Literature Review -
What Works in work with Sexual Offenders
Hazel Kemshall, Gill Kelly, Bernadette Wilkinson, Sarah Hilder

Associate Partners:

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Literature Review -
What Works in work with Sexual Offenders

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Background and Introduction

This review forms part of an EU funded project ‘Serious Offending by Mobile European Criminals’ (SOMEC). The project has the following objectives:

- Assess the threat posed to European citizens when serious violent or sexual offenders travel between EU Member States.
- Identify the methods and effectiveness of mechanisms used by EU Member States in the management of serious violent or sexual offenders travelling across borders.
- Explore critical success factors and provide recommendations to facilitate the improved exchange of information for the prevention of crime.

This review supports objective two by providing a summary of ‘what works’ with sexual offenders and seeks to highlight key research on sexual offenders, their assessment, interventions, and broader management responses. The review identifies the most effective responses as supported by the current state of research evidence, approaches under development, and identifies areas of potential good practice. Violent offenders are the subject of a separate short overview document.\(^1\) The term ‘dangerous offender’ is purposely avoided, as it is open to considerable debate and interpretation. The SOMEC project has focused on serious violent or sexual offenders, using a tighter focus on specific offence types resulting in serious physical harm or psychological trauma. The review is not exhaustive and is limited by access to English speaking publications with some limited reference to European publications. The methodology and search strategy are outlined in the body of the report and follow the expected process and standards for reviews of this type.

Risk Assessment and Risk Factors

Studies have generally established those factors most associated with sexual recidivism and that structured assessments combining actuarial/static factors\(^2\) with dynamic ones offer the most predictive accuracy. In addition, the knowledge base on which risk assessment tools

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2. In brief, these are risk factors based on aggregated group data derived from statistical analyses, and often referred to static factors as they are least amenable to change, or are related to demographic factors such as age or gender. It is most often associated with the insurance industry and calculations of accident risks for example.
are based seems generally accepted. \(^3\) Risk factors noted as most evidenced for predicting sexual recidivism were outlined by Whitaker et al (2008); and largely confirmed and expanded by Mann et al (2010). These are:

- sexual preoccupation
- deviant sexual interest
- sexual preference for children
- sexualised violence
- multiple paraphilia
- offence supportive attitudes
- emotional congruence with children
- lack of emotionally intimate relationships with adults
- never married
- conflicts in intimate relationships
- lifestyle impulsivity/general self-regulation problems
- impulsivity and recklessness
- employment instability
- poor cognitive problem solving
- resistance to rules and supervision
- childhood behaviour problems
- non-compliance with supervision
- violation of conditional release
- grievance/hostility
- negative social influences.

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\(^3\) See the Risk Assessment Tools Evaluation Directory (RATED) from the Risk Management Authority in Scotland which outlines the research evidence underpinning currently available risk assessment tools (available at: http://rated.rma.scotland.gov.uk/ accessed March 4th 2014.)
Approaches to Risk Management

Three key areas of risk management are reviewed: regulatory controls including civil measures; individually focused interventions; and desistance approaches. There is a lack of rigorous empirical research on regulatory methods, particularly sex offender registration and community notification, with the actual contribution of such measures to recidivism reduction unclear. The impact of sex offender registration on crime reduction and sexual offending recidivism is debatable, with 6 empirical studies finding no impact (see: Letourneau et al (2009a); Letourneau et al (2009b); Sandler et al (2008); Tewksbury and Jennings, (2010); Zevitz, (2006); Zgoba et al (2010); Zgoba et al (2008)). However, Prescott and Rockoff (2008) found that it did reduce recidivism amongst registrants, possibly because sexual offenders know they are being monitored (however this impact is questionable where registers have very high numbers and low levels of monitoring, as with larger USA registries). One study examining pre and post implementation periods found little impact on recidivism (see Duwe and Donnay, 2008).

Community notification has been the subject of intense debate, and Anderson and Sample (2008) found that most citizens do not access registry information. Tewksbury et al (2011) found that sex offender registration and notification (SORN) is ‘not a significant predictor of sexual or general recidivism’ (p. 324). However, they note key limits to this study and to others, notably that the measure of recidivism used was an ‘official measure and focused exclusively on re-arrest data’ (p. 325) and not actual reoffending. In addition, they note that SORN is implemented differently across the USA, and therefore studies do not necessarily compare like with like; and offender samples can be skewed by different offence types. However, it is a robust pre and post comparative, longitudinal study. The study also confirms previous studies by Sandler et al (2008); Schram and Milloy (1995); Tewksbury and Jennings (2010); Vasquez et al (2008); Zgoba et al (2008, 2010); Zimring et al (2007, 2009) which all found limited impact on recidivism rates.

Across Europe there are a range of compulsory treatment measures, but the use of compulsory treatment measures has attracted limited evaluative studies to date. Compulsory treatment has been critiqued on the grounds of possible over-use and a recent more robust study in the USA (Duwe, 2013) has argued for selective imprisonment/compulsory treatment on both ethical and cost grounds. Preventive sentencing has also attracted similar debates and challenges on the grounds of proportionality; rule of law; and justice. However, Slobogin
(2011) has argued that seven key principles can offer significant safeguards. The Scottish system of Orders for Lifelong Restriction is posed as an example.4

There remain some reservations about the knowledge/research evidence on the effectiveness of interventions focusing on the individual. However, cognitive behavioural methods are generally regarded as effective although it is argued that not enough is known about the significance of particular elements of Cognitive Behavioural Treatment (CBT) (exactly what works, how and for whom). Within the context of CBT programmes there is some support for motivation improvement approaches, a focus upon relapse prevention which links to the more positive future-oriented approaches. There appear to be a number of factors that improve the design and delivery of programmes. In brief, these are linking the intensity of interventions to the level of risk, and targeting more intensive treatments at higher risk offenders. The use of written handbooks on programmes also has some benefit, particularly in achieving integrity of delivery.

The importance of tailoring interventions to diverse groups (often a very small minority in the sexual group as a whole) is accepted. The low take up of Sex Offender Treatment Programmes in the UK by Black and Ethnic Minority sexual offenders has been highlighted as problematic although to date robust studies examining this issue are rare. Research on female sexual offenders has focused on the different relational contexts in which offending takes place and, stemming from this, the suggestion that women often co-offend with male sexual offenders.

The evidence base on desistance, that is the process of an offender stopping offending, is growing with studies beginning to identify the key desistance factors. The most notable approach is the Good Lives Model (Hanson and Yates 2013), a strengths-based approach to offender rehabilitation in which treatment aims to equip offenders with the skills and resources necessary to satisfy primary goods, or basic human values, in personally meaningful and socially acceptable ways.

There is some support for the view that multi-disciplinary/multi-agency approaches can be effective in work with individuals. One reconviction study (Peck 2011) comparing an offender cohort pre the introduction of Multi Agency Public Protection Arrangements in England and Wales with a cohort post implementation found a reduction in recidivism rates. Whilst the study did not fully meet the requirements of a long term reconviction study, and had some limitations in constructing fully comparable cohorts, it does represent the first evaluative study of MAPPA impact on reconviction rates for sexual and violent offenders.

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Conclusion

The research base is developing and it is difficult to draw definitive conclusions due to lack of robust studies in all areas of interventions. However it is possible to conclude that legal responses need to be supported by a range of effective intervention responses. Regulatory responses comprising sex offender registration, community notification and preventative orders have largely been confined to the Anglophone jurisdictions, and transferability to other jurisdictions with differing legal and penal codes cannot be assumed.

Cognitive behavioural interventions have been the most frequently researched, and the effectiveness of formal programmes with sexual offenders has been confirmed. However, CBT would benefit from further robust studies particularly of community based interventions. Desistance focused approaches are making a contribution and the evidence for their effectiveness is growing.

The use of formal and structured risk assessment is well supported by the evidence base, and although risk factors for sexual offending across a range of offence and offender types continue to be refined, the knowledge base on risk factors is well supported and is available to practitioners. The need for systematic assessment of individuals is widely acknowledged across jurisdictions and supported by research.

Multi agency responses, particularly across criminal justice agencies continue to be largely located within the Anglophone jurisdictions. Multi agency responses lack a significant number of outcome evaluations, however the recent evaluation of Multi Agency Public Protection Arrangements (MAPPA) in England and Wales is encouraging.

Those approaches most supported by the research evidence have been presented in this review. In brief these are:

- Structured and systematic assessments focused on those risk factors most supported by research and carried out by skilled and well trained practitioners;
- Assessments which are sensitive to the differing offence types and offender types, and that can make sense of differing pathways to offending and the subtle interaction of risk factors;
- Cognitive behavioural interventions and programmes have the largest evidence base, but there is evidence for other approaches such as Circles of Support and Accountability, Multi Systemic Therapy (MST) particularly for adolescents, and the Good Lives Model;
Interventions should support compliance and desistance with particular attention to reintegration issues, social supports, and pathways out of offending;

Regulation and legal responses alone have limited impact.

This indicates that a combination of responses to sexual offenders is required for maximum effectiveness combining both protective and integrative measures.
Section 1 - Introduction

1.1 Purpose, Scope and Limitations

This review forms part of an EU funded project ‘Serious Offending by Mobile European Criminals’ (SOMEC). The project has the following objectives:

- Assess the threat posed to European citizens when serious violent or sexual offenders travel between EU Member States.
- Identify the methods and effectiveness of mechanisms used by EU Member States in the management of serious violent or sexual offenders travelling across borders.
- Explore critical success factors and provide recommendations to facilitate the improved exchange of information for the prevention of crime.

