

SHAPING THE FUTURE

2019 ATSA Conference | Friday November 8 | 10:30 AM – 12:00 PM

F-03

Recidivism and Other Outcomes Among Sexual Offenders Committed as “Sexually Violent Predators” in California

Symposium Chair: Deirdre M. D’Orazio, PhD
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Second to the death penalty, arguably the most controversial criminal justice response to sexual offending is involuntary civil commitment. Sexual Offender Civil Commitment (SOCC) laws impose post-incarceration civil liberty restrictions and treatment opportunities upon mentally ill sexual offenders until they are shown to no longer present as likely to sexually reoffend by nature of a mental disorder. Since 1990 when the first “Sexually Violent Predator” law was implemented in Washington State, twenty states plus the US federal government have enacted SOCC laws. Currently more than 6,000 individuals are committed/detained by SOCC, including nearly 1,000 in the California program (Schneider, et. al, 2018). SOCC highly impacts the offenders committed; potentially prevents countless victimizations, and is financially costly to state governments. Thus, critical examination of the outcomes of such programs including the degree that they reduce the rate of sexual re-offense among those committed is necessary (Thornton & D’Orazio 2013).

This symposium describes the adult male population committed and released pursuant to the California Sexually Violent Predator law. It provides information on the rates of recidivism of those committed, those detained but not committed, and those released having participated in the step-down Conditional Release Program. It also examines the relationship of static risk score and psychopathy to outcomes. Results and limitations are discussed in terms of expectations for a high-risk population of sexual offenders.

Recidivism Findings from California Sexual Violent Predator Commitment Program

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The recidivism rate of civilly committed sexual offenders released from California State Hospitals is unknown. A study of its precursor program, the Sex Offender Treatment and Evaluation Project (SOTEP, Marques et al, 2005), did not show effectiveness prompting substantial program development. This presentation focuses on the recidivism in 431 men discharged from California State Hospitals pursuant to the SVP Act between 1996 and 2017.

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The follow-up time included total, from admission to the end of study (~ 21 years), and a fixed five-year period. Following an introduction describing the California SVP commitment and treatment program, the presentation describes the clinical and demographic characteristics of the sample, recidivism methodology, and recidivism outcomes of the men committed or detained and released. It reports the predictive validity of the Static-99R including discrimination and calibration properties for a fixed five-year period.

In all, 8.8% were arrested for a new sexual offense during the total follow-up. The recidivism for nonsexual violence and general offences during the total follow-up were 16% and 40% respectively. The Static-99R demonstrated acceptable properties of discrimination for sexual, violent, and general recidivism as examined via ROC and Cox regression survival analysis. Calibration analyses, conducted through E/O index, logistic regression, and computation of risk ratios, however, demonstrated that the Static-99R over predicted sexual recidivism in the present sample, irrespective of whether the routine or high risk-need norms were used as a point of comparison, particularly for Level IVa and IVb groups. Limitations, including that recidivism sources were constrained to state sources, are discussed. Results are used to provide suggestions for improvements and future areas of study.

Learning Goals:

- Attendees will learn about admission, discharges, and recidivism rates of the CA SVP program.
- Attendees will learn how recidivism was operationalized and measured in the CA SVP recidivism project.
- Attendees will learn the predictive validity of Static99R for a sample of men detained or civilly committed pursuant to the CA SVP Act.

The CA Conditional Release Program: Recidivism and Other Outcomes for the Step down Program for Civilly Committed Sexual Offenders

Deirdre M. D’Orazio, PhD
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Best practice standards for sexual offender treatment are guided by the Risk, Needs, Responsivity principles (RNR, Andrews & Bonta, 2010). Sex Offender Civil Commitment (SOCC) laws comply with the Risk Principle when they are applied only to higher risk offenders and when intensity of services reduces with sufficient management or reduction in risk (Thornton & D’Orazio, 2013). When applied appropriately, SOCC less restrictive alternatives to inpatient detainment adhere to Risk Principle. Participants achieve step-wise reductions in external management interventions as they learn to manage their risk

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for sexual re-offense and build up protective factors, eventually reintegrating back to the community unconditionally. California, like most SOCC programs across the US, includes a Conditional Release Program. It is intended to occur after completion of the inpatient treatment modules. Recidivism and other outcomes provide useful information to assess and improve SOCC programs.

Since the CA SVP law's inception in 1996, 46 of the 919 men committed have been Conditionally Released whereas 246 have been released unconditionally without having participated in the CONREP step-down program. This presentation describes the CA SVP CONREP program and its participants, including those that were unconditionally release. It reports revocation and recidivism outcomes and compares them with those released having not participated in CONREP. It examines the relationship of risk, service dosage, and progress indicators to outcomes. Qualitative case descriptions of non-recidivistic and recidivistic CONREP participants are provided to illustrate findings. Results inform suggestions and future areas of study. Limitations and areas of challenge are discussed.

Learning Goals:

- Attendees will learn about the CA SVP Conditional Release Program and its participant population.
- Attendees will learn the impact of conditional release on recidivism outcomes by comparing rates of SVPs receiving CONREP to those unconditionally released without the step down program.
- Attendees will learn the impact of conditional release revocations to recidivism outcomes.

