criminal conviction	Actions, treatments and/or interventions to reduce [Type here] criminogenic &/or risky behaviour in people with a conviction	Action taken to protect individuals with a criminal conviction from criminal justice interventions that would result in future criminogenic &/or risky behaviour
Sexual Abuse Prevention	Raising public awareness of the reality of sexual abuse and dispelling common myths about victims and preparators. Which enables individuals and communities to be better at identifying sexual abuse, risky behaviours and be better able to support people impacted by sexual abuse. Increased education leads to increased awareness and more proactive behaviour.	Enabling "at risk" populations to understand their potential risks, triggers, and the potential outcomes of them. Meaning that they can seek appropriate support and be empowered to seek help. Individuals and communities better understand risk and therefore are better able to help people manage their own (potential) risk.	Working with people convicted of sexual offences to hold them accountable for their past problematic behaviour, get support and move forward, integrate back into their communities. These interventions move people towards an offense-free lifestyle and encourage desistance. They help people manage their own risk (i.e., treatment programs and interventions).	This would enable people to successfully integrate back into the community by protecting people from collateral consequences or risk management policies and practices. This is done through supportive integration programs that help the person who has sexually abused, aid their re-entry, and support them pro-actively to negative the range of policies and practices that negate their integration. -Quaternary Prevention means protecting clients from issues related to over-medicalisation -In criminal justice terms this relates to over-criminalisation. -Ove-criminalisation and/or overly punitive criminal justice responses can create issues for clients that can worsen their life chances, rehabilitation, and desistance working against their recovery or maintenance. -In criminal justice terms this means effective, streamlined risk management that reduces the likelihood of reoffending, while protecting the public and encouraging desistance. It is important to state that people with a sexual offence are often the subject of more punitive practices and suffer from overcriminalization more than other people convicted of an offence
Examples	For example, Public education campaigns, bystander intervention, Eradicating Child Sexual Abuse, etc.	For example, Project Prevention Dunkelfeld, Stop SO, Safer Living Foundation, Lucy Faithful, Help Wanted! Stop It Now!, The Global Prevention Project, etc.	For example, Treatment programs and interventions for people who have committed sexual abuse – Kaizen, Horizon, etc.	For Example, Circles of Support and Accountability (COSA), Multi Agency work (MAPPA)

MOVING FORWARD



Her Majesty's
Inspectorate of
Probation

Refining processes in policy and practice in working with
people accused or convicted of a sexual offence