This review supports objective two by providing a summary of ‘what works’ with sexual offenders (information exchange mechanisms are discussed in a separate literature review)⁵, and focuses on the assessment and management of sexual offenders. Violent offenders are the subject of a separate short overview document.⁶ The term ‘dangerous offender’ is purposely avoided, as it is open to considerable debate and interpretation. The SOMEC project has focused on serious violent or sexual offenders, using a tighter focus on specific offence types resulting in serious physical harm or psychological trauma.

The review is not exhaustive, and seeks to highlight key research on sexual offenders, their assessment, interventions, and broader management responses. The review identifies the most effective responses as supported by the current state of research evidence, approaches under development, and identifies areas of potential good practice.

The review is limited by access to English speaking publications with some limited reference to European publications. There is therefore a preponderance of material from North America, Northern Europe and Anglophone jurisdictions such as Canada, Australia and New Zealand. McAlinden (2012a) has also contended that the Anglophone jurisdictions have had an increased focus on sexual offending with a greater reliance on legal and punitive responses. Traditionally many European jurisdictions have adopted medical as opposed to criminological approaches to the problem. Herzog-Evans (2011a, 2011b) has also contended that some countries have less of a tradition of scientific evaluation of interventions (e.g. in

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⁵ This is available at: http://www.somec-project.eu/default.asp?page_id=565&name=Mapping Report

⁶ This is available at: http://www.somec-project.eu/default.asp?page_id=563
France). High profile cases have also provided an impetus for more recent developments in Europe (for example the Dutroux case in Belgium), and have led to the adoption of risk assessment tools in some jurisdictions (e.g. Belgium, and the Scandinavian countries). This in turn results in a growing evaluation research base across Europe.

However, Anglophone countries (either through politics or culture) have a more extensive history of responding to sexual offenders, particularly through penal sanctions and systems of proactive regulation (see Connelly and Williamson (2000) for an historical overview; McAlinden, 2012a). Therefore a large proportion of the material reviewed here consists of critiques and evaluations of systems, procedures and interventions, designed in these English-speaking countries, often as policy responses to serious high profile cases, and to reduce risk to the public (Mercado and Ogloff, (2007); Logan, 2011; Vess et al.,( 2011)).

1.2 Methodology

Three linked topic areas formed the basis of the literature review:

a) What works in managing sexual offenders in the community and post-custody

b) Impact and effectiveness of sex offender registers, community notification, compulsory treatment and detention orders

c) Best programmes and interventions

In relation to (a) we initially searched three databases:

- Birmingham and De Montfort University Libraries general database
- EBSCO Information Services (a search platform for e-journals, e-books, and research search databases.
- Europa (the gateway to the European Union)

Key search terms used were: prevention of sexual offending, sexual offending, sex offending, preventing sex offending, sexual offenders in the community, sexual offenders in prison and effective interventions with sexual offenders.

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7 Dutroux, a 47 year old unemployed Belgian, kidnapped and sexually abused two girls, keeping them concealed in an underground cell in his house. This case shocked Belgium and led to a review of child sex offender polices and regulation. See: http://www.crimelibrary.com/serial_killers/predators/dutroux/evil_1.html; accessed July 24th 2014.

8 These were the topic areas identified in the initial brief. They were refined during the search process to result in the current framework of this report.
In relation to (b) we initially searched two databases:

- Pro-Quest
- EBSCO

A number of key professional journals\(^9\) were also searched

Key terms used were *male sexual offenders, regulation of sexual offenders, preventive detention and sexual offenders, civil orders to regulate sexual offenders, sexual offenders AND prison and sexual offenders AND foreign travel*.

In relation to (c) the assumption was that material would be identified in the literature reviewed relating to (a) and (b). The review particularly sought robust studies relating specifically to the implementation of interventions.

All searches were confined to peer-reviewed articles published since 2005 in English and French. Managing Internet sex offending was not specifically included, as this was seen as potentially outside the SOMEC project parameters of serious sexual offending. In addition, the starting point of 2005 was taken in order to focus on research work produced within the last 10 years only, with some supplemental literature if pertinent to a topic area and including relevant pre 2005 papers.

On the basis of these two initial searches we undertook a further search using Google and the Council of European Probation (CEP) knowledge database.\(^10\)

Material was then screened for relevance to the three topic areas and any repetition of items. An abstract read was undertaken on 509 selected items.

Papers were selected for full text screening via this abstract read. They were selected on the basis of relevance to the first two questions in the brief (What works in managing sexual offenders in the community and post custody, and the impact and effectiveness of registers, civil orders). The assumption was that examples of good practice (the third strand) would emerge from this initial full text reading.

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\(^9\) e.g. The Probation Journal, the European Journal of Probation, The Howard Journal

\(^10\) The planned process of the review and record of the three searches is included in Appendices I and II.
The 143 papers selected for Full Text read were then clustered into 5 thematic folders representing emerging key themes from the reading this far:

- Addressing and reducing risk factors (68 items)
- Desistance approaches (6 items)\(^{11}\)
- Diversity (including women, adolescents and offenders with mental disorder) (20 items)
- Civil Orders and regulation (35 items)
- European contextual material (24 items)

During the full text reading of these documents, the key content of each item was summarised and then the item was ranked in terms of its relevance and usefulness to foci of this literature review. A Red-Amber-Green (RAG) colour coding system was used: RED high usefulness; AMBER moderate usefulness; GREEN limited or little relevance to the SOMEC project\(^{12}\).

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\(^{12}\) The summary of this full text read is available by contacting kemshall@dmu.ac.uk.
Section 2 - Managing and Intervening: What is known and what works in prisons and community

2.1 What is known about sexual offenders and risk assessment

2.1.1 Limitations upon achieving a common understanding of sexual offending and sexual offenders

There are some caveats about achieving understandings that are relevant and common across jurisdictions (McAlinden, 2012a). For example, there are differences of definition of what constitutes sexual offending. Baratta et al (2011), in describing the decision-making process in France, distinguish between penal definitions (acts which are defined as illegal) and medical definitions (types of behaviour that may or may not be illegal). A recent UK report argued that ‘... the term “sexual harm” requires statutory definition’ (Davies, 2013). Many studies identify the range of behaviours that come within the definition of sexual offending and acknowledge the potential difficulty this poses for research (Vess et al, (2011); Tewksbury et al, 2011).

Different judicial systems and decision-making processes can affect how and what offending is recorded (McAlinden (2007); Petrunik and Deutschmann, (2008); Tully et al., (2013)), then how judgments are made on the basis of data (for example, about levels of recidivism) and thus, the transferability of research results (see for example Hosser and Bosold (2006) writing about approaches to Adolescent Sex Offenders in Germany). This links to the accuracy and recording of data and different methodologies in analysing that data which can produce variations in results and difficulties in comparing like with like (Tewksbury et al, 2011).

However, Hanson and Bussière (1998) in a widely cited key meta-analytic study, provide a methodological base line for the establishment of risk factors critical to risk assessment for sexual offending. Other subsequent studies have sought to evaluate the relevance in practice of risk assessment tools and to build upon and refine Hanson and Bussière’s work in the light of experience. These later studies include Hanson and Morton-Bourgon (2005); Doyle et al (2011); and Tewksbury et al (2011).

2.1.2 The Profile of Sexual Offenders: Risk Factors and Recidivism

Drawing upon all of these studies it is possible to arrive at some conclusions which are transferable across different jurisdictions.
Recidivism rates are not high compared with other groups of offenders but some sub-groups of sexual offenders are statistically more likely to re-offend than other sexual offenders. The meta-analytical study by Hanson and Martin-Bourgon (2005) conclude that most sexual offenders are not caught for another sexual offence (for example between 7% to 15% of sexual offenders re-offend after five years) and are more likely to re-offend with non-sexual offences (Hanson reiterates these findings in Helmus et al, (2012)). This latter point resonates with research by Doyle et al (2011) which notes criminal diversity amongst higher risk sexual offenders that has been associated with a lifelong pattern of antisocial behaviour. Relevant characteristics of higher risk groups have been identified as sexual deviancy, anti-social orientation and the choice of victim (Hanson and Martin-Bourgon (2005), again reinforced by the study by Doyle et al, (2011)).

Risk factors noted as most evidenced for predicting sexual recidivism were outlined by Whitaker et al (2008); and largely confirmed and expanded by Mann et al (2010). These are:

- sexual preoccupation
- deviant sexual interest
- sexual preference for children
- sexualised violence
- multiple paraphilia
- offence supportive attitudes
- emotional congruence with children
- lack of emotionally intimate relationships with adults
- never married
- conflicts in intimate relationships
- lifestyle impulsivity/general self-regulation problems
- impulsivity and recklessness
- employment instability
- poor cognitive problem solving
- resistance to rules and supervision
- childhood behaviour problems
- non-compliance with supervision
- violation of conditional release
Sexual offenders are not a homogenous group. The diversity of sexual offenders, particularly in the nature of their offending, the range of behaviours, how far they are specialist offenders, victim types, prior history and lifestyle issues is well researched (Beech et al 2009). Questions have also been raised about the causal relationships between these personal and social risk factors (Kirsch and Becker, 2006).

It is widely acknowledged that the actuarial/static risk factors\(^\text{13}\) for sexual offenders captured in risk assessment tools are generally predictive of recidivism (Craig and Beech, 2010). Even countries where the use of research-based tools is relatively under-developed, have begun to draw upon the research findings associated with the tools in developing their own approaches to sexual offenders (Ducro et al, 2012).

