USE AND MISUSE OF TECHNOLOGY

Post-Conviction Sex Offender Testing (PCSOT):
Accuracy, Importance, New APA Standards and Tests

Eric Joseph Holden, M.A., LPC, Behavioral Measures Midwest, LLC
Joseph S. Henger M.S., LMFT, LPC, LICSW, Henger Enterprises Ltd
Eric Jay Holden, B.S., Behavioral Measures Midwest

Much has occurred from the first use of ‘Clinical Polygraph’ in the 1970’s to polygraphs current applications and uses with treatment & supervision professionals. PCSOT has evolved from an American phenomenon to accepted use in other countries from Europe to Asia. This has resulted in many questions about PCSOT’s dependability, utility, accuracy, test methodology, and future applications. The worldwide leader in addressing these questions is the American Polygraph Association (APA) and most organizations designing or re-designing PCSOT programs require compliance with APA PCSOT Standards & Principles of practice.

This presentation will:
a) Define the seven (7) approved APA PCSOTs effective 2009 –
b) Distinguish “Diagnostic Tests” from “Screening Procedures” –
   1) Pre-Conviction Testing v. Post-Conviction Testing
   2) Evidentiary Testing v. Investigative Testing
c) Define the APA’s critical rules that guide PCSOT test design –
d) Distinguish “the utility of a PCSOT” from “opinion accuracy” –
e) Define differences between -
   1) Polygraph applications in community based settings
   2) Polygraph applications in civil commitment settings
   3) Polygraph applications in institutional settings
   4) Polygraph applications in Risk Assessment
f) Discuss what current research demonstrates about PCSOT -
   1) Is there scientific validation for PCSOT?
   2) What effect does multiple testing have on test accuracy?
   3) What effect does ‘bad testing’ have on future test outcomes?
g) Evaluate how treatment providers, aware of polygraph’s strengths and limitations, can best use PCSOT –
1) To verify sexual history information to promote more accurate strategies of supervision and treatment
2) To developing a baseline of deviance
3) To employ the “Deviant Fantasy Masturbation Exam”
4) To aid in distinguishing low, moderate, and high-risk offenders
5) To identify which risk factors the offender has demonstrated to elevate their risk
6) To identify what rules offenders break with the risk factor?
h) Review future applications of post-conviction polygraph testing.

**Learning Goals and Objectives:**

- The participant will learn the most recent APA additions to the standard Maintenance, Monitoring, Instant Offense, & Sexual History PCSOTs. New additions include: a) The Sexual History 1 (She 1), Sexual History 2 (She 2), Instant Offense Investigative Test (IOI), Prior Allegations Examination (PAE). The participant also will learn when combining Maintenance and Monitoring test targets is allowed.
- The participant will understand that PCSOTs, as traditionally conducted, are not validated test procedures; therefore, reporting PCSOT outcomes as “Deception Indicated/No Deception Indicated” are not endorsed by the APA. Participants will learn what techniques examiners can use with PCSOT targets to achieve greater diagnostic accuracy and will learn to distinguish Diagnostic from utility Procedures.
- The participant will learn how to best utilize PCSOT procedures to identify offenders’ unreported behavior in community based and institutional settings, and how PCSOT procedures can aid treatment providers in assessing deviant fantasies and risk factors.

**Internet Access by Offenders in a Digital World**

**Advances in Acceptable Use Policies**

Thomas Brewer, Psy.D., Sunset Psychological Services, LLC
Diana Groener, M.A., LPC, Sunset Psychological Services, LLC

This workshop revisits our 2013 presentation that discussed the various issues presented when the clinician and the supervising entity (Department of Corrections, Court or Probation Departments) are working to allow an offender computer access, particularly use of the internet. The presenters revisit the inherent challenges when weighing the balance of security versus access. This presentation is less focused on the rationale for allowing access and more focused on the pragmatics of implementing an Acceptable Use Policy (AUP) in a clinical setting. The presenters outline guidelines for offenders wanting internet access and present decision trees regarding appropriate candidates for consideration. The presentation will provide examples of streamlined and revised
acceptable use policies, and offer sample internet use safety plans with case examples. The presenters will discuss what has been learned in the years since we last presented, including insights into what has gone right and what has not. Adjustments have been made based on feedback from supervising agencies, and plans are now focused more on identifying client risk factors and developing criteria for recognizing when these risk factors have been sufficiently mitigated to indicate that internet access is a reasonable option.

Security issues discussed include the parameters of use, including boundaries regarding acceptable use and location of use, and methods of accountability, including polygraphs. We outline the current monitoring and filtering software; however, we emphasize that the most effective tool for appropriate internet use is a well-prepared client. Clinicians and supervising agencies will gain an increased knowledge that will assist them in thinking critically about requests for internet access, developing acceptable use policies, and creating internet use safety plans.

**Learning Goals and Objectives:**
- Describe how to balance security versus allowing access
- Outline the content of sample policies and safety plans
- Think critically about requests for internet access
- Describe the use of polygraphs in terms of monitoring internet use
- Outline the current monitoring and filtering software available