

# Managing Known offenders in Congregations: 'Safe ministry to known offenders', is this achievable?

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# Overview

- What is required to manage risk safely
- Why do people sexually abuse?
- Difference between paedophilia and child sexual abuse
- Finkelhor model of child sexual abuse
- Risk instruments – examples and outcomes
- What factors increase or decrease risk
- Warning signs of increasing risk
- Need knowledge of sexual practices etc
- Grooming – victims and professionals
- How does risk level impact risk management?
- Risk management planning
- Role of outside professional support – when and what
- Case example.

# What is required to manage risk safely?





# Risk to the community...

## Missing sex offender spotted in Duhallow

A CONVICTED sex offender who was missing in a car park in Midstreet has left after two nights and has been spotted at Selfridges, Kilsken and Bohernabreena over the last two weeks.

Garrett, 39, Kilsken and Midstreet were monitoring the movements of Limerick native Richard O'Brien (52) very closely as he is wanted by the British authorities. O'Brien moved into a caravan in Midstreet last Wednesday but by Friday night a jeep

arrived and took it out of the field.

The Corkman understands that his last known sighting was in the Carillon at the Mervin meeting.

O'Brien was arrested in the UK of sexually assaulting a 16-year-old girl in 2004 and an adult woman on a phone booth for England in 2006. However, O'Brien had failed to sign on in Kilsken and did not notify the authorities of his move to Ireland. He had returned to his native Limerick and applied to

the town council for a house. However, O'Brien must move to a house in a given place the week before he has to sign on at the relevant Garda headquarters, but as he only spent two nights in Midstreet, he did not have to sign on at the main Garda headquarters in Kilsken.

No extradition warrant has been sought for him and it is unlikely that one will be forthcoming.

See Page 3



Richard O'Brien

**Daily Mail**

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BY SANDRA HOWARD "MILFIST"

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**Gold Coast The Bulletin**

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**Dob in this monster**

Colman, 55, said monster Oswald Thompson had eight years in prison for sexual abuse, but a judge ruled it was inappropriate for him to receive a life term.

Colman was charged with sexually assaulting a 16-year-old girl in 2004 and an adult woman on a phone booth for England in 2006. However, O'Brien had failed to sign on in Kilsken and did not notify the authorities of his move to Ireland. He had returned to his native Limerick and applied to the town council for a house. However, O'Brien must move to a house in a given place the week before he has to sign on at the relevant Garda headquarters, but as he only spent two nights in Midstreet, he did not have to sign on at the main Garda headquarters in Kilsken.

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**Daily Mail**

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**OUTCRY AT E17N PAYOUTS TO DETAINEES OVER DELAYS IN THEIR CASES**

**Camilla's tragic brother and his secret lover**

# Why do people sexually abuse?

It is not just about sexual deviance....



# Why do people sexually abuse?

- But also about:
  - Poor social skills,
  - Inappropriate or inadequate sexual self-regulation skills,
  - Immature intimacy skills,
  - A lack of opportunity for other, age-appropriate relationships,
  - Self-esteem or other psychosocial concerns that make dating an adult too confronting

# Difference between paedophilia and child sexual abuse...

- These two things are often conflated.
- Paedophilia is a psychiatric concept – child sexual abuse is a legal one.