In relation to dynamic risk factors which form the basis of clinical assessments and the targets of intervention, there is less robust evidence (Mercado and Ogloff, 2007) or widespread agreement. Across the literature, however, the following individual characteristics are frequently identified:

- poor social supports
- intimacy deficits
- lack of empathy
- attitudes tolerant of sexual assault,
- antisocial lifestyle,
- poor self-management or emotional regulation (Gillespie et al, 2012), including sharp increases in anger
- poor cooperation with supervision or recognition of the possibility of recidivism
- sexual preoccupations
- grooming access to victim(s), or having current access to victim(s)
- limited schooling and unstable employment records,
- the presence of substance abuse

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\(^{13}\) In brief, these are risk factors based on aggregated group data derived from statistical analyses, and often referred to static factors as they are least amenable to change, or are related to demographic factors such as age or gender. It is most often associated with the insurance industry and calculations of accident risks for example.
- elevated rates of mental disorder
- denial of sexual offending and of sexual deviant behaviour.

This list draws largely upon Mercado and Ogloff (2007) and is supported by the later work of Doyle et al (2011); and Pham and Ducro (2008), Pham,et al (2010)). Some of the risk factors remain the subject of debate, notably empathy (Kirsch and Becker (2006); Schaffer et al, (2010), and denial (Ware and Mann (2012); Grady et al (2013)). Studies which set out to evaluate the local practice use of risk assessment tools may also highlight dynamic risk factors which seem to have a particular relevance within that national jurisdiction (e.g. Pham and Ducro (2008) Pham et al, (2010)).

A recent study of the impact of sex offender registration and notification on reducing recidivism (Tewksbury et al, 2011 ) argues for more research to develop more individualised offending trajectories to explain the processes whereby risk factors interact to produce offending. This is akin to the attention paid in research into female sexual offenders to different offending typologies and different offending trajectories or pathways (Gannon et al 2010).

### 2.1.3 Assessing Sexual Offenders

There is also some consensus about the importance of assessments individualised to the offender in order to inform decision-making; for example, Tully et al (2013), who review the use of risk assessment tools across 11 countries, including 7 in Europe, and Pham and Ducro (2008) who evaluated data from the use of SORAG and STATIC-99 in Belgium and France. The literature does not provide direct evidence about which professionals actually undertake assessments. However, Tully et al (2013) refer to questions about inter-rater reliability (that is the consistency with which the tool is applied by different users/raters), the consistency and quality of assessors who are not necessarily trained specialists and the need for risk assessors to keep up-to-date about the development of the tools they use.

There is an argument that the field of risk assessment has been dominated by psychology (Leclerc et al, 2011), perhaps at the expense of more criminological approaches. The recruitment in Belgium of 120 prison-based psychologists as part of the reforms which

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**SORAG:** designed to predict at least one reconviction for a sexual offence. Developed from a version used for violent offenders, SORAG contains 14 static risk factors including, lived with biological parents, elementary school maladjustment, alcohol problems, marital status, criminal history for violent and non-violent offences, history of sexual offenses [against girls under 14 years], age at index offense, criteria for any personality disorder, schizophrenia, phallometric test results and psychopathy scores.

**STATIC-99:** consists of 10 items: prior sex offenses, prior sentencing occasions, convictions for non-contact sex offenses, index non-sexual violence, prior non-sexual violence, unrelated victims, stranger victims, male victims, lack of a long-term intimate relationship and if the offender is aged under 25 on release (or now, if the offender is in the community). (Source: Craig and Beech, 2010: p.280)
followed the Dutroux Case may be an example of this in practice (Bauwens et al, 2012). Research into the use of Static-99, also in Belgium, focused upon its use in a secure psychiatric facility (Pham and Ducro, 2008). There is also some evidence that Belgium favours a mental health approach in their supervision of sexual offenders (Pham et al, 2010). Similarly, in France the literature in this field seems to emphasise the role of psychiatry in managing high risk offenders particularly in relation to orders relating to psychiatric treatment (e.g. Auger et al, 2010). In England and Wales, however, the assessment of high risk offenders remains the domain of probation staff trained to use available tools (Ministry of Justice (MoJ), 2013).

In a meta-analytic study of the accuracy of recidivism risk assessments for sexual offenders, Hanson and Morton-Bourgnon (2009) found that actuarial assessment performed better than unstructured clinical judgement and did as well or better than structured clinical judgements. This is because the static factors used are more predictively reliable and open to less interpretation or judgement by the assessor. Assessments of this type are also more often conducted using a risk assessment tool.

However, Howard et al (2014) based on a sample of 14,804 sexual offenders, concluded that ‘a one size fits all risk assessment scheme only shows acceptable performance in relation to certain sexual offence types’ (p. 247). Therefore specialist tools are more likely to have ‘increased predictive validity for adult contact, child contact, all contact, and non-contact offence types. However, the (at times limited) gain has to be weighed against the costs of developing, training in, and implementing specialist tools’ (p. 247).

In addition, the knowledge base on which risk assessment tools are based seems generally to be accepted. For example, see the Risk Assessment Tools Evaluation Directory (RATED) from the Risk Management Authority in Scotland which outlines the research evidence underpinning currently available risk assessment tools (available at: http://rated.rmascotland.gov.uk/ accessed March 4th 2014). This document literally ‘rates’ currently available risk assessment tools and provides:

- A summary of empirical evidence on the effectiveness of a range of risk assessment tools.
- Validation evidence.
- Strengths and limitations of each tool, including relevance to specific groups of offenders such as female offenders, ethnic minorities, and mentally disordered offenders.
Sixty one tools are evaluated including those for sexual violence risk (see: http://rated.rmascotland.gov.uk/risk-tools/sexual-violence-risk/; accessed March 4th 2014).

RATED covers the following validated risk assessment tools:

- Rapid Risk Assessment for Sex Offence Recidivism (RRASOR)
- Risk Matrix 2000 (RM2000)
- Sex Offender Risk Appraisal Guide (SORAG)
- Sexual Violence Risk-20 (SVR-20)
- Stable 2007 and Acute 2007 (SA07)
- Static-2002R
- Violence Risk Scale: Sexual Offenders (VRS:SO)

With the following awaiting validation:

- Risk for Sexual Violence Protocol (RSVP)
- Structured Assessment of Risk and Needs (SARN)

The review of tools is also supported by recommended reading of key evaluations: http://rated.rmascotland.gov.uk/risk-tools/sexual-violence-risk/, recommended reading section, accessed March 4th 2014.

RATED offers a comprehensive and important system of rating risk assessment tools for use by jurisdictions, and offers policy makers and practitioners an informed rationale upon which to base their choice and use of risk assessment tools.

2.2 What Works

The review will now address the management of risk factors and risk reduction. Three key areas are reviewed with varying subsections within them:

- Risk management through regulatory controls including civil measures.
- Individually focused interventions.
- Promoting desistance and positive reintegration

However, before considering these three areas the current state of research in this area is briefly reviewed.
2.2.1 Methodological Challenges to Conducting Robust Research

There is a general difficulty in designing robust studies given the low base rates inherent in this group of offenders and the ethical challenge of finding control groups (Abracen et al, (2011); Woodrow and Bright, (2011))\(^{15}\). This is particularly relevant to research into community-based programmes where the target group is more fluid and also subject to a more complex range of influences. Hanson and Yates (2013 p348) argue that ‘Hundreds of studies have been published on sexual offender treatment, the conclusions remain tentative because few high-quality studies have been conducted’. This view is echoed in a recent UK report evaluating the use of Civil Prevention Orders (Davies, 2013) which comments that ‘whilst there is a wealth of literature and data available (originating from international organisations such as United Nations; individual countries; and the NGO community) the intrinsic nature of the offending (covert; much under-reported; in jurisdictions with highly variable systems of policing and criminal enforcement and/or different cultural norms as to child protection) is such that hard quantitative data is and will remain, elusive’ (Davies, 2013: p6).

2.2.2 Risk Management via Regulation, including Civil Regulation

There are few methodologically robust studies about regulatory methods (Farmer and Mann 2010). Where there have been legislative responses to sexual offending these have often been prompted by political responses to serious high profile cases. This has been the case not only in the Anglophone countries (discussed in Mercado and Ogloff (2007); Logan (2011); and Vess et al (2011)), but also in mainland Europe with, for example, the Dutroux case in Belgium.

Bauwens et al (2012) explore the implications of the Dutroux case for decision-making processes and the need for more rigour within the Belgian judicial/probation system. Similarly a number of cases in Germany reinforced the use there of preventive detention for sexual offenders (Basdekis-Jozsa et al 2013). Research about the effectiveness of different measures to address high risk behaviour, it is argued, tends to follow policy rather than shape it in the first place (Tewksbury et al 2011). A number of commentators criticise policy and practice on the grounds that not enough is known about what is effective to be confident about measures adopted (see Thomas(2011),(2010) for example). Commonly, they

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\(^{15}\) 117 articles related to assessment and effective interventions were read. Of these 37 presented findings from specific studies about interventions, of which 23 were prison based, 8 community, and 6 considered both. The remainder of these papers were meta-analyses, literature reviews or more speculative presentations of theoretical approaches or contributions to ongoing debates (for example on desistance and interventions).
recommend the need for more rigorous evaluation of existing practice/procedures (see for example Tewksbury et al, 2011).

A number of core themes do nevertheless emerge from the literature and these are addressed below.