Kieran F. McCartan

HM Inspectorate of Probation

Academic Insights 2022/01

JANUARY 2022



HM Inspectorate
of Probation

Desistance, recovery, and justice capital:
Putting it all together

Hazel Kemshall and Kieran McCartan

HM Inspectorate of Probation

Academic Insights 2022/10

OCTOBER 2022

MOVING FORWARD

THE CHANGING LANDSCAPE OF CRIME AND CRIMINAL JUSTICE



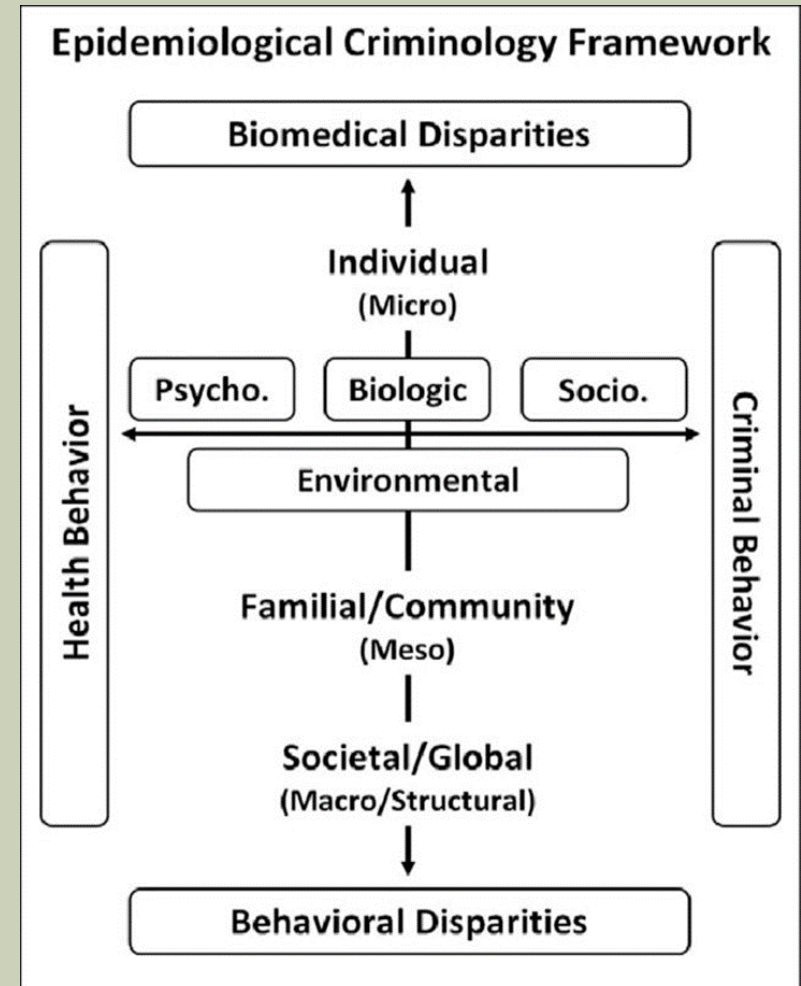
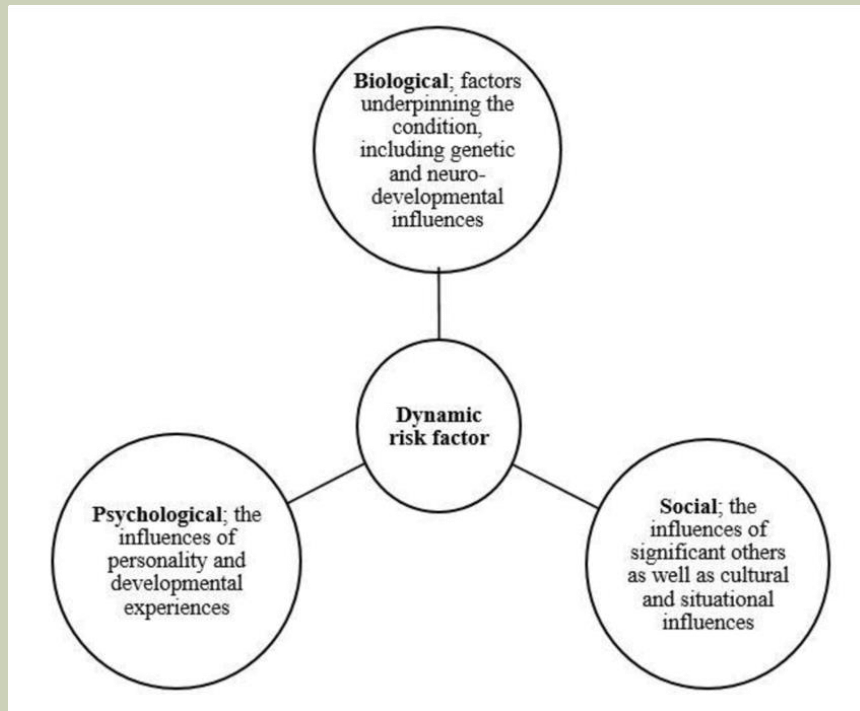
- Desistence
- Strengths based approaches
- Service users' journey & service user engagement
- Changing nature and discussions on risk management
- Harm reduction
- Life course criminology
- Trauma and Trauma informed practice
- Prevention
- Recovery capital, particularity Justice Capital
- The need to balance punishment and rehabilitation
- The importance of taking a rounded, holistic approach
- The importance of multi-disciplinary approaches in HM Prison & Probation Service
- Recovery capital