# DSM 5 (2013):

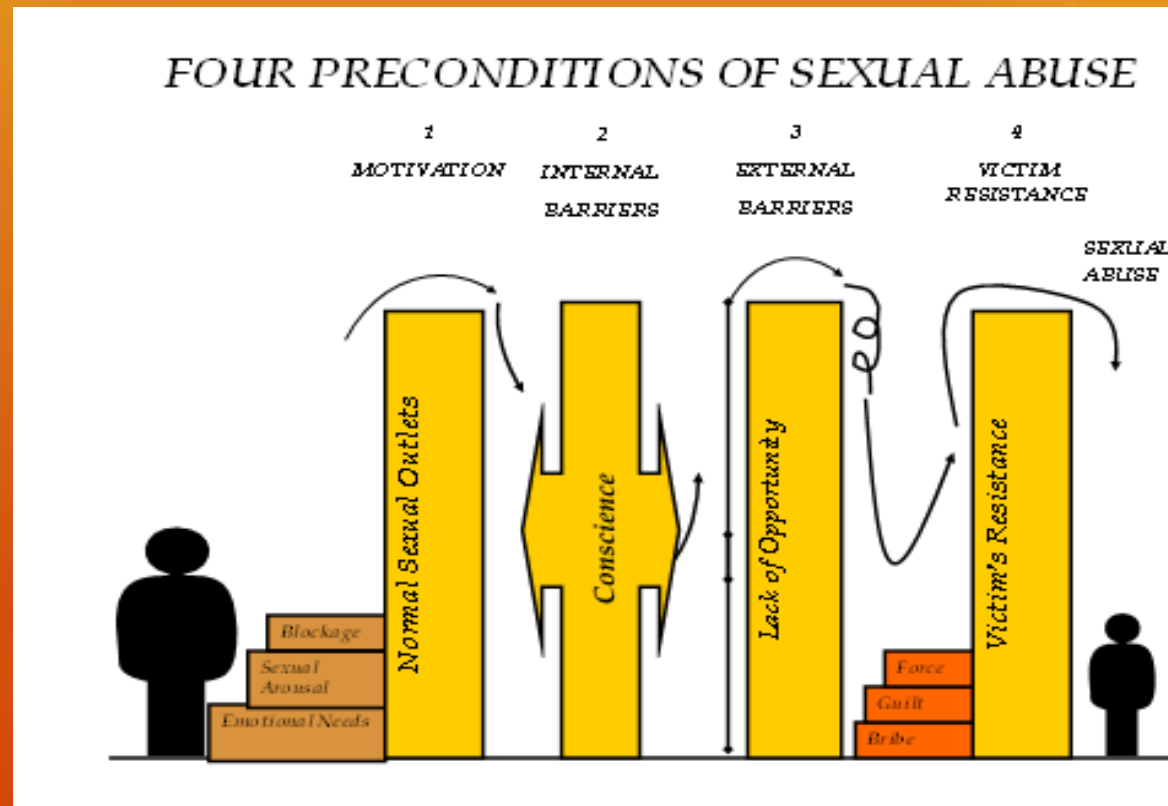
- A Over a period of at least six months, recurrent, intense, sexually arousing fantasies, sexual urges, or behaviours, involving sexual activity with a prepubescent child or children (generally 13 years or younger).
- B The individual has acted on these sexual urges, or the sexual urges or fantasies cause marked distress and interpersonal difficulty.
- C The individual is at least age 16 years and at least 5 years older than the child or children in Criteria A).



# DSM 5 continued...

- Specify:
  - Exclusive Type (i.e., only attracted to children)
  - Non-Exclusive Type
  - Sexually Attracted to Males
  - Sexually Attracted to Females
  - Sexually Attracted to Both
  - Limited to Incest

# Finkelhor Model



# Risk Instruments



# Risk Instruments

- Some can only be scored by psychologists
- Developed on the basis of the research literature
- Are retrospective in nature but designed to be applied prospectively
- False positives are more palatable than false negatives
- Most sex offenders will never go on to reoffend (Hanson & Harris, 2004).

# Mills & colleagues in Canada

*"If you saw a report that indicated an offender was a Low/Moderate/High risk to re-offend in general/violently/sexually, what percentage do you think this represents?".*





# Risk assessment

- Consider both static and dynamic risk factors
- The Static-99 is the “Gold Standard”