2.2.3 Sex Offender Registration and Community Notification as Examples of Civil Regulation

Sex Offender Registration

There are a range of regulatory mechanisms, including sex offender registration, community notification, and employment vetting (currently a particular issue in Belgium, for example, in the wake of the Dutroux case (see Bauwens et al (2012); Jacobs and Blitsa (2012); Fitch, (2007)). This section will briefly consider sex offender registration, impact and potential for transferability to European jurisdictions; and the four differing models of community notification and the current research literature on efficacy.

Sex offender registration is well established in the Anglophone jurisdictions, most notably in the USA (where it originated), 6 provinces in Canada, Australia, and the UK (Thomas, 2010). The following countries have either implemented a sex offender register or are actively considering doing so: Austria, France, Japan, Jersey, Kenya, Jamaica, New Zealand, Pitcairn Island, Republic of Ireland, Republic of Korea, and South Africa.

However, there are subtle differences in how registries are accessed and used. Murphy et al (2009) in comparing sex offender registries in Canada to those in America highlight that registry information in Canada is only made available to law enforcement agencies and not to the general public. This is seen as critical to the higher levels of compliance with Canadian registries. The Canadian registries seek to balance public protection with individual rights to privacy, and Murphy et al (2009) argue for the development of sex offender registries that are ‘optimally effective and minimally intrusive’ (p. 70).

Australia, for example, had 12,596 sex offenders on the Australian National Child Offender Register (ANCOR) in 2011, with states holding sex offender registries which can be accessed via public access sites such as ‘Australian People’s Records’, http://www.australian-people-records.com/Sex-Offenders.php. In Europe, France implemented a sex offender register (FIJIAS) in 2005. The introduction of the register coincided with media interest in a high-profile trial of sixty-six people in the town of Anger. It was subsequently challenged, in December 2009, at the European Court of Human Rights
when the court judged that ‘registration in the FIJAIS [national sexual offenders database], as applied to the applicants, strikes a fair balance between the competing private and public interests at stake’ (see http://www.loc.gov/lawweb/servlet/lloc_news?disp3_l205401799_text accessed 19 March 2014).

Stringent confidentiality measures are associated with the register and it was regarded as ‘purely preventive and dissuasive’ in its aim as opposed to punitive (Thomas, 2011, p.85).

The Czech Republic has sought advice from UK experts and the Child Exploitation and Online Protection Service (CEOP) on how to set up a sex offender register. This followed the sexual assault and murder of Jakub Simanek by Antonin Novak in 2008, a Slovenian national who had previous sexual convictions. National media coverage was critical of the lack of information exchange between Slovenia and the Czech Republic (neighbouring countries), and at the lack of a national sexual register (see: Radio Praha November 2008, www.radio.cz/en/article/104997; accessed March 19th 2014, and cited in Thomas 2011, p97-98). In Germany there have been calls for increased regulation and control of sexual offenders following the murder of 7 year old Natalie Astner in 1996 by Armin Schreiner who had previous sexual convictions and was on parole at the time he committed the crime (Thomas 2011 p98). The State of Saxony called for a public register of sex offenders after a 13 year old spent 5 weeks in captivity after being abducted by a man convicted for sex crimes who lived near her in Dresden (http://www.dw.de/german-state-of-saxony-considers-public-list-of-sex-offenders/a-1918464; accessed April 1st 2014). German politicians have also considered a USA style register after a woman was raped and murdered in Bayreuth by a repeat sexual offender (http://www.dw.de/german-politicians-propose-internet-registry-for-sex-offenders/a-2203141-1 accessed April 1st 2014).

A report to the Council of Europe Committee on Legal Affairs and Human Rights in 2010 concluded that the establishment of a European Sex Offender register would be significantly impeded by the differing methods of managing this group of offenders and diverging criminal laws across the EU community (De Pourbaix-Lundin, 2010). However it was held that significant strides could be made in the development of comprehensive systems for the management of high risk offenders in every Member State, together with an increase in the quality and regularity of information sharing on sexual offenders across the EU (De Pourbaix-Lundin, 2010).

Newburn (2010) in reviewing the possibility of transferring USA sex offender registration to Europe argues that there are potential obstacles. She contends that USA registration laws are ‘invasive and ineffective’; socially excluding and socially isolating; and detrimental to rehabilitation. The differing cultural norms and privacy laws of some European countries
(particularly those in the European Union) also present a challenge to simple acceptance of a USA style sex offender register. Newburn argues that Europe’s concern for safety and privacy laws represent an important balance in considering a European wide sex offender register. Logan (2011) also considers the potential to ‘export’ sex offender registration and community notification laws to Europe. Logan identifies a number of obstacles, not least the European penal tradition of rehabilitation and a high priority given to privacy laws (p. 236); and the constitutional challenges that may be mounted within European states under Article 8 of the European Convention of Human Rights. 16

The efficacy of registration has also been much debated with some commentators arguing that it results in stigmatization, social ostracism, and challenges to sexual offender community reintegration (Levenson and Cotter 2005; Levenson et al, 2007). The actual contribution of registration to crime prevention remains unclear (Tewksbury et al, 2011; Thomas, 2011). Levenson et al (2010) using a sample of 2,970 sexual offenders found that failure to register did not predict sexual recidivism. This study is supported by a larger study conducted by Kernsmith et al (2009). Logan (2011) noted that some 20 years after implementation, there is a lack of evidence for sexual offender registration and community notification, and concludes that: ‘we simply do not know whether, or to what degree, the laws assist police, deter recidivism, and empower communities with information to self-empower’ (p. 234). He notes the key issues as non-compliance; missing registrants; sheer volume (particularly in the USA); erroneous and incomplete information (see also Logan, 2009).

The impact of sex offender registration on crime reduction and sexual offending recidivism is debatable, with 6 empirical studies finding no impact (see: Letourneau et al (2009a); Letourneau et al (2009b); Sandler et al (2008); Tewksbury and Jennings (2010); Zevitz (2006); Zgoba et al (2010); Zgoba et al (2008)). However, Prescott and Rockoff (2008) found that it did reduce recidivism amongst registrants, possibly because sexual offenders know they are being monitored (however this impact is questionable where registers have very high numbers and low levels of monitoring, as with larger USA registries). One study examining pre and post implementation periods found little impact on recidivism (see Duwe and Donnay, 2008).

16 Everyone has the right to respect for his private and family life, his home and his correspondence. There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others. Available at: http://conventions.coe.int/treaty/en/treaties/html/005.htm, accessed October 2nd 2014. See for example Regina F and Regina Thompson v. Secretary of State, 2010. The UK Supreme Court dismissed the UK policy of automatic registration for life without any chance of review ruling that this was incompatible with article 8 of the ECHR and disproportionate. See Thomas and Thompson (2012) for a full review.
Community Notification

Community notification originated in the USA, and is now a Federal Law via the ‘Jacob Wetterling’ Act (reinforced and extended by the ‘Adam Walsh’ Act), and requires all states to ‘make relevant information on released offenders available to the general public’ (Cohen and Jeglic, 2007: 374). However, the law does not mandate how this should be done, and in effect there are four different models in the USA:

1. The first model involves offender notification, based upon a three-tier classification of risk: Low risk, non-predatory offenders who have successfully completed treatment are not required to notify; tier two offenders who present a moderate risk are required to notify to specific groups deemed to be vulnerable to such offenders (such as scout groups or sport groups); and high risk, recidivist, predatory sexual offenders are required to notify all relevant persons with whom they may come into contact and they can be required to wear placards and issue press releases to inform others.

2. The second model uses notification via a designated agency, using predetermined categories of sexual offending and risk.

3. The third model requires sex offenders to carry out the notification under the supervision of state agencies. This might include, for example, personally telling neighbours, friends, workmates and letting employers know, putting up posters and the like.

4. The fourth model is a passive system which requires members of the public to make a request for the information; this can be done via state sponsored websites such as www.klaaskids.org (See Kemshall, (2008) p115-116; Cohen and Jeglic, (2007) p374).

Differing Federal States in the USA operate different models, although most operate model 1. Canada, England and Wales, and Scotland operate model 4, the ‘passive system’, and this model is currently under consideration in Northern Ireland (Kemshall et al, 2010). Australia uses model 2, and uses a designated agency, ‘Australian People’s Records’, (http://www.australian-people-records.com/Sex-Offenders.php; accessed March 4th 2014) to enable public access to registration data. Critically, the operation of a sex offender register does not necessarily imply community notification of any type, and some countries operate only registries (e.g. France). Interestingly, Hynes (2013) argues that USA community notification laws would benefit from a shift to the passive model employed by England and Wales on the grounds of reducing the operational costs (in some USA Federal States this is significant), and in order to improve effectiveness in reducing recidivism.
Community notification has been the subject of intense debate, and Anderson and Sample (2008) found that most citizens do not access registry information. The impact research is summarised in Lasher and McGrath (2012) who reviewed eight quantitative studies (sample 1,503) to establish the impact of community notification on sexual offender reintegration. They concluded that sexual offenders were rarely the subject of vigilante action; but a substantial minority reported exclusion from accommodation, job loss, and some degree of social exclusion. They also experienced ‘negative psychological consequences’ but reported benefits from knowing their behaviour was monitored. Importantly the most intrusive notification schemes had the most negative social consequences for sexual offenders. This is supported by a paper by the Quaker Council of European Affairs (2011) which argues that containment has come to be seen as the alternative to social reintegration. Tewksbury et al (2011) compared a group of sexual offenders pre the introduction of sex offender registration and notification (SORN) and a group post introduction. The sample included 247 pre and 248 post. They found that SORN status is ‘not a significant predictor of sexual or general recidivism’ (p. 324). However, they note key limits to this study and to others, notably that the measure of recidivism used was an ‘official measure and focused exclusively on re-arrest data’ (p. 325) and not actual reoffending. In addition, they note that SORN is implemented differently across the USA, and therefore studies do not necessarily compare like with like; and offender samples can be skewed by different offence types. However, it is a robust pre and post comparative, longitudinal study. The study also confirms previous studies by Sandler et al (2008); Schram and Milloy (1995); Tewksbury and Jennings (2010); Vasquez et al (2008); Zgoba et al (2008, 2010); Zimring et al (2007, 2009).

