

Introduction to Sex Offender Treatment

Individual Therapy

Individual therapy for sex offenders is an important starting place and continues to be a primary method of intervention. Goals include education, disclosure, and arousal restructuring, as well as attention to mental health and developmental issues. The preferred therapeutic orientation is the cognitive behavioral model – well suited to externalizing types of problems such as sexual offending – which assumes that feelings influence behavior, and that feelings emanate from thoughts based upon belief systems and developmental experiences. Most theorists acknowledge that sexual offenders cannot be “cured” though they may learn to remain safe by becoming accountable.

Group Therapy

Group therapy is a preferred method of intervention for sexual offenders. Goals include education, disclosure, support, and the opportunity to practice and develop healthy accountable relationships with others.

Family Therapy

Family therapy with adolescent sexual offenders is an important part of successful reunification and reintegration. Goals for family therapy include education, adjustment of power dynamics within the family, reduction of denial within family members, establishment and/or reinforcement of boundaries, and improvement of accountability and limit setting skills. A paradox is that while many forms of family treatment seek to increase family tolerance for differences, sex-offense specific family treatment seeks to reduce family tolerance for the offender and increase willingness to have the offender removed.

Legal Involvement

Sex offense is a legal issue as much as a social and mental health issue, and the intense evasiveness, manipulativeness, and resistance of offenders has virtually required legal involvement to motivate sex offender through treatment. Sex offenders are generally more successful with longer probation terms and stiffer legal sanctions versus lighter, shorter, or deferred sentences that let the offender “off the hook” and communicate a lack of seriousness towards the problem.

Community Education

Educating community members about the dynamics and issues of sexual assault and sex offender treatment will help generate an adequate understanding, on the part of community members, of offenders' needs for continuous supervision and high expectations for accountability. Those directly affected by a person's abusive behavior may benefit from learning details related to an offender's inappropriate sexual behavior. The offenders knowledge of community members will increase the offender's healthy anxiety about his abusive sexual behavior.

Victim Involvement in Offender Therapy

Victims play the most important role in offender treatment. It is often the victims whom offenders are least accountable to, and lack of regard for victims allows offenders to maintain distorted attributions about their sexual behaviors, and contributes to a lack of change. Victim involvement in offender treatment is intended primarily to support the assertive recovery of victims of sexual assault and secondarily to assist the offender in becoming accountable.

Arousal reconditioning

Persistent inappropriate (deviant) sexual arousal is a problem that plagues many offenders and interferes with their intentions to remain safe. The maintenance of a deviant fantasies is believed to underlie the ever increasing levels of deviance that many offenders report over time. Arousal reconditioning therapies are designed to interrupt the offenders maintenance of deviant sexual fantasies and allow the development of more normative sexual interests.

Multi-systemic Containment Treatment

Containment treatment assumes that offenders will not remain accountable without an informed supportive network of people concerned about the offender's behavior in the community. Such a network can insure accountability and enforce a sense of “caughtness” that can be a powerful deterrent to reoffense and becomes an important source of social and emotional support for offenders in the community.

Attachment and Trauma Work

A significant percentage of offenders are themselves victims of abuse and trauma and may suffer from symptoms of chronic stress, attachment problems, or developmental/maturational difficulties. While these issues vary considerably, a number of therapeutic methods must be made available to facilitate human development in a manner that results in competent self management skills and a sustainable belief in oneself as a person worthy of success. Among these methods are attachment and trauma therapies, life skills training, and recreation, leisure, and vocational training.

R. Nelson (1998)