Challenging Assumptions About Offending Risk, Psychopathy, and Atypical Sexuality

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Among members of the public and professionals alike, labels such as “high risk offender”, “pedophile”, or “psychopath” often provoke strong reactions, ranging from fear and disgust to simple therapeutic pessimism. As such, professional and ethical standards direct those engaged in clinical work or research endeavours with the individuals to whom such labels have been applied, to adopt empirically-informed and objective techniques and perspectives. For example, structured actuarial tools are often employed in place of idiosyncratic, and potentially emotionally charged, unstructured clinical judgements. As another recent example, efforts have increasingly been made to alter the language used to describe such individuals (i.e., person-first language). That said, continued research is necessary to better understand the risks, needs, and resiliencies associated with stigmatized groups that may be at risk for sexual offending. While some progress has certainly been made in these domains, it is important to engage in critical appraisal of routine techniques, practices, and assumptions that may otherwise be taken for granted, and to continue accumulating knowledge that can guide future practice. The presentations comprising this symposium have been selected for this purpose, and to contribute to the conference theme of shaping the future by examining strength-based approaches, by informing prevention strategies, and by increasing understanding clinical applications of risk and need assessments.

The first presentation examines profiles of protective factors as a function of psychopathy among men treated in a correctional setting, and specifically, to what extent individual differences on protective factors translate into important outcomes (e.g., treatment retention, risk reduction). The second presentation reports results of a survey of minor attracted persons, many of whom desire not to have sexual contact with underage persons, along with profiles of their psychological functioning and wellbeing. The final presentation pertains to an evaluation of the Justice Center’s new five-level system of risk communication, as adapted for the Static-99R and STABLE-2007, among a sample of men who have sexually offended; this presentation provides empirical data suggesting that the adoption of the new system carries the potential for substantial changes to resource allocation and the treatment of individual evaluatees.
Psychopathy represents a constellation of maladaptive personality traits that can culminate to result in qualities resistant to effective treatment. However, recent research has established that highly psychopathic clientele benefit from correctional intervention that adheres to risk, need, and responsivity principles, such as cognitive behavioural modalities. Even so, the treatment literature in general is still underdeveloped, with no previous studies incorporating protective factors among this population. As such, the current study aims to fill the gaps in the existing literature by examining the associations between the Psychopathy Checklist-Revised (PCL-R) and the Structured Assessment of Protective Factors (SAPROF) through a retrospective study using a treated sample of men who attended the Clearwater High Intensity Sex Offender Program in Saskatoon, Saskatchewan Canada. Two hundred eighty seven men were rated on the SAPROF and PCL-R on the basis of comprehensive institutional file information, and associations were examined between these sets of constructs along with treatment completion and change. High levels of psychopathy were significantly related to lower levels of protection on the SAPROF and its internal, motivational, and external domains at pre and posttreatment; however, psychopathy was not meaningfully associated with changes in protection. The results suggest that even men with a history of sexual offending and substantive psychopathic traits are capable of increasing their levels of protection, which in turn may have important implications for treatment retention and community reintegration.

Learning Goals:

- To review the relationship between psychopathy and protective factors among a sexual offending population
- To present appropriate targets of treatment that integrate protective factors within a risk-need-responsivity framework
- To summarize the data regarding the profiles of protective factors among high psychopathy men treated for sexual offending and its relationship to treatment outcome.
The present study will examine the association between interpersonal relationships, internalized pedophobia, loneliness, and sexual functioning and mental health, suicidality, and sexual contact with children in an online sample of pedohebephilic individuals. The focus is determining whether different types of relationships are better understood as protective or risk factors for these three outcomes. Additionally, this study is the first to examine the association between internalized pedophobia and sexual functioning and mental health within an online sample of approximately 100 pedohebephilic individuals completing an online anonymous survey. Analyses will be completed ahead of the conference. The results will be helpful to improve our understanding of pedohebephilic individuals’ mental health, how to provide support to this population, and to prevent sexual contact with children.

**Learning Goals:**

- To better understand how psychosocial processes are associated with mental health, suicidality, and offence-related behavior in an online sample of pedohebephilic individuals.
- To help inform strategies for people with pedohebephilia to maintain positive mental health and avoid offence-related behaviors.
- To inform ways to provide support to pedohebephilic individuals and prevent adult sexual contact with children.

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This presentation summarizes a study undertaken to evaluate and quantify the impacts of the adoption of the Council of State Governments’ five-level system for risk communication, using the Static-99R and STABLE-2007, in a community based program for the treatment of persons who have sexually offended. A clinical database of risk scores, obtained from 165 males who had sexually offended, was used to assign ordinal, categorical risk ratings, using the outgoing system and the new five-level system. Overall, higher risk ratings were assigned using the new system, based on scores from the Static-99R and combined Static-99R/STABLE-2007 risk ratings. The results suggested that application of the new system to guide resource allocation could result in a substantial increase in resource outlay, and the number of individuals referred for interventions. As such, the results may be used to inform decisions regarding best practices for risk communication and other decisions impacted by risk and need assessments.

Learning Goals:
- To provide an overview of current issues pertaining to risk metrics and risk communication.
- To provide an empirical summary of impacts of the adoption of the five-level risk system on risk communication, with a specific focus on the distribution of categorical labels, and changes in ordinal risk ratings.
- To inform clinical decisions regarding best practices in allocating resources and communicating risk for sexual recidivism.
Neil R. Hogan, PhD received his doctorate in clinical psychology from the University of Saskatchewan and completed his residency with the Correctional Service of Canada, in Kingston, Ontario. He is a Registered Psychologist (Alberta) and the Program Coordinator/Forensic Psychologist with the Integrated Threat and Risk Assessment Centre (ITRAC) in Edmonton, Alberta, as well as a professional affiliate of the University of Saskatchewan. He has experience conducting court-ordered forensic mental health assessments (i.e., risk, psychosexual, and mental health evaluations), group treatment for persons who have sexually offended, and research/program evaluation related to sexual offending. Dr. Hogan serves as an ad-hoc reviewer for several journals, and has published articles in the areas of violence risk assessment, dynamic risk factors, and factors impacting the community reintegration of persons who have sexually offended.

Emily Riemer is currently completing her Bachelor of Arts and Science, Honours degree at the University of Saskatchewan. During her undergraduate career she was introduced to forensic psychology through Dr. Olver in a research position for the current research. Through this position she has gained experience in file-based assessment.

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.

Desiree L. Elchuk, BSc, BA received her Bachelor of Arts in Psychology at the University of Saskatchewan and is currently completing an honors research project. Desiree’s research interests include pedophilia, sexual offending against children, and general sex research. While completing her honors degree, Desiree is also involved in research on sexual violence and psychopathy at a federal correctional facility.

Christine Sribney is a Registered Psychologist at Forensic Assessment and Community Services (FACS) in Edmonton, Alberta. She is the clinical lead for the sexual violence team within this community based, outpatient clinic. In her current role she is involved in program development and coordination of assessment and treatment services. She also provides sexual violence risk evaluations, treatment assessments, and, for over 18 years, has participated in both individual and group treatment for individuals who have sexually offended (ISO). She is currently involved in research endeavors that relate to community-based treatment for ISO.