The Clinical Assessment of Treatment Change among Sexual Offenders, and the Relationship between Change and Risk

Sarah Beggs Christofferson, Ph.D., PGDipClinPsyc
Mark E. Olver, Ph.D.
Randolph C. Grace, Ph.D.
Stephen C. P. Wong, Ph.D.

Compared to the assessment of risk, relatively little research attention has been paid to the assessment of change achieved by sex offenders over the course of treatment. Despite this, assessments of treatment success or otherwise are often used to inform high stakes decisions in the criminal justice system. To the extent that empirically supported treatment change measures are either not available or not employed, clinicians may rely on ad hoc unvalidated methods, or even unstructured clinical judgement, to determine whether and how much a treatment completer has addressed their relevant needs. Literature reviews have revealed three broad categories of change measurement across sex offender treatment: repeat psychometric battery testing; specific risk assessment instruments incorporating change; and therapist-based change rating scales. Recent research has emphasised the need to integrate change and risk assessments. This paper will present the results of logistic regression analyses for a sample of 539 treated sex offenders followed up for an average of 15.5 years. These analyses yielded five-year recidivism estimates for combined risk and change sub-groups based on Violence Risk Scale: Sexual Offender Version scores. For example, the fixed five-year estimate for the group who were assessed as high risk pre-treatment but who were rated as having made a high amount of change (high risk/high change) was 24.6%. In contrast, the estimate for the high risk/low change group was 43.6%, and for the low risk/high change group, 1.3%. This method thus offers a much-needed means of measuring change across treatment in a structured way that is integrated with the assessment of risk, for enhanced clinical utility and validity.

Goals of the Poster Presentation:
1. Communicate the importance of employing structured and validated methods in the clinical assessment of treatment change among sex offenders.
2. Provide an overview of the methods of treatment change assessment available based on reviews of the literature.
3. Present research findings on the VRS-SO that provide support for its validity and clinical utility as a structured means of assessing treatment change, and integrating change and risk.