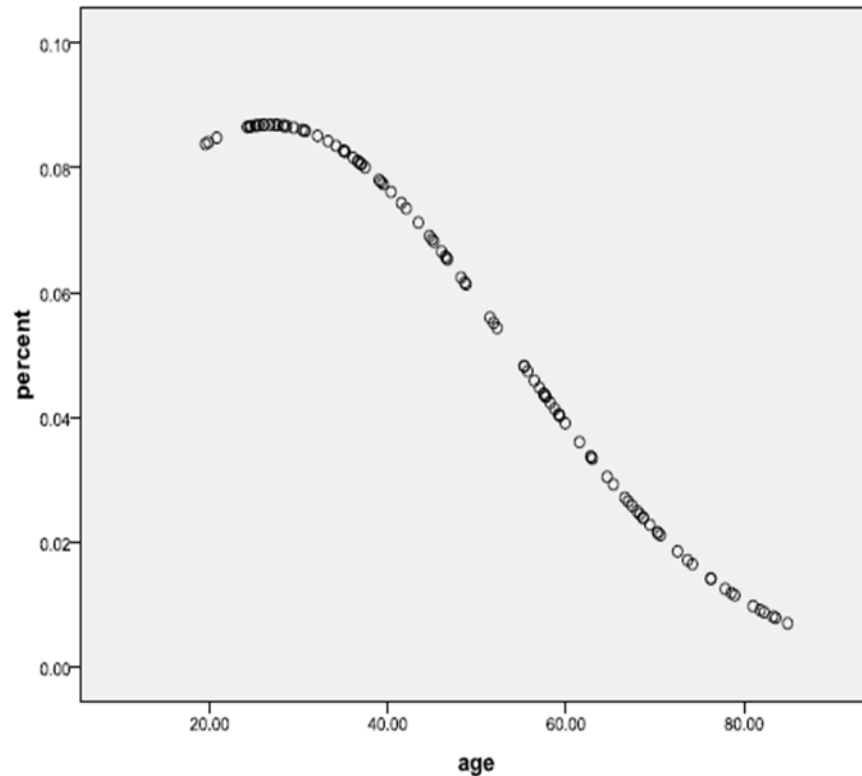


# Static 99 items

- Number of previous sex offence charges/convictions (record whichever is higher),
- Offender age,
- Presence of stranger victim,
- Presence of male victim,
- Never lived with a lover for more than two years.

# Static 99 – Age and recidivism

*Figure 2. Recidivism as a function of age at release (using logistic regression)*



Source: Helmus, L., Babchishin, K.M., Hanson, R.K., & Thornton, D. (2009). "Static 99R: Revised Aged Weights".

# Dynamic risks...

- Are an index of live risk.
- Can change over time.
- Examples:
  - Chronicity of sexual violence
  - Psychological coercion in sexual violence
  - Attitudes that support or condone sexual violence
  - Problems with stress or coping
  - Sexual deviancy
  - Major mental illness
  - Problems with supervision.

# What factors increase or decrease risk?

- Personal destabilisers like a relationship breakdown, job loss, loss of a loved one, rejection etc,
- Poor coping strategies
- Increasing sexualisation
- Opportunity





# Continued...

- Positive social supports,
- Positive emotional coping skills,
- Resilient mental health,
- Positive relationship skills,
- Prosocial attitudes, and
- Appropriate intimacy skills.



# Warning Signs



- Reduced self-care,
- Increased social isolation,
- Seeking out contact or time with potential victims,
- Increasing sexual preoccupation,
- Increasing pornography use,
- Increasing sexual fantasy,
- Increased masturbation,
- Increasing distance in their primary intimate relationship (if they have one),

# Continued...



- Decreased communication,
- Increased superficiality in conversation/interpersonal relationships,
- Increasing risk taking behaviours (e.g., walking home past a school etc),
- Keeping secrets and lying,
- Increased irritability,
- Increasingly distorted thinking,
- Increased substance abuse,
- Withdrawing from people who will hold them accountable,
- Lack of responsibility and failure to attend to appointments etc,
- Increased grooming behaviours.

# Offence Cycle...



# Need to know!!!

- Transition through puberty
- Sexual development and awareness
- Relationship history
- Sexual history
- Fantasy
- Sexual attraction
- Deviant sexual interests
- Pornography use



# Continued...

- Masturbation practices
- Sexual attitudes
- The role sex has played in the person's life generally
- Any history of the use of sex as an emotional coping strategy
- Understanding of consent
- Victim empathy

# Grooming

## ○ The Stereotypical Sex Offender!!!



# Grooming



# Examples:

- Giving compliments,
- Buying things,
- Being overly nice or friendly,
- Highlighting that the person can be trusted,
- Establishing a “special” position,
- Making the target feel loved or appreciated,
- Making the other person feel special,
- Finding out about personal information about the target (including their vulnerabilities or weaknesses),
- Isolating them from others in the target’s life,
- Making the person feel responsible for the offender and their wellbeing/safety,
- Creating a dependence in the relationship,
- Offering protection and loyalty (and expecting the same in return),
- Bribing,
- Blaming others for things that are their responsibility and recruiting others to have similar perspectives.

