

SHAPING THE FUTURE

2019 ATSA Conference | Thursday November 7 | 3:30 PM – 5:00 PM

T-36

Assessment-Based Treatment Using the MDSA

Symposium Chair: Raymond A. Knight, PhD
Brandeis University

Within the general psychotherapy empirical literature, research has supported the efficacy of assessment-based treatment and the positive effects it has on the therapeutic alliance (e.g., Poston & Hanson, 2010). In their formulation of the principles that are essential for effective correctional treatment (the risk, needs, and responsivity model [RNR]) Andrews and Bonta (2006, 2010) articulated the importance of such assessment-based intervention and also embraced it as a central component of their therapeutic program (Andrews, Bonta, & Wormith, 2011). Hanson, Bourgon, Helmas, and Hodgson (2009) demonstrated that these same three principles apply to the treatment of those who have sexually offended. The assessment of criminogenic needs (i.e., dynamic risk factors associated with the probability of recidivism) prior to intervention and the tracking of dynamic change of such needs during treatment is inherent to RNR treatment (Hamilton, Campagna, Tollefsbol, Wormer, & Barnoski, 2017). Individuals who sexually offend are heterogeneous (Knight, 2010; Knight & King, 2012) and vary in their treatment needs. Only valid assessment provides the basis of decisions that direct individualized treatment. For such feedback to be effective and to form a collaborative basis for therapy, clinicians must choose assessment tools that accurately measure the individualized treatment needs germane to each client (Finn, Fischer, & Handler, 2012; Smith, 2010) and must learn ways of effectively using those assessments to improve treatment. The intent of this workshop is to review the literature supporting the validity of assessment-based interventions, to identify the domains that need to be assessed for treating adults or juveniles who have sexually offended (ADSOs and JVSOs), to illustrate how these dynamic targets are assessed in the Multidimensional Inventory of Development, Sex, and Aggression (MDSA, 2011), and to learn how such assessment can be used effectively in treatment.

The present symposium is divided into three parts. The first part will describe the essential components of assessment-based treatment and give an overview of its efficacy and implementation for those who have sexually offended. The second will provide a brief overview of the domains that require assessment for evaluating and treating those who have sexually offended. The third part will illustrate with case examples how the MDSA can be used to identify treatment targets and to monitor progress in treatment. All symposium attendees will be given a CD with a copy of the PowerPoints for all three parts of the workshop and essential publications on assessment-based treatment and on the reliability and validity of the MDSA. The CD will also include the MDSA manuals, case histories, and examples of MDSA reports.

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Financial Interest: The MIDSA, developed by Drs. Sims-Knight and Knight, is commercially available as a clinical instrument. Dr. Sims-Knight is president of Augur Enterprises, Inc., which markets the MIDSA, and Dr. Knight has been involved in the creation, validation, and marketing of the current version of the MIDSA. Their commitment to Augur Enterprises is all voluntary, and they receive no financial compensation from it.

Assessment-Based Treatment: Validity and Application to Treating Sexual Aggression

Laurie Guidry, PsyD
Center for Integrative Psychological Services, Inc.

There is growing support for assessment-based treatment approaches in identifying treatment targets, tracking intervention outcomes, and increasing therapeutic efficacy in psychotherapy practice generally (Smith, Eichler, Norman, Smith, 2015). In parallel, in the context of the R-N-R approach to sex offenders, risk-needs assessments have served to expand the scope of sex offender risk assessment (Hamilton et al., 2017) in order to maximize treatment outcomes. This presentation will provide a review of the research that supports the validity of assessment-based treatment more generally and the ways in which this approach can be viewed to support the R-N-R principles applied to sex offenders more specifically. Further, an exploration of the principles of Collaborative/Therapeutic Assessment (CTA; Finn et al., 2012) or psychotherapy consultation and the growing empirical support for its utility will be offered and exemplified in a clinical case example informed by the MIDSA.

Learning Goals:

- Attendees will be introduced to the research that provides support for the validity of assessment-based interventions.
- Attendees will be introduced to the principles of a therapeutic approach to psychological assessment in treatment planning and how this approach promotes RNR principles.
- Attendees will review the fundamentals of a Collaborative/Therapeutic Assessment (C/TA).
- Attendees will be introduced to a case example regarding the application of CT/A to sexual offending.