IMPORTANCE OF LANGUAGE

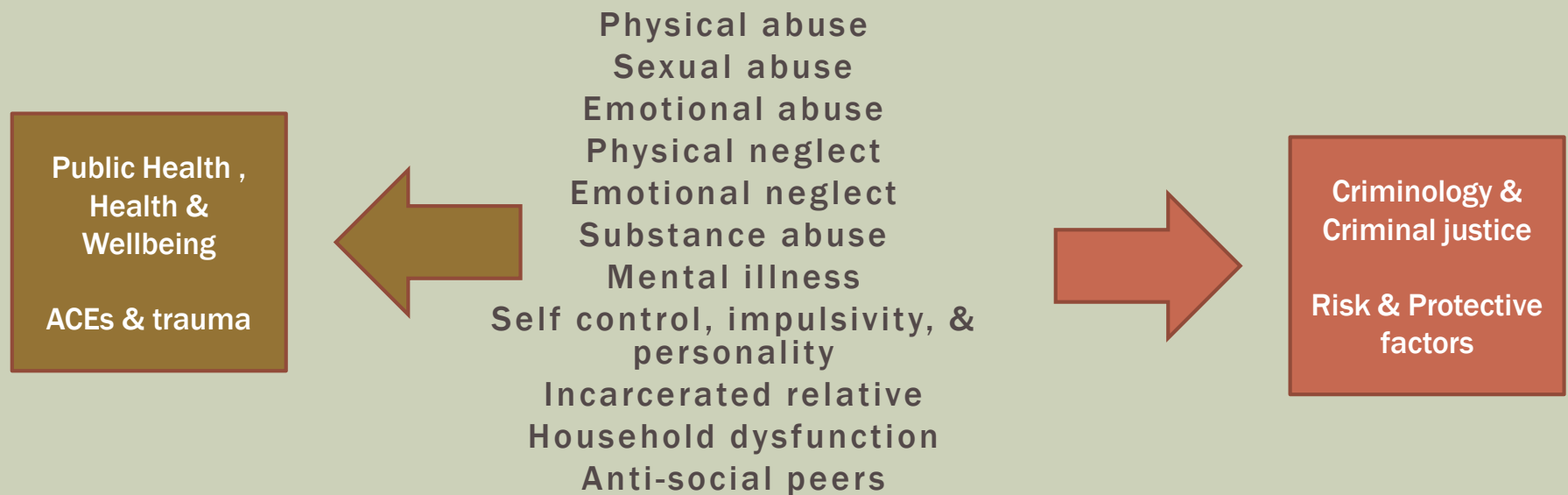
- Why should we refrain from calling them sexual offenders....
 - The power of labels.
 - Impact on integration back into the community.
 - First person language is helpful in understanding the sum of the individual is not their offence.
 - Can get in the way of changing policy and legislation.
 - It does not detract from the victims experience or narrative,
- What language should be used instead...
 - Person/individual that has committed sexual abuse ??

SIMILAR MODELS OF UNDERSTATING OFFENDING BEHAVIOUR

Biopsychosocial approach in HMPPS



(RISK OF) CRIMINAL BEHAVIOUR: A (PUBLIC) HEALTH ISSUE?



TRAUMA INFORMED CARE

In the simplest terms, the concept of trauma-informed care is straightforward. If professionals were to pause and consider the role trauma and lingering traumatic stress plays in the lives of the specific client population served by an individual, professional, organization, or an entire system, how would they behave differently? What steps would they take to avoid, or at least minimize, adding new stress or inadvertently reminding their clients of their past traumas? How can they better help their traumatized clients heal? In effect, by looking at how the entire system is organized and services are delivered through a “trauma lens,” what should be done differently?

Wilson, Pence, and Conradi (2013)

<http://socialwork.oxfordre.com/view/10.1093/acrefore/9780199975839.001.0001/acrefore-9780199975839-e-1063>

ORGANISATIONAL GUIDANCE TO DEVELOP A TRAUMA INFORMED APPROACH

	Safety	Choice & clarity	Collaboration	Trustworthiness	Empowerment	Inclusivity
Policy						
Practice						
Place						
People						
Partners						

Adversity & Trauma Informed Principles
(BNSSG Trauma subgroup, 2020) & McCartan (2020)

COMPASSION

- Compassion involves recognizing another person's pain, or trauma, and wanting to take steps to help relieve their suffering.
- The word compassion itself derives from Latin and means "to suffer together."
- Signs of compassion for others include:
 - Feeling like you have a great deal in common with other people, even if you are very different in many ways.
 - Being able to understand what other people are going through and feeling their pain.
 - Being mindful of other people's emotions, thoughts, and experiences.
 - Taking action when you see that someone else is suffering.
 - Having a high level of emotional intelligence so that you are able to understand, manage, and act on your own emotions as well as the emotions of others.
 - Feeling gratitude when other people express compassion for your own hardships.