2.2.4 Compulsory Treatment and Civil Orders

Across Europe there are a range of compulsory treatment measures. For example, the Therapeutic Injunctions available in France (Auger et al, 2010); civil commitment orders and preventive detention in Germany (Basdeks-Jozsa et al (2013) Kelly (2008)); and physical surveillance through mechanisms such as satellite tracking (Payne and Buhon, 2011), or social vigilance through interventions such as Circles of Support and Accountability originating in Canada and now in the UK and extending to Northern Europe (Wilson et al, 2009). Payne and Buhon’s study of GPS tracking of sexual offenders in the community concluded that it cannot take the place of supervision, but should be seen as a tool in any ‘well-designed case management plan’ (p. 355). Basdeks-Jozsa et al (2013) found that offenders under preventive detention orders under psychiatric treatment arrangements pose challenges to effective treatment due to their mental health and psychiatric disorders. Identification of effective, suitable therapies have proved challenging, and they conclude that preventive detention orders are largely used to keep ‘dangerous offenders’ out of the
community rather than to effectively treat them (p. 355). This is supported by Kelly (2008) who compared civil and treatment detention use in Germany and the USA and found that pharmacological treatment for sexual deviancy ('chemical castration'), and compulsory treatment detention figures for containment in civil psychiatric facilities were too high. Duwe (2013) in a study of 105 sexual offenders who were civilly committed between 2004 and 2006 found that:

If the 105 civilly committed sex offenders had been released to the community, an estimated nine percent would have been reconvicted of a new sex offense within four years. Civilly committing these offenders therefore likely reduced the overall four-year sexual recidivism rate by 12 percent. The results further suggest that if these offenders had been released to the community, an estimated 28 percent would be rearrested for another sex offense within their lifetime. (p. 1).

Duwe (2013) argues for selective use of civil commitment and a greater use of intermediate alternatives with sexual offenders in order to increase the cost effectiveness of high resource approaches such as hospital detention and treatment, and to mitigate the high costs of indeterminate detention.

2.2.5 Preventive and Indeterminate Sentencing

Preventive and indeterminate sentencing for sexual offenders also exists in a number of jurisdictions (within Europe most notably the UK and the Netherlands). Doyle and Ogloff (2009) argue that this type of preventive legislation represents a radical departure from traditional legal philosophy and judicial functions, from punishing offenders for offences already committed to restricting the liberty of offenders for offences they might commit in the future and they question the validity of the premise that individuals posing a serious risk to the community can be accurately identified. This debate continues with Prescott and Levenson (2010) and is expanded to incorporate the human rights dimension by Newburn (2010), see also Thomas and Thompson (2012).

However, Slobogin (2011) has argued that 'indeterminate sentencing is an optimal means of preventing recidivism' for sexual offenders (p. 210) and that objections on ethical, rights, and justice grounds can be mitigated. He argues that seven key principles must be adhered to in order to govern the State’s use of preventive sentencing:

(1) the principle of legality, which requires commission of a crime or imminently risky conduct before preventive detention takes place; (2) the proportionality principle, which
requires that government prove a probability and magnitude of risk proportionate to the duration and nature of the contemplated intervention; (3) the related least drastic means principle, which requires the government to adopt the least invasive means of accomplishing its preventive goals and in many cases would preclude confinement; (4) the principle of criminal justice primacy, which requires that systems of preventive detention separate from criminal justice be limited to detention of those whose subsequent behavior is unlikely to be affected by the prospect of serious criminal punishment; (5) the evidentiary rule that, when government seeks preventive confinement, it may only prove its case using actuarial-based probability estimates or, in their absence, relevant prior antisocial conduct; (6) the evidentiary rule that the subject of preventive detention may rebut the government's case concerning risk with clinical risk assessments, even if they are not as provably reliable as actuarial prediction; and (7) the procedural principle that a subject's risk and risk management plans must be periodically reviewed using procedures that assure voice for the subject and avoid executive branch domination of the decision making process. (p. 211).

The Order for Lifelong Restriction in Scotland is an example of indeterminate sentencing that meets these criteria, for example, with Scottish courts only able to use risk assessment reports from independent assessors, using risk assessment tools approved by the Risk Management Authority, and with risk management plans reviewed annually (see: http://www.rmascotland.gov.uk/news-and-information/faq-s/olr/; accessed March 4th 2014).

However, the transference of indeterminate sentencing to other jurisdictions can be problematic (Davies (2013); Slobogin (2011)), not least because offence types and penal codes vary. For example, statutory rape is not recognised in the Netherlands, and Fazel et al (2010) highlight that plea bargaining is not permitted in the Swedish legal system at conviction stage. Ethical and cultural issues can also present obstacles to the simple transference of penal measures to other cultures, for example transferring USA measures to European countries (Newburn (2010); Lieb et al, (2011))17.

2.2.6 Ethical Tensions and Issues

A number of ethical issues can be identified from the available literature. In brief these are:

- Tensions between preventative regulation and individual liberty, with the design and use of such regulation contrary to principles of justice embodied in law

17 For example the German high court ruled preventive sentencing as unconstitutional in May 2011, but Germany has persisted with the notion of preventive treatment and ‘treatment detention’ (Kelly 2008).
(Douard, 2006). La Fond (2008) in a study of civil commitment for serious sexual offenders in the USA found that states were ‘manipulating’ civil commitment to prevent the release of sexual offenders. This resulted in such offenders condemned to a ‘psychiatric gulag’ (p. 169), with asylums used as preventive prisons (p. 170). Meiners (2009), in a feminist critique of regulatory measures argues that there are dangers for the wider community from the increased privatisation of public space via over-reliance upon regulation and incarceration.

Concerns over privacy rights and informational flaws - for example in terms of sex offender registration (Logan, (2009); (2011)).

Balancing individual rights with community safety - Prescott and Levenson (2010) for example argue that practitioners must balance the therapeutic needs of offenders with risks to the public, and balance ‘community safety with the rights of the offender’ (p. 275). They assert strongly that even compulsory treatment should be delivered within robust ethical codes and a human rights framework. This is a particularly pertinent point given the increasing use of both community treatments and compulsory civil commitment. Ward et al (2009) apply the human rights framework to those sexual offenders receiving treatment in criminal justice settings.

Prevention versus regulation - Doyle and Ogloff (2009) based upon an in-depth analysis of data for 50 sexual offenders, identify early risk factors and significant development histories ‘characterised by early deprivation, disadvantage, abuse, and social and psychological dislocation’ (p. 41). They argue for a shift of policy and resources from post sentence and containment to early identification and prevention, particularly their first contact with criminal justice agencies (p. 46). They argue that: ‘Improvements in risk/need identification and early intervention require a paradigmatic shift in public policy to a preventative and public health model’ (p. 46; see also Bonnar-Kidd, 2010; Doyle and Ogloff, 2009; Kemshall and Wood, 2007).

Risk versus rehabilitation/reintegration - this tension has been much discussed, with two distinct approaches to sexual offenders identified: community protection; and rehabilitative/reintegrative approaches (see Connelly and Williamson (2000); Kemshall (2008); Petrunik (2002); Petrunik and Deutschmann, (2008)). These approaches have been presented as oppositional; with community protection measures seen as exclusively concerned with risk; and ‘at odds’ with rehabilitative/reintegrative measures. However, this ‘spectrum’ or oppositional presentation of these two paradigms is somewhat artificial (Kemshall, 2008).
Whilst based in differing discourses of criminal justice, and reflecting potentially different value-bases, in practice they are often meshed, even within jurisdictions characterised as predominantly focused on community protection (Kemshall, 2008), (and see below for a discussion of the European context).

Operationally, and in terms of policy and resource distribution, jurisdictions will often use a ‘mixed economy’ of provision, combining preventative sentencing or compulsory civil commitment, monitoring, surveillance, with treatment, interventions, and supportive approaches such as Circles of Support and Accountability (for example Canada, the UK, The Netherlands). Kemshall (2008) has described this combination of strategies as ‘protective integration’, focusing both on behaviour change, effective reintegration, and public safety (p. 127). Such balanced approaches have the potential to target resources according to risk more effectively, support longer term desistance, and protect communities from the consequences of recidivism.

