

SHAPING THE FUTURE

2019 ATSA Conference | Thursday November 7 | 10:30 AM – 12:00 PM

T-6

Fidelity in Treatment Delivery and Evaluation

Evidence-Based Treatment of Sexual Offenders: New Results from the International Project for Evidence-Based Practices with Sexual Abusers (IPEPSA)

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Although there is an increasing requirement for interventions used in the treatment of sexual offenders to follow evidence-based practice, defined by the American Psychological Association (2006) as, "...the integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences", research on the effectiveness of treatment with sexual offenders remains equivocal. To address this gap, as well as the relative absence of an organized effort to systematically identify, organise, and communicate evidence-based assessment, treatment, management, and public policy, the International Project for Evidence-Based Practices with Sexual Abusers (IPEPSA) was launched in 2014. Following the development of a tool that scores the methodological quality of research, initial results from IPEPSA (Deming, Yates, & Barbaree, 2016) were consistent with research indicating an overall weak but positive effective of treatment. Importantly, the majority of studies demonstrated weaker methodological designs, significant methodological shortcomings, and a lack of adherence to the principles of effective intervention and best practices in the treatment of sexual offenders, all of which impacted achieving and demonstrating reductions in recidivism. The present study is the second in this comprehensive program of research and includes a larger sample of both primary and secondary studies to evaluate the quality of treatment outcome research and the extent to which this research can be confidently applied in clinical practice. Findings from this evaluation will be used to make recommendations regarding the content of what constitutes evidence-based treatment for sexual offenders.

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Learning Goals:

- Participants will learn about the criteria used to evaluate the evidence base of sexual abuser research.
- Participants will gain information pertaining to the content of treatment of sexual abusers with respect to practices that should be considered to have a “strong”, “modest”, or “weak” evidence base.
- Participants will be provided information regarding the steps necessary to integrate evidence-based practice into their own treatment programs and practices with sexual abusers.

Adam Deming, PsyD is a licensed psychologist and Executive Director for the Indiana Sex Offender Management and Monitoring (INSOMM) Program. Dr. Deming has more than 25 years of clinical and administrative experience working with adolescent and adult sexual offenders in both inpatient and outpatient settings. He was the Chair of the 2005-2006 Sexually Violent Predator Summit Steering Committee, and under his leadership, the SVP Summit made significant advances in organization and mission, and became the Sex Offender Civil Commitment Programs Network (SOCCPN). Dr. Deming is an active member, and Fellow, of the Association for the Treatment of Sexual Abusers (ATSA), currently serves on the ATSA Adult Clinical Committee, and is a past President of the Indiana Chapter of ATSA. He is a founding member and a lead researcher in the International Project for Evidence-Based Practices with Sexual Abusers (IPEPSA). He has published several articles relating to sex offender treatment, community management, recidivism, and assessment, and has presented on topics related to sex offender assessment and treatment at international conferences such as ATSA, NOTA, and IATSO.

Shan Jumper, PhD, Dr. Jumper is currently the President-Elect of the Association for the Treatment of Sexual Abusers (ATSA). He served as the Treasurer for the Executive Board ATSA and from 2013-2015 was the Midwest Regional Representative to the ATSA board and served as the board Secretary. Dr. Jumper is also the current Past-President of the Sex Offender Civil Commitment Programs Network (SOCCPN), having served as President of this organization from 2012 – 2018. He received his doctorate in counseling psychology from the University of North Dakota and is licensed in Illinois as a Clinical Psychologist, Sex Offender Treatment Provider, and a Sex Offender Evaluator. In 1999 Dr. Jumper joined the staff of the Sexually Violent Persons program at the Illinois Dept. of Human Services Treatment and Detention Facility as a psychologist, later serving as Treatment Team Leader and Associate Clinical Director. An employee of Liberty Healthcare, he has been the program's Executive Clinical Director since 2005. Dr. Jumper has worked in private practice as an expert witness, has published various peer reviewed articles and book chapters on sexual violence and has served on the adjunct faculty at Argosy University Chicago.

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Aimee E Wilczynski, LCPC, LMHC has a master's degree in Forensic Psychology and is a licensed counselor in both Illinois and Indiana. She has provided treatment to individuals who sexually offend for 9 years. Not only has she treated sexually abusive adult males in the community, she has also provided treatment to Civilly Committed sex offenders (Sexually Violent Persons) and men, women and teenage boys in state prisons. She enjoys treating male and female sex offenders diagnosed with severe personality disorders who exhibit high psychopathy as well as sex offenders who are intellectually delayed or developmentally delayed. During her early career as a therapist, she worked with victims of sexual assault and children and youth who have experienced trauma. She was also a volunteer rape crisis advocate.

By the Book?

Considerations and Best Practices for Integration of Manualized Programs

Marc A. Schlosberg, PhD
Seth Wescott, MS, LMLP

Manualized Sex Offender Treatment are increasingly considered for adoption in an increasing number of states and jurisdictions. This presentation addresses the use of manualized programs under a variety of scenarios. Program administrators and clinicians may have differing needs and goals in the adoption of such programs. The use of these programs will be discussed under three different scenarios.

- 1) Geographic areas where available clinical staff may be limited. Manualized programs may be considered for the primary provision of programming. Such implementation may require use of
- 2) Existing programs considering adoption of manualized programs to supplement the provision of services in a structured manner.
- 3) Treatment providers are directed to use such programs by agencies or departments.

Each of these scenarios presents unique challenges in the adoption and provision of these programs. The workshop will address defining and maintaining best practices for each of these implementation types. More subtle issues such as therapist morale, individual participant considerations and cost considerations/budgetary issues will also be discussed.

Learning Goals:

- Participants will be able to identify specific challenges inherent in each of the adoption scenarios.
- Participants will increase their skill set in choosing and adopting such programs as part of their overall treatment programs

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- Participants will learn about the strengths and challenges associated with the implementation of manualized treatment.
- Participants will be better to address and acknowledge therapists' concerns regarding the use of manualized programs.

Marc A. Schlosberg, PhD is a licensed psychologist (Kansas) with a doctoral degree in Clinical Psychology from the University of Kansas. He is a Clinical Member of ATSA. Since 2002, Dr. Schlosberg has contracted and consulted with both Sexual Offender Treatment Programs and Civil Commitment Programs. He provides therapy to individuals transitioning to community living from inpatient civil commitment. Dr. Schlosberg provides consultation and training to non-clinical and clinical staff involved in treatment for civilly committed sexual offenders. He maintains a private practice where he provides therapy and assessment services.

Seth L. Wescott, LMLP is a Licensed Master's Level Psychologist. He has been working in the forensic mental health field since 2002. He has worked in maximum security prisons for both adults and juveniles. In addition, he has worked with offenders in various community-based settings. Mr. Wescott is a clinical member of ATSA and provides training to various agencies and organizations upon request.