WORKING IN A COMPASSIONATE, TRAMUA INFORMED WAY

Pay attention to the
service user and
hear their narrative

Speak with kindness

Listen carefully and
without judgment

Encourage the
service user to
speak

Offer to help with a
task

Be happy and
supportive for the
service users
success

Accept people for
who they are

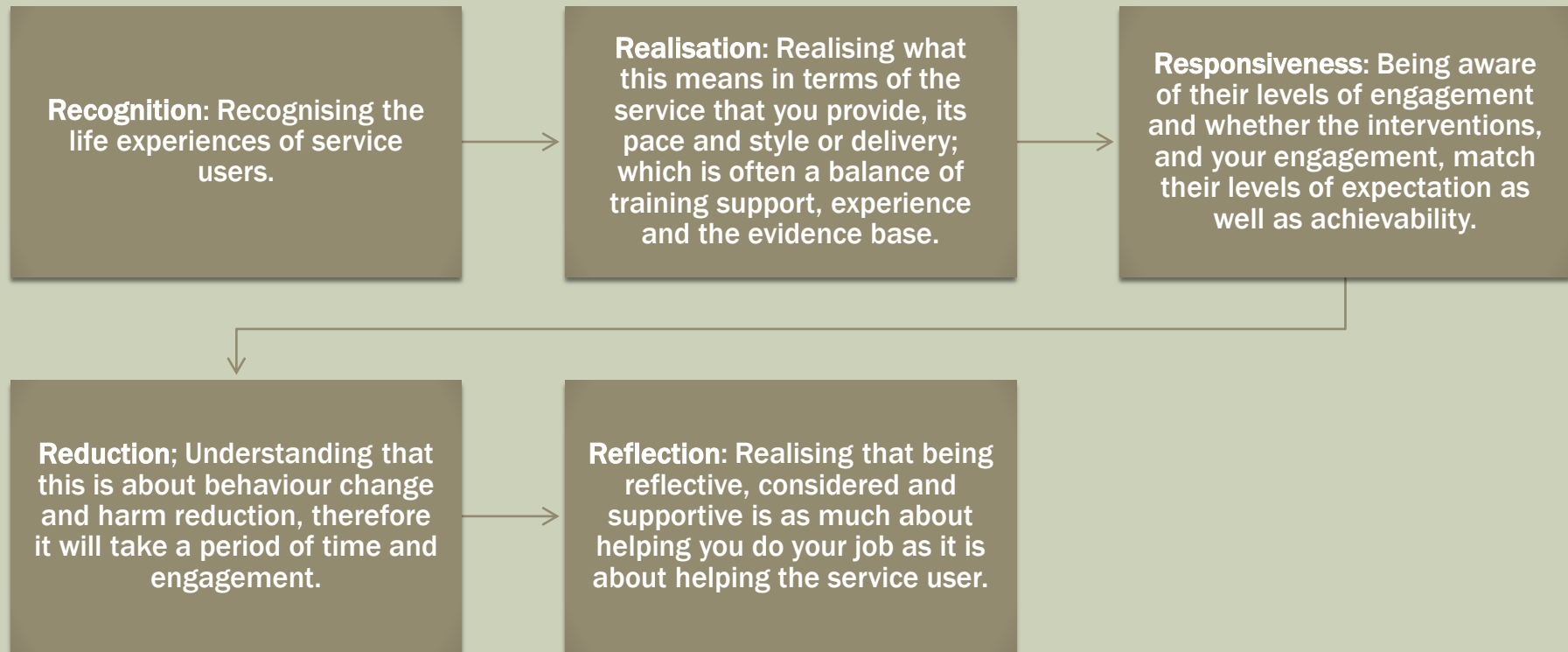
Realise that people
making mistakes
and support them in
trying to rectify them