2.2.7 Differing Policy Development Processes and Differing National Responses

Vess et al (2011) provide an analysis of the Australian experience of implementing national policies in a federal system and highlight differences of policy and implementation at local level. This has resonance for Federal countries in the EU such as Germany. Petrunik and Deutschmann (2008) compare policies and practice in continental Europe and Anglo-American jurisdictions and conclude that there are significant differences in approaches to criminal justice and sexual offenders. In brief, they argue for an exclusion-inclusion spectrum, with community protection measures such as preventative sentencing, monitoring and control at the exclusion end; therapeutic programmes in the middle; and restorative justice approaches at the inclusion end. They identify a tendency for USA, Canada and UK to adopt community protection measures (although not in their entirety as one can identify significant therapeutic interventions in all three jurisdictions, and increasing attention to restorative justice approaches such as Circles of Support and Accountability (see Kemshall, 2008, for a full discussion). They argue that the European tradition of medicalising deviance and taking a psychiatric approach to ‘dangerousness’ has limited the spread and use of criminal justice based community protection measures (see also Kelly, 2008). This view is supported by McAlindden (2012a, b) who again uses a spectrum approach and notes the diverse responses to sexual abuse and child protection across Europe. This inevitably complicates transference of both policy and practice, although operationally many jurisdictions operate strategies across the spectrum (Kemshall, 2008).
Differences can occur between the Anglophone countries (often treated as wholly similar). Murphy et al (2009) analyse Canadian policy regarding civil regulation, highlighting some distinctive differences with the US about the perceived purpose of regulation which can affect how it is designed and implemented, expressed in their differing approaches to sex offender registration and the balance between public safety and individual privacy rights (discussed above).

In the EU a key process in policy development is the process of agreeing Framework Decisions\textsuperscript{18} which are then implemented at national level (Morgenstern, (2009) and could potentially be implemented in 28 different ways. Davidson (2009) summarises the range of European approaches and Newburn (2010), McAlinden, (2012a), and Fitch, (2007) all question the transferability of existing models particularly from Anglophone jurisdictions to Europe. Morgenstern (2009) in discussing national implementation of EU Framework decisions suggests that effectiveness of the implementation of these decisions requires states to have ‘mutual trust in each other’s jurisdictions and enforcement agencies’.

Responses to sexual offenders should also be placed within the differing developments and histories of probation services across Europe (van Kalmthout and Durnescu, 2008, available at: \texttt{http://www.cepprobation.org/uploaded_files/1\_Chapter\_1\_Comparative\_overview.pdf}; accessed April 3rd 2014). Van Kalmthout and Durnescu (2008) identify three main groups of probation services: those based in the former Communist countries, those countries with Roman Law traditions, and those with common law approaches. However, they also note diversity within and beyond these groups, with a number having their roots in the 19th century, located within a ‘strong religious and moralizing’ discourse (p.4). During the latter part of the 20th century the State has played a more significant role across all EU Member States, either by directly providing probation services, or providing a strong ‘state steer’ on the content of provision. This has coincided with an expansion of community sanctions and stronger attempts to reintegrate offenders into society across a number of Member States (van Kalmthout and Durnescu, 2008). Due to open borders and freedom of movement, community sanctions and measures are increasingly required to be recognisable across EU borders (albeit often called different things), and the focus of probation tasks is increasingly similar. However there is a difference between those probation services (usually based on common law and within an Anglophone tradition) with a dominant risk and public protection focus; and those with a greater focus on community reintegration and restorative justice (van Kalmthout and Durnescu, 2008). This is also reflected in differing responses to sexual

\textsuperscript{18} \textbf{Framework Decision is a type of legislative act of the European Union, used within the EU’s competences to ensure police and judicial co-operation in criminal justice matters. Unlike a Directive, FDs are not capable of direct effect, and enforcement proceedings cannot be taken for any failure to transpose an FD into domestic law. (See Article 34 of the Treaty on European Union; Lisbon Treaty, Article 9).}
offenders, particularly expressed in the relative balance between risk and rehabilitation efforts. As noted above, countries often operate a ‘mixed economy’ of responses (Kemshall, 2008), and there are substantial similarities as well as differences across Europe (van Kalmthout and Durnescu (2008); see also McNeill and Beyens (2014) on offender supervision across Europe).

2.2.8 Summary

There is a lack of rigorous empirical research on regulatory methods, particularly sex offender registration and community notification. The actual contribution of such measures to recidivism reduction is unclear, and six studies on sex offender registration show no impact. Eight studies on community notification find negative social and psychological consequences, with some benefits from knowing their behaviour was monitored. Vess et al (2011) for example draw on substantial research on USA implementation and on sexual offending to review the effectiveness of Australian sex offender registries. They argue that: ‘in many respects the laws do not reflect what is currently known about sexual offending, and have not been successful in reducing offending.’ (p. 422). Furthermore there are debates about how far the unintended consequences of some regulatory measures may impede rehabilitative processes, such as the positive effects of stable and secure living arrangements and access to employment (Bonnar-Kidd (2010) Payne and Buhon (2011) Tewksbury et al (2011); Herzog-Evans, (2012)). Logan (2011) argues that available research suggests that laws of themselves have little or no effect on recidivism (p.234). The transferability of such measures across jurisdictions is also challenging, with differing penal traditions of Anglophone and European jurisdictions presenting key obstacles particularly around the rule of law, and privacy issues (Thomas, 2011).

The use of compulsory treatment measures has attracted limited evaluative studies. However, it has been critiqued on the grounds of possible over-use and a recent more robust study in the USA (Duwe, 2013) has argued for selective imprisonment/compulsory treatment on both ethical and cost grounds. Preventive sentencing has also attracted similar debates and challenges on the grounds of proportionality; rule of law; and justice. However, Slobogin (2011) has argued that seven key principles can offer significant safeguards. The Scottish system of Orders for Lifelong Restriction is posed as an example.

The key differences between community protection measures and rehabilitative ones may actually be less distinct in practice, and are actually combined in both practice and policy terms in a number of jurisdictions. This illustrates that countries do have the capacity to adopt these approaches to existing penal and criminal traditions and that, at times, a pragmatic approach to crime reduction is taken.
2.3 Individually – Focused Interventions

There remain some reservations about the knowledge/research evidence about the effectiveness of interventions focusing on the individual (see: Morali et al, (2011) discussing the situation in France). The next section discusses cognitive behavioural methods, which are generally regarded as effective, however it is argued that not enough is known about the significance of particular elements of Cognitive Behavioural Treatment CBT19 (Waldram, 2008), what works for whom in what conditions (Schmuker and Losel, 2008; Begg, 2010), and the offender perspective (Colton et al (2009); Russell et al (2011)). Community-based treatments are less frequently considered in the literature. The following summary of the literature should be read in light of these provisos.

2.3.1 Assessing and Analysing Risk Factors

There is some support for the use and applicability of Risk Assessment tools across jurisdictions in North America, Canada, Australia and Europe (see for example Vess et al 2011). In a recent and comprehensive review of risk assessment tools, Tully et al (2013), who review the use of risk assessment tools across 11 countries, including 7 in Europe, describe results as promising with tools showing at least moderate predictive accuracy but they argue for further research. Craissati et al (2009) argues that further research should include developmental variables. Craig and Beech (2010) highlight the importance of there being a match between the population to be assessed and the population on which the tool was developed. This is supported by the Risk Management Authority Scotland who provide a review of empirical evidence for risk assessment tools, highlight those validated, and identify those most relevant to particular offence types and offenders (Risk Assessment Tools Evaluation Directory (RATED), available at: http://rated.rmascotland.gov.uk; accessed July 24th 2014.

The idea of offence pathways has recently gained ground, initially in respect of female sexual offenders (Gannon et al 2011), and is seen as being useful for identifying different patterns of sexual offending (Yates and Kingston (2006). The skill and knowledge of practitioners can also play a part in the appropriate use of risk assessment tools (see: Barnett and Mann 2011; Westwood et al 2010; Kemshall and Wilkinson, 2013).

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19 CBT focuses upon the interrelationship between thoughts (cognitions), feelings (emotions) and behaviour and how this inter-relationship influences an individual’s response to the world (triggers). The aim of a cognitive behavioural assessment is to collect information on all three elements in order to inform interventions which are described as multi-modal (that is operating in all of these domains). Multi-modal CBT methods can include, for example, Behaviour therapy, Social skills training, Self-instructional training, Problem solving training, Rational emotive therapy, Cognitive therapy.
2.3.2 Efficacy of Cognitive Behavioural Treatment (CBT) Methods

It is important to recognise that CBT programmes have been the most frequently evaluated and that research about alternative methods is limited (see Hanson (2014) on the current state of the evidence base). Schmuker and Losel (2008) argue that from their meta-analysis only CBT demonstrated a consistently positive impact (see Beech et al 2012) have confirmed the effectiveness of formal programmes with high risk offenders (see also Schweitzer and Dwyer (2003). This is supported by Abracen et al (2011) in a tightly controlled study of a Canadian Sex Offender Treatment Programme which suggested that CBT was particularly effective with high risk offenders. Hanson et al (2009) argue that treatments following the Risk/Need/Responsivity (RNR) principle are more likely to be effective. Beggs and Grace (2012 p191), in a UK study, suggest that targets for intervention could include ‘reconditioning of sexual arousal patterns, teaching skills for lifestyle balance and general and sexual self-regulation and enhancement of victim empathy’. On the other hand, Hanson and Yates (2013 p348), would dispute the inclusion of work around victim empathy but advocate for the focus to be upon work around ‘low self-control, negative peers, and sexual preoccupation’.

2.3.3 Targeting, Motivation and Compliance

Craissati, et al (2009), amongst others, have argued that interventions need to be targeted at appropriate individuals to ensure compliance and impact.

Within the context of CBT programmes there is some support for motivation improvement approaches and the Good lives Model (Hanson and Yates, 2013); and also a focus upon relapse prevention which links to the more positive future-oriented approaches promoted in the desistance literature (Brown, 2010).

