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Therapeutic Sex Drive Reductions

**'One a Day Keeps Prison Away':
Understanding the Experiences of Individuals Taking Anti-Libidinal Medication**

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Pharmacological (anti-libidinal) methods for the treatment and management of sexual preoccupation and / or hypersexuality in men convicted of sexual offences have become of increasing interest in the UK due to promising findings regarding their use over the past ten years. While psychological therapy exists as the standard method of treatment for those convicted of sexual offences, these programmes do not specifically target the deviant sexual arousal and fantasies present in some sexual offenders (Adi et al., 2002) meaning that treatment needs relating to these may be left unmet.

This treatment gap led to the provision of pharmacological interventions in the treatment of sexual offenders to diminish deviant sexual fantasies, urges and behaviours (Bourget & Bradford, 2008), and facilitate learning within psychological treatment programmes (Saleh et al., 2010). Subsequently, in 2009, protocols were established within the UK to allow the pharmacological treatment of sexual offenders (within the care of the prison or probation service) on a voluntary basis.

This research explores the experiences and perspectives of those individuals taking anti-libidinals (specifically anti-androgens, CPA) through qualitative interviews. Understanding the effectiveness of pharmacological treatment such as this requires multiple approaches, with qualitative enquiry being one of them. Such methods offer an opportunity to tell a story from the service user perspective, and with the ethical concerns around the use of antiandrogens, including their limited evidence base and potential side effects, an exploration of service user experiences and perspectives is crucial. Semi structured interviews were conducted with 10 individuals who were at the time incarcerated for a sexual offence and receiving anti-libidinal medication for their level of sexual preoccupation and / or hypersexuality. The analysis outlines and unpicks a number of themes including motivation for treatment, the notion of voluntary and forced compliance, impact on identity, risk management and control, and the consequences of treatment.

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Learning Goals:

- To understand the experiences and perspectives of individuals receiving medication to manage levels of sexual preoccupation and / or hypersexuality.
- To contribute to the knowledge and understanding regarding the impact of anti-androgens on sexual preoccupation and hypersexuality.
- To provide knowledge and understanding from a service user perspective to inform and assist practitioner decisions regarding treatment options for sexual offenders with problematic levels of sexual preoccupation and / or hypersexuality.

Matched Control Evaluation of the Use of Medication to Manage Problematic Sexual Arousal with Individuals Convicted of a Sexual Offence

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Problematic sexual arousal is a concern both in terms of individual wellbeing, together with sexual recidivism for individuals already convicted of a sexual offence. Problematic sexual arousal is associated with high levels of sexual preoccupation, which in turn significantly predicts sexual, violent and general recidivism (Hanson & Morton-Bourgon, 2004; Harkins & Beech, 2007). Sex Offender Treatment Programmes, which are the standard psychological treatment method in UK prisons (Ho & Ross, 2012), do not, for the most part, cover either problematic levels of sexual arousal or inappropriate sexual (Adi et al., 2002). For these individuals, psychological treatment alone might be insufficient (Marshall, Marshall & Serran, 2006), resulting in treatment needs relating to deviant sexual fantasies, sexual preoccupation or hypersexual disorder being left unmet.

Within the UK prison estate, provisions have been made for voluntary pharmacological treatment for individuals convicted of a sexual offence who have problematic levels of sexual arousal to address this gap. This presentation reports the findings of the evaluation of this programme to date. The study is four-fold and reports on: (1) the characteristics of the service users referred for medication to manage problematic levels of sexual arousal; (2) the characteristics of those service users referred but not deemed appropriate for medication (3) levels of sexual preoccupation, sexual compulsivity and hypersexuality pre and post medication and; (4) comparisons of sexual compulsivity between those taking anti-libidinal medication and a matched control group.

The anti-libidinal sample consists of 156 adult individuals serving a prison sentence for a sexual offence. Exploration of the characteristics of this group revealed a sample with disproportionately high levels of intellectually disability and a high risk of reoffending

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(according to RM2000). Comparison of sexual preoccupation, sexual compulsivity and hypersexuality pre and post medication revealed reductions in all for both SSRIs and anti-androgen medication. In particular, the sexual compulsivity scores six months post medication for the sample were less than those reported for other prisoners housed in the same prison establishment for people who had committed a sexual offence (Winder et al., 2017), indicating that the sexual compulsivity scores of our sample of medicated offenders had dropped to below that of 'typical' prisoners with sexual convictions. Levels of sexual compulsivity for the experimental group were compared with a matched control sample of adult male prisoners who had newly arrived at the same prison (currently n=56). The matched control sample demonstrated significantly lower sexual compulsivity than the experimental group; however, their sexual compulsivity also significantly decreased over the six month testing period for the control group. These findings are explained and the implications for this are discussed. Future directions, including the challenges to conducting an RCT study in the UK, are highlighted.

Learning Goals:

- To explore whether anti-libidinals (i, Selective Serotonin Reuptake Inhibitors (SSRIs), ii, Anti-androgens and iii, combined) are effective in reducing sexual compulsivity, sexual preoccupation and hypersexuality.
- To understand the profile of adult male individuals who have been convicted of a sexual offence and who have been referred for medication given their problematic levels of sexual arousal.
- To understand the levels of sexual compulsivity in incarcerated individuals who have committed a sexual offence – both those taking anti-libidinal medication and those not taking medication and to provide matched comparisons.

Rebecca Lievesley is a Lecturer in Forensic Psychology and member of the Sexual Offences, Crime and Misconduct Research Unit at Nottingham Trent University. She has worked and researched within the Criminal Justice System for around 10 years, currently engaged in various research projects including an investigation of reoffending and desistance in those serving short sentences, an evaluation of anti-libidinal medication for individuals convicted of a sexual offence and help seeking prior to committing a sexual offence. Rebecca is also a co-founder and trustee of the Safer Living Foundation, a charity established to reduce sexual (re)offending through rehabilitative initiatives and prevent further victims of sexual crime.

Belinda Winder is a Professor in Forensic Psychology and Heads the Sexual Offences, Crime and Misconduct Research Unit (SOCAMRU) in the Department of Psychology at Nottingham Trent University. She set SOCAMRU up in 2007 to build upon the collaborative relationship between ongoing research within the Department of Psychology at NTU and HMP Whatton (one of the largest prisons in Europe, holding approximately 830 convicted

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adult men who have been convicted of a sexual offence). The unit's primary aim is to conduct and facilitate applied research in the area of sexual offending and sexual crime. The unit works with the HMPPS, Ministry of Justice and the NHS and conducts research at a number of prisons (including HMP Whatton and HMP Stafford) and other secure forensic establishments. She has disseminated her work in a range of ways (presentations, professional reports, peer reviewed papers, articles for prisoners' newspapers, medical journals and so on) both internationally and nationally. Belinda specialises in mixed-method research with a strong service-user voice and an applied focus.

Belinda is a co-founder, trustee, Vice Chair and Head of Research and Evaluation for the Safer Living Foundation, a charity set up in 2014 to conduct (and evaluate) initiatives that help to prevent further victims of sexual crime.

Christine Norman is a Senior Lecturer in psychology at Nottingham Trent University and a member of the Sexual Offences, Crime and Misconduct Research Unit (SOCAMRU) at Nottingham Trent University. Christine's research and teaching interests are in the area of biological and cognitive psychology with application to psychiatric disorders, forensic psychology and behavioural addictions. She is part of the research team working closely with HMP Whatton one of Europe's largest sex offender prisons and is also involved in prevention research with non offending paedophiles.