Institutional Behaviors of High Psychopathy Men in a CA SVP Program

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Forensic and correctional populations with high levels of psychopathic traits are reputed to respond poorly to therapeutic intervention and to be a challenge to effectively engage and retain in treatment. Recent evaluations from evidence informed programs gives some room for cautious optimism, suggesting that high psychopathy men do not inexorably drop out, act out, or sabotage intervention efforts, or even return to custody for new violent or sexual offenses. This presentation features a study that examines the institutional behaviors of 119 men admitted to a sexual offense civil commitment program per California's SVP statute, and the role and relevance of Psychopathy Checklist-Revised (PCL-R) measured psychopathy.

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The sample scored above the mean for North American adult male psychiatric norms (22.0 SD = 7.6) and had a high proportion of men with PCL-R scores with a cut score of 25 or higher (45.4%), corresponding to a high level of psychopathic traits ($\approx .50$ SD above the mean). Institutional violence was not uncommon (21.8%), and although PCL-R total scores had moderate associations with this outcome (AUC = .64, $p = .03$), importantly, only a minority of high psychopathy men had any recorded violent incident, as was also the case for lower PCL-R scoring men (29.6% vs. 15.4%). Factor 2 accounted for most of the PCL-R's association with institutional violence ($r = .26$) compared to the Factor 1 ($r = .03$), suggesting that the antisocial lifestyle features (Factor 2) of the syndrome have greater criminogenic relevance and likely greater bearing on antisocial behavior within treatment, while the interpersonal and affective features of Factor 1 may serve as a set of responsivity issues. Implications for the engagement and management of high psychopathy persons within an SVP hospital setting, per the two-component model for the treatment of psychopathy, are discussed.

Learning Goals:

- Describe the two-component model for the treatment of psychopathy as operationalized by the PCL-R
- Present data examining the association of PCL-R measured psychopathy to institutional violence within an SVP program
- Summarize approaches for the prevention of inpatient violence and management and retention of high psychopathy men in treatment

References

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Dr. Deirdre D'Orazio serves as a consultant to the CA Department of State Hospitals, where she has worked in various capacities for eighteen years including as a senior supervising psychologist, SVP forensic evaluator, and Director of Evaluation and Development Services, overseeing the treatment and forensic evaluation programs for the 'SVP' sex offender civil commitment program program at Coalinga State Hospital. Her current duties focus on the SVP Conditional Release program, department wide consultancy on sexual offender services and policies and as a member the CA Sex Offender Management Board (CASOMB). In her private practice, Dr. D'Orazio provides clinical services, expert forensic services, training, outcome evaluation, and program development. She serves on the leadership boards for the Association for the Treatment of Sexual Abusers, the Sexual Offender Civil Commitment Network, and the CASOMB. Dr. D'Orazio was awarded the Fay Honey Knopp award by the California Coalition on Sexual Offending for positive and sustained contributions to the field of sexual offending. Dr. D'Orazio has published papers, professional trainings, or research projects in the areas of sexual offender risk assessment, diagnosis, best practices in offender treatment, treatment program development and evaluation, and clinician development. She holds psychologist licenses in California, Minnesota, and North Dakota and is a certified trainer for the Static99R, the Structured Risk Assessment Forensic Version, and the Stable and Acute 2007.

Dr. Azizian received his PhD in Psychology from State University of New York, Stony Brook. After postdoctoral fellowships at Scripps Research Institute, and then University of California, Los Angeles, Integrated Substance Abuse Programs, he joined the faculty at University of Southern California as an Adjunct Assistant Professor of Psychology (non-tenure track). He then moved to Department of State Hospitals - Coalinga where he worked in assessment, treatment, and administrative, including Chief of Psychology, capacities. In 2009, he was awarded a Fulbright research and teaching award to lecture at Yerevan State Medical University, Armenia. His clinical and academic interests are threefold: sex offender laws, prevention of sexual abuse, reintegration and community supervision of sex offenders. He is an Assistant Professor of Criminology, California State University, Fresno, Senior Psychologist, Department of State Hospitals (Intermittent limited-term), and Clinical Director of a Community Sex Offender Treatment Program. He has published frequently in scientific journals, and presented in national and international conferences. Dr. Azizian is a research and clinical member of the Association for the Treatment of Sexual Abusers.

Mark E. Olver PhD is Professor and Registered Doctoral Psychologist (Saskatchewan) at the University of Saskatchewan, where he is involved in program administration, graduate and undergraduate teaching, research, and clinical training. Prior to his academic appointment, Mark worked as a clinical psychologist in various capacities, including providing assessment, treatment, and consultation services to young offenders in the Saskatoon Health Region and with adult federal offenders in the Correctional Service of Canada. Mark's research interests include offender risk assessment and treatment, young offenders, psychopathy, and the evaluation of therapeutic change. He is the co-developer of the Violence Risk Scale-Sexual Offense version (VRS-SO) and he provides training and consultation services internationally in the assessment and treatment of sexual, violent, and psychopathic persons.