2.3.4 The Design and Delivery of Programmes

Irrespective of their underpinning theoretical rationale, there appear to be a number of factors that improve the design and delivery of programmes. In brief, these are linking the intensity of interventions to the level of risk, and targeting more intensive treatments at higher risk offenders (Lovins et al, 2009, Abracen et al, 2011). This includes restricting the use of scarce treatment resources to those higher risk offenders (Wakeling et al, 2011), utilising the principle of proportionality, and targeting of limited resources (Duwe 2013). Matching of offenders to programmes also contributes to better outcomes. This relies on accurately identifying recidivism risk and the individual needs of the offender (Larochelle et al, 2011; Grady et al, 2011). Olver and Wong (2013) suggest that high risk sexual offenders pose the greatest risk for non-completion yet also stand to yield the most benefit from services. The
use of written handbooks for the programmes also has some benefit, particularly in achieving integrity of delivery. For example, results from the Challenge Project in London ‘suggest that higher risk and more psychologically disturbed subjects, placed in cognitive-behavioural manualised treatment, were more likely to complete the programme and to achieve high levels of attendance; and these subjects were significantly less likely to fail in terms of breaches, general re-offending or indeed, any formal failure’ (Craissati et al 2009). There are similar findings in Beech et al (2012). Hollin (2009) has also suggested that the skills of the practitioner may be the deciding factor in the effectiveness of manualised approaches. Morali et al (2011), in a study of professional practice in France, argue for more knowledge and training for probation officers.

2.3.5 Focus on Empathy

This is a complex psychological concept which has been explored in a number of papers (Waldram (2008) Wastell et al (2009) Day et al (2010) Schaffer et al (2010)). However, its relevance to treatment effectiveness remains to be argued convincingly or supported by research. There is a link to other aspects of the psychological profile of sexual offenders but how it interacts or is associated with other psychological risk factors remains open to debate and further research (Kirsch and Becker, 2006).

2.3.6 Denial, whether it is a Risk Factor and how to address it

This is the focus of an ongoing debate (Yates, 2009; Ware and Mann, 2012). It seems likely that it is protective for some offenders and criminogenic for others. There is a need for more consideration about how to work with this group. There is also a potential link between the process of denial and how far voluntarism as opposed to compulsion (in terms of involvement in programmes) may be associated with effective outcomes (Grady et al 2013), for example there are ongoing debates in France between the judicial and psychiatric professions about the effectiveness of compulsory treatment (Baratta et al, 2011).

However, there is a limited evidence base on effectiveness of interventions for the prevention of child sexual abuse. Langstrom et al (2013) used a systematic review methodology to select 1447 abstracts, a full review of 167 was completed, and they included eight in their final study. They concluded that few studies (and they cited only 8 in their review), met the gold standard of Randomised Control Trial (RCT) or prospective observational studies (see also Hanson (2014) and Hanson et al, (2009)). Evidence from five trials provided insufficient evidence for the benefits and risks associated with psychological treatments or pharmacotherapy, and limited evidence of effectiveness of multi-systemic interventions with adolescents.
2.4 Promoting Desistance and Positive Reintegration

Influenced by positive psychology (discussed in Brown, 2010), the concept of desistance is concerned with the change processes involved in ending offending, as Burnett (2010) describes it, ‘the will and the ways to become an ex-offender’. The focus of desistance oriented approaches is less upon the ‘aetiological questions about the causes of offending and re-offending’ (i.e. the causal precedents of offending) (McNeil, 2009) and more upon positive re-entry or reintegration (a theme explored in positive criminology e.g. Elisha et al, 2012). It is important to note that this is a newer field of practice and most of the writing is theoretical, and it has, in part, emerged as a counter weight to the dominant risk and responsivity model (Ward and Maruna, 2007). A recent review of the current available evidence is provided by Sapoura et al (2011). However it should not be ignored, given its growing theoretical base and support. High risk sexual offenders are not an homogenous group (Kruttschnitt et al, 2000), presenting diverse offence types and differing pathways out of offending (Brayford et al (2012); Farmer and Mann (2010)). Drawing on a wide range of extant literature from Australia, America, Canada and the UK, Weaver (2014) identifies a diverse range of potential factors critical to desistance including sexual offenders:

- Parenthood, most notably becoming a father particularly for young male offenders
- Marriage, as a stabilising factor in desistance from crime
- Employment
- Investment in a significant intimate relationship
- Strengthening social relationships
- Positive social capital
- Resilience, particularly to disappointment and failure
- Hope, particularly that one’s life can change, and that other non-offending possibilities can be achieved.

Weaver highlights the complex journey of desistance with a number of these factors interacting and contingent on each other.

Farmer et al (2011) in a detailed focus on ten convicted child sex abusers found the following factors important to reducing sexual offending:

- Involvement in a social group or positive social network
- Change in negative, pro-offending attitudes and beliefs
Participation and commitment to treatment

They expressed feelings of hope, optimism and willingness to change.

With the exception of the study by Kruttschnitt et al (2000) which focused on 556 probationers, studies have tended to be small scale and largely qualitative, utilising narrative techniques or in-depth case studies (see Harris (2014) as an example). However, the evidence base is growing, and rigorous meta-analysis or systematic literature review of the extant research would be beneficial. To date, the evidence would seem to support both practice and policy initiatives supportive of the above desistance factors (see for example McNeill and Weaver (2010); McNeill (2009); Weaver (2014); Weaver and Barry (2014); Harris(2014)). For developments in France see Herzog-Evans (2011a) and an examination of how the French legal system expunges criminal records to aid employment and rehabilitation, and in effect achieves relabeling as an ex-offender. This ‘legal re-biographing’ (Maruna, 2001) is also pursued to a lesser extent in Germany and the Netherlands, with an emphasis on prisoners moving back into the community and gaining rehabilitation through employment (Boone, 2011; Morgenstern, 2009). However, Herzog-Evans (2011a) noted in a small scale study that ‘French probation services have a good idea of what it takes to desist, but have neither the capacity nor the will to effectively help offenders to do so’ (p. 29); with desistance literature virtually unheard of.

2.4.1 Current Approaches Associated with Desistance

- **The Good Lives Model (GLM).** This is a strengths-based approach to offender rehabilitation in which treatment aims to equip offenders with the skills and resources necessary to satisfy primary goods, or basic human values, in personally meaningful and socially acceptable ways. It is suggested that the GLM can address some of the limitations of Risk-Needs-Responsivity (RNR) including influencing levels of treatment attrition (Schaffer et al (2010); Willis and Ward, (2011)).

- **Promoting Positive Reintegration.** Writings suggest that release planning, building strengths and the nature of the goals set are all important and that more attention should be paid to positive social capital (Lamade et al (2011); Russell et al (2011); Scoones et al, (2012)).

- **Restorative Justice Approaches.** The most commonly cited example of such approaches is Circles of Support and Accountability (CoSA) (Petrunik and Deutschmann, 2008). This specific approach seems to represent a balance between regulation through monitoring and providing positive community support for reintegration. Canadian studies (e.g. Wilson et al 2009) point to dramatic
reductions in recidivism. McCartan et al (2014) are more cautious but do describe the approach as promising and highlight the need for independent evaluations across a number of jurisdictions, particularly focussing upon the staffing and costing of the projects. Positive community self-regulation (Finkelhor, 2009) and prevention may also have a place here.

- **Pro-social modelling** with a focus on change has also received some positive evaluation, although probation staff do not seem to readily deploy the relevant skills (Raynor et al 2010). Durnescu (2013) examined one to one supervision skills amongst Romanian probation staff. He found that skills associated with promoting change (e.g. pro-social modelling) are less used than other skills. This resonates with previous research by Raynor et al (2010). More recent research by Raynor et al (2014) indicates that ‘Higher skills ratings are significantly associated with lower reconviction’ (p. 240), particularly relationship skills and those aiding ‘supportive supervision’. However, Raynor et al (2014) do note limitations to their research, not least the use of Jersey Probation as a site and some challenges in transferring findings to other areas, and difficulties in demonstrating a causal link between skills and reduction in recidivism.

### 2.5 Working with Diverse Groups

For the purposes of this review a number of messages emerge which may have wider implications. These are:

- The robust and rigorous approach taken in research into Multi Systemic Therapy with adolescent sexual offenders (Borduin et al, 2009 and Letourneau, 2009c). In addition, Pullman and Seto (2012) distinguish between different types of adolescent sexual offenders and the need for different approaches.


- In relation to women there is research into the different relational contexts in which offending takes place and, stemming from this, the suggestion that women often co-offend with male sexual offenders (Wijkman et al (2010); Muskens et al (2011)).
The importance of tailoring interventions to diverse groups (often a very small minority in the sexual offending group as a whole (e.g. offenders with learning disabilities) see: Williams et al (2007); Craissati and Blundell (2013); McNair et al (2010). The low take up of Sex Offender Treatment Programmes in the UK by Black and Ethnic Minority sexual offenders has been highlighted as problematic by Cowburn et al (2008) although to date robust studies examining this issue are rare.

2.6 Other Approaches including Other Treatment and Preventative Models

Psychiatric treatment and psychopathy. Young et al (2010) suggest that for some sexual offenders their executive functioning may be impaired. Given the emphasis upon the use of psychiatric approaches in some parts of Europe this may be an area which requires further exploration.

Situational approaches (Hebenton, 2011) including the relevance of completing crime scripts to identify situational crime prevention measures (Leclerc et al 2011). Also relevant here and perhaps of interest to this project is the potential of applying rational choice theory to combine the psychological and the geographical dimensions of behaviour (Beauregard and Rossmo, 2007).