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Assessing Critical Treatment Domains Using the MDSA

Raymond A. Knight, PhD
Brandeis University

Although there is no consensus on which measures should be used in the assessment of ADSOs and JVSOs, there is wide consensus on the overarching domains that require assessment. These will be identified and described briefly. The MDSA is a computerized, contingency based inventory that has been created to assess the developmental histories and current behaviors, attitudes, and cognitions of both ADSOs and JVSOs. It provides a detailed clinical report to support therapeutic interventions with both populations. The MDSA has been administered to more than 6000 juveniles and adults in outpatient, criminal, and community settings. Its reliability and validity have been extensively tested and 37 publications (24 peer-reviewed articles and 13 chapters) have reported the results of studies using its scales. Recently, the MDSA has been programmed to provide an assessment of a version of the Structured Risk Assessment, Forensic version (SRA:FV; Thornton & Knight, 2015).

This presentation will introduce the MDSA, giving a brief summary of its reliability and validity. It will give an overview of the domains that the MDSA covers. Through illustrative case histories it will demonstrate the unique information that the MDSA provides that is often not gathered by other methods and the benefits that a standardized assessment offers. Finally, it will give an overview of two general strategies that clinicians and evaluators can use in interpreting the MDSA report for assessment and treatment target identification.

Learning Goals:

- Attendees will be introduced to overarching domains that require assessment for ADSOs and JVSOs.
- Attendees will be introduced to the MDSA with a brief overview of its reliability and validity and illustration of how the MDSA
- Attendees will be given an overview of the domains assessed in the MDSA.
- Attendees will learn two strategies for using the MDSA to identify treatment targets.

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Case Studies Illustrating the Richness of the MDSA for Planning Treatment

Judith Sims-Knight, PhD
University of Massachusetts, Dartmouth

As indicated in the prior presentation, the MDSA Report contains a wealth of data on family, sexual, social, and antisocial history, as well as an extensive array to treatment relevant scales on current adaptation. This third presentation will use several cases to illustrate how clinicians can find treatment targets that are critical for three interrelated therapeutic perspectives important in the treatment of those who have aggressed sexually—trauma-informed therapy, Andrews and Bonta's (2006, 2010) risk, needs, and responsivity (RNR) model, and positive therapies such as the Good Lives Model. Participants will work on a case example and will generate treatment plans from MDSA responses.

Learning Goals:

- The presentation will elucidate the differing kinds of assessment information needed to inform treatment decisions for the three therapeutic points of view.
- Using case examples, the presentation will illustrate the usefulness of the MDSA for identifying treatment targets relevant to each therapeutic perspective.
- The presentation will demonstrate how the MDSA report accommodates multiple therapeutic perspectives and thereby allows clinicians to structure their intervention strategies to meet the individual needs of the client and fulfill the demands of assessment-based treatment.

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Raymond A. Knight, Ph.D., has been researching sexual violence for over four decades. Dr. Knight has published extensively on sexual aggression, psychopathy, and antisocial behavior. He is the co-creator of the Multidimensional Inventory of Development, Sex, and Aggression (MIDSA). Dr. Knight's research interests involve the classification, etiology, and prognosis of psychopathology; risk assessment of sexually coercive males; and the efficacy of bullying interventions in the public-school system.

Laurie Guidry, Psy.D., is a licensed clinical and forensic psychologist specializing in the assessment, treatment, and risk management of individuals who perpetrate sexual violence and in the prevention and elimination of sexual violence. Dr. Guidry has expertise in working with sexual offenders/abusers who present with co-morbid psychiatric conditions, intellectual developmental disorders, and traumatic brain injuries. Dr. Guidry is the Past President of the Massachusetts Association for the Treatment of Sexual Abusers (MATSA), serving in that role for 10 years and she currently serves as Chair of the MATSA Public Policy Committee. She is published in the field and is active in efforts to inform public policy on rational, evidence-based, and comprehensive approaches to maximizing public safety through the effective treatment and management of sex offenders. She was appointed by the governor of Massachusetts to the Commission to Reduce Sex Offense Recidivism and was honored by MATSA/MASOC in 2017 with a career service award in recognition of her work to end sexual abuse and sexual violence.

Judith Sims-Knight, Ph.D., is Chancellor Professor of Psychology at the University of Massachusetts, Dartmouth. She is a developmental psychologist who has studied the development of higher-order thinking and expertise for forty years. In the last fifteen years she has added a second line of research, exploring aggression, particularly sexual aggression, and bullying. She is the co-creator of the Multidimensional Inventory of Development, Sex, and Aggression (MIDSA), which is the inventory that will be demonstrated in the proposed symposium. Her primary interests in this domain are the etiology and differentiation of various components of aggression and bullying, and in gender differences in aggression and sexual aggression.