# Grooming...

*As a child I spent years living in fear of my violent alcoholic father who would beat my mum, threaten to kill us have affairs etc. When he finally left us all for another woman, he left us with no home and a broken mum.*

*At 12 and with no one to turn to I felt grateful when an older man in his late 40's who was respected in the community took an interest in me and gladly listened to my concerns and problems. He ran a small local community centre with a bar and I would often go down there to hang out with my friends. My friends always had young lads after them and no one ever seemed interested in me - until of course this particular man started to declare his love for me.*

*At first it was because I was apparently like his daughter and he would tell me how beautiful I was. I was extremely flattered and was grateful for the compliments. I began to see him more often and he would allow me to stay late at the centre and buy me lots of alcoholic drinks. When we were alone he would touch me, show me his penis but always told me this was because he loved me.*

*This went on for over three years. . After he had left his job at the centre I met him and we slept together. I never saw him again. I had consented to sex just as I had allowed him to touch my body and kiss me because I loved him and he promised me the world.*

○ Source: [www.dancinginthedarkness.com](http://www.dancinginthedarkness.com)



# How does risk level impact on risk management?

The best predictor of future behaviour is past behaviour!



# The process...

1. A comprehensive risk assessment needs to be conducted on a person to be able to understand the reasons why they offended, what purpose that offence served for them and what the nature of their risk is in the future.
2. This process has to include a specific, detailed and comprehensive assessment of that person's psychosexual functioning and capacity.
3. The outcome of this should be an assessment of the person's risk in terms of level, extent, severity, target and nature.
4. This risk assessment will lead on to a risk management plan and part of this may be enacted by community based supports, such as the Church.
5. That the risk management plan will in all likelihood involve some specialist psychological treatment designed specifically to ameliorate the risks of sexual offending. NB This is a specialist skill set and not all clinicians are competent to do this work.

# Risk Management

- 1. Treatment
- 2. Supervision
- 3. Monitoring
- 4. Victim Safety Planning?



# Risk Management Strategies

- 1. Environmental
  - 2. Situational
  - 3. Cognitive, and
  - 4. Behavioural.
- 
- Also: preventative and coping.

# Ask questions about:

- The nature, frequency and intensity of sexual thinking,
- Whether the person is noticing potential victims,
- Whether the person is sexualising others,
- Whether the person is using pornography and if so, what kind and how often,
- Whether the person is using technology safely,
- Who are they in contact with and do these people have children,
- Whether they are keeping secrets,
- Whether their sexual habits have changed,
- Are they attending their appointments and maintaining their responsibilities – for example with the CPR,
- Are they engaging in risks – which may include catching public transport at times when children are about, etc etc.

# Consider their relationships...

- What relationships are safe for an offender?
- What level of contact would be appropriate for an offender to have with which people?
- Is it appropriate for an offender to have contact with an ex-victim? Or a potential victim?
- Who does an offender tell about their behaviour and what do they tell?
- What risk management strategies do they need to have in place to make contact safe?
- Does contact need to be supervised? If so, who would be an appropriate person to supervise?
- Are there opportunities for offending (including grooming) in contact?



# Role of Outside Professional Support – when and what?

- Support needs to be informed by an understanding of risk,
- Risk assessment should be conducted by those with specialist knowledge of this practice,
- Support should be approached from the perspective that risk is changeable and dynamic,
- Support should be approached from the perspective that risk should not be ignored, even when it is assessed as being low,
- That support should entail open, regular and transparent discussions about risk,
- That these discussions will necessarily include a focus on sex and on deviant sex,
- That it should be recognised that although we hope risk to continue to decrease, there are times when risk will increase,
- At these times “tough love” is important and it may be relevant to them seek out professional advice or support, including possibly referring the person back to psychological treatment.

# Case Example - X



# Useful websites



- [www.anzatsa.org](http://www.anzatsa.org)
- [www.nearipress.org](http://www.nearipress.org)
- <http://www.safer-society-press/>
- <http://www.ecav.health.nsw.gov.au/>
- [www.croga.org](http://www.croga.org)
- <http://www.secasa.com.au/>

○ Questions???

○ Thank you.