Therapeutic communities. Genders and Player (2010) and Ware et al (2010) review the experience of Her Majesty’s Prison Grendon and on the basis of limited research, stress the potential of the Therapeutic Community approach to enhance the effectiveness of programmes, especially within less than ideal custodial environments, but, as in many papers, bemoan the lack of robust research and the ethics of undertaking this.

Medical models including pharmacological interventions are acknowledged to have a place in work with some sexual offenders but the view appears to be that these need to run alongside psychological interventions (discussed in Farmer and Mann, 2010; Baratta et al, 2011; Hanson and Yates, 2013). Their potential should not be under-estimated however (Schmuker and Losel, 2008).

2.7 Multi-Agency Approaches

There is some support for the view that multi-disciplinary/multi-agency approaches can be effective in work with individuals (e.g. Multi-Systemic Therapy (Borduin et al, 2009 and Letourneau 2009b)) in regulating their behaviour. In England and Wales the multi agency assessment and management response to high risk sexual and violent offenders has been the subject of three process evaluations (Maguire et al 2001; Kemshall et al 2005; Wood and
Kemshall 2007). In brief, these evaluations focused on improving multi agency meetings, the process of information exchange, implementing risk assessment procedures, and improving risk management planning. Wood and Kemshall (2007) reflecting upon the effectiveness of Multi-Agency Public Protection Arrangement (MAPPA) in England and Wales, which are ‘characterised by inter-agency information sharing, risk assessment and risk management planning’ (ibid: 6), conclude that evaluating effectiveness can be problematic, not least because of the difficulty in agreeing what constitutes an effective outcome, and differentiating between process outcomes and longer term reductions in recidivism (see also Kemshall and Wood 2010). In 2011, Peck produced a limited reconviction study comparing an offender cohort pre the introduction of MAPPA in England and Wales with a cohort post implementation. Whilst the study did not fully meet the requirements of a long term reconviction study, and had some limitations in constructing fully comparable cohorts, it does represent the first evaluative study of MAPPA impact on reconviction rates for sexual and violent offenders. Peck found that:

Offenders released from custody between 2001 and 2004 (i.e. after the implementation of MAPPA) had a lower one-year reconviction rate than those released between 1998 and 2000. This remained true at the two-year follow-up for those cohorts where this had been calculated. The one-year reconviction rate had been declining before 2001, but fell more steeply after MAPPA was implemented.

Immediately either side of MAPPA implementation, the one-year reconviction rate fell 2.7 percentage points for MAPPA-eligible offenders.

Pre- to post-MAPPA implementation there was a comparatively large fall in the proportion of violent offenders reconvicted after one year, and among those calculated to pose a high risk of reoffending. (Peck, 2011: pp: ii-iii).

Whilst a single limited study of recidivism reduction, these results are encouraging.
Section 3 - Concluding Comments

The research base is developing and it is difficult to draw definitive conclusions due to lack of robust studies in all areas of interventions. However it is possible to conclude that legal responses need to be supported by a range of effective intervention responses. Regulatory responses comprising sex offender registration, community notification and preventative orders have largely been confined to the Anglophone jurisdictions, and transferability to other jurisdictions with differing legal and penal codes cannot be assumed. In addition, regulatory approaches have resulted in both critical commentary and mixed research evidence on effectiveness, with increasing attention to the unintended consequences of such policies such as social isolation and stigmatization (Levenson and Cotter (2005) Levenson et al (2007)). More recently, regulatory responses have been seen as best combined with effective treatment and intervention programmes, and approaches to sexual offenders that support desistance (Farmer et al (2011); Kemshall (2008) Weaver (2014)). Cognitive behavioural interventions have been the most frequently researched, and the effectiveness of formal programmes with sexual offenders has been confirmed. However, CBT would benefit from further robust studies particularly of community based interventions. Desistance focused approaches are making a contribution and the evidence for their effectiveness is growing.

The use of formal and structured risk assessment is well supported by the evidence base, and although risk factors for sexual offending across a range of offence and offender types continue to be refined, the knowledge base on risk factors is well supported and is available to practitioners. The need for systematic assessment of individuals is widely acknowledged across jurisdictions (Tully et al, 2013; Vess et al, 2011) and supported by research. This is linked to the need to accurately identify recidivism risk if programmes are to be adjusted to the responsivity needs of high risk sexual offenders. These assessments are more effective if carried out by skilled and knowledgeable practitioners. Westwood et al (2010) highlight some key aspects of professional practice skills: using relationship skills, interviewing and questioning techniques along with specialist knowledge (see also Barnett and Mann, 2011). In addition, Craig and Beech (2010) highlight the need for practitioners to have a thorough ongoing understanding of methodological limitations and possible errors and inaccuracies and argue that assessments need to recognise the individual differences between offenders (offence type, criminal history, personal circumstances). Offence pathway models have been seen as an important addition to assessment in order to analyse and make sense of the interaction of risk factors in the lives of offenders (e.g. as developed by Yates and Kingston.
Multi agency responses, particularly across criminal justice agencies continue to be largely located within the Anglophone jurisdictions (McAlinden, 2012b). Multi agency responses lack a significant number of outcome evaluations, however the recent evaluation of MAPPA in England and Wales is encouraging (Peck, 2011).

To date, research has not shown a convincing case for the impact on sexual offence recidivism of either sex offender registration or community notification, although there is limited evidence for the benefits to sexual offenders of knowing they are monitored. In practice such approaches are often accompanied by treatment and more reintegrative techniques. Compulsory treatment and preventive sentencing have also been much debated, with limited evidence about effectiveness, and arguments for selective use on both ethical and costs grounds, and the need for adequate governance of their use. There are issues in transferability of regulatory measures, and it is important to recognise that there are differing models of sex offence registration and community notification with some evidence that the most intrusive methods have the most negative impact on sexual offenders.

Cognitive Behavioural Treatment interventions are the most supported by research (Schmuker and Losel, 2008). Other emerging programmes and approaches have been less well evaluated. However, there is effectiveness evidence for Circles of Support and Accountability (McCartan et al, 2014); Multi-Systemic Therapy (MST) which has been robustly evaluated in relation to adolescent sexual offenders (Borduin et al, 2009) and is also found to be promising by Finkelhor (2009); and programmes based on the Good Lives Model or desistance approaches (e.g. The Better Lives Sex Offender Programme in the UK) seem to be making promising contributions to the positive management of risk and reintegration of individuals (Barnett and Mann, (2011); Scoones et al (2012)).

Those approaches most supported by the research evidence have been presented in this review. To reiterate these are:

- Structured and systematic assessments focused on those risk factors most supported by research and carried out by skilled and well trained practitioners;
- Assessments which are sensitive to the differing offence types and offender types, and that can make sense of differing pathways to offending and the subtle interaction of risk factors;
Cognitive behavioural interventions and programmes have the largest evidence base, but there is evidence for other approaches such as Circles of Support and Accountability, MST particularly for adolescents, and the Good Lives Model;

Interventions should support compliance and desistance- with particular attention to reintegration issues, social supports, and pathways out of offending;

Regulation and legal responses alone have limited impact.

This indicates that a combination of responses to sexual offenders is required for maximum effectiveness blending both protective and integrative measures (see Kemshall 2008 p132 for a full discussion). ‘Protective integration’, that is safely re-integrating sexual offenders into the community whilst preserving public safety (Kemshall 2008), will need to comprise: an appropriate balance of restrictive measures, supportive and integrative measures, pro-social supervision, and effective treatment/programme interventions to be successful.
References


Results from a Randomized Effectiveness Trial’, *Journal of Family Psychology*, February; 23(1): 89–102.


Ministry of Justice (2013) *Offender Assessment System and Offender Group Reconviction Scale: Research Summaries*. Available at:


The Quaker Council of European Affairs (2011) *The Social Reintegration of Ex-Prisoners in Council of Europe Member States*


Appendix I - Overall plan for scoping literature

Actions:
- Scan through
- Eliminate obvious irrelevant material
- Identify duplicates
- Record numbers
- Record search process on Summary Templates (3 searches undertaken)

References located through database searches

509 went forward for Abstract read
143 Unique studies and reports went forward for full read

Actions (initial scoping):
- Identify databases
- Determine key words
- Apply and track limiters
- Undertake initial search

Excluded on abstract read 366

Full text screening:
RED – high usefulness
AMBER – moderate
GREEN – limited

 Included:
- Identified key studies
- Additional key texts identified via full text read

Actions:
- First reading
- Summarise detail
- Rank usefulness
- Discuss
- Select material to be included in final report

Actions:
- Second reading
- Record details of included key studies or other key texts (e.g. reports/ policy documents) in format for draft report
## Appendix II - Summaries of Scoping

### Summary of initial scoping exercise as at 12/7/13

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\(^{20}\) Smart text is provided by Ebsco Support searching index, and offers a mechanism to summarise chunks of text, pulling out main words and phrases for a search against databases, and weights returns on the basis of relevancy. See: [http://support.ebsco.com/knowledge_base/detail.php?id=3736](http://support.ebsco.com/knowledge_base/detail.php?id=3736)
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- What works in prison and community
- European dimensions
Summary of 3rd stage scoping exercise as at 26/7/13

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<th>Database</th>
<th>Keywords</th>
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<td><strong>Sex offenders</strong></td>
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<td>1. Google</td>
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<tr>
<td>2. Europa</td>
<td>Publications Law and Justice</td>
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<td>3. CEP knowledge base</td>
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Total selected for abstract read – 8 additional papers selected