Show respect

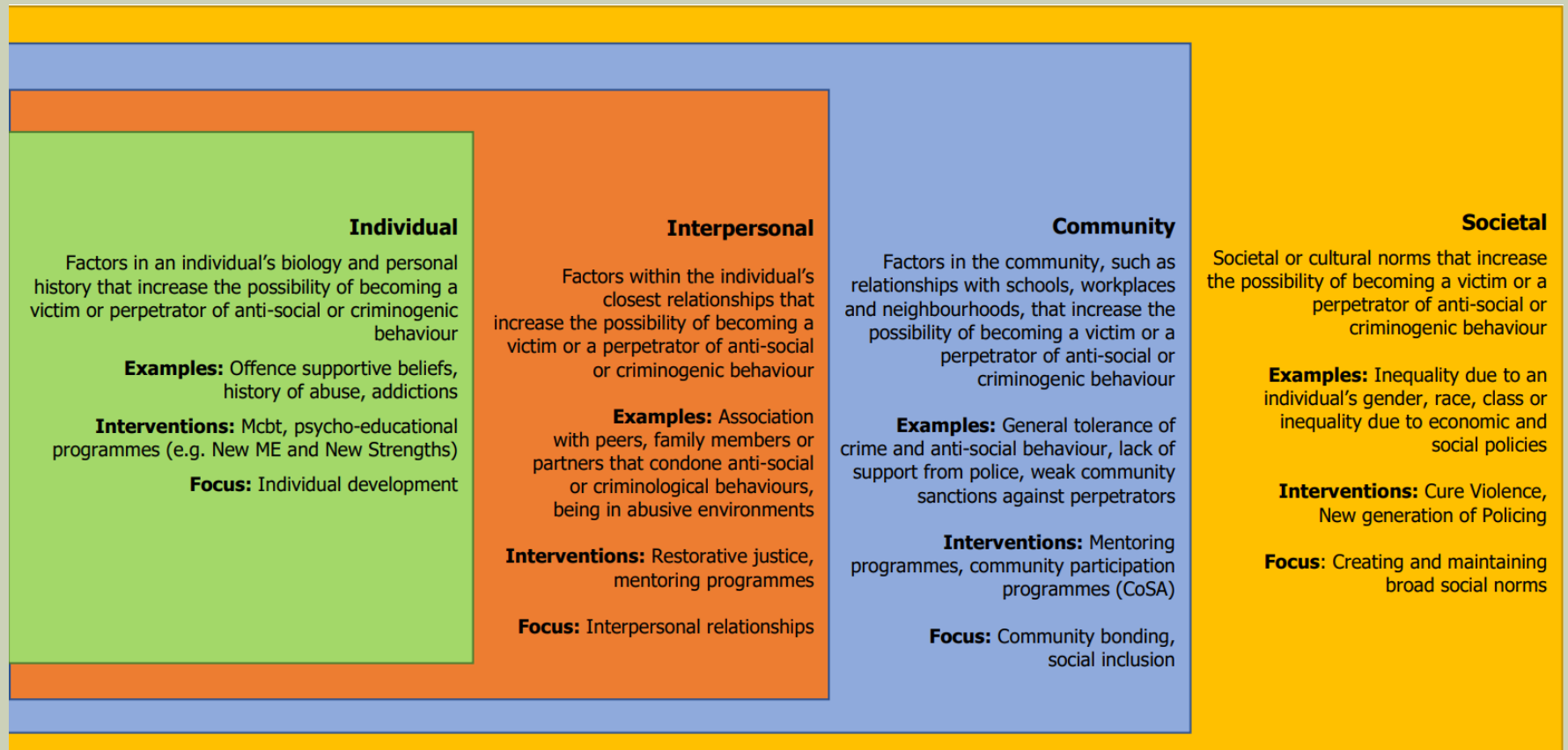
Be patient

Be careful of
burnout and seek
support when
needed.

THE PROCESS OF COMPASSIONATE, TRAUMA INFORMED WORKING



SOCIO-ECOLOGY MODEL



CONCLUSION



QUESTIONS