

Research Related to Risk Assessment over time for sex offenders.

In order to determine if an offender's risk has been reduced over time, and therefore whether their community notification risk level classification should be reduced, one can look at a number of factors that have some degree of empirical support. There are many factors which can reduce an offender's risk over time, and those findings are discussed and documented below. These known avenues to reduce risk are among the factors that would help law enforcement determine if a level should be reduced.

Time in the Community without new sex or violent offenses Reduces Risk.

Harris, A., Phenix, A., Hanson, R.K., & Thornton, David, (2003). Static 99 Coding Rules Revised, Appendix One, Adjustment in Risk Based on Time Free.

In general, the expected sexual offence recidivism rate should be reduced by about half if the offender has five to ten years of offence-free behaviour in the community. The longer the offender has been offencefree, post-Index, the lower the expected recidivism rate. It is not known what the expected rates of sexual re-offence should be if the offender has recidivated post-Index with a non-sexual offence. Presently, no research exists shedding light on this issue. Arguments could be made that risk scores should be increased (further criminal activity), decreased (he has still not committed another sexual offence in the community) or remain the same. We suspect that an offender who remains criminally active will maintain the same risk for sexual recidivism.

The recidivism rate estimates reported in Hanson & Thornton (2000) are based on the offender's risk for recidivism at the time they were released into the community after serving time for a sexual offence (Index offence). As offenders successfully live in the community without incurring new offences, their recidivism risk declines. The following table provides reconviction rates for new sexual offences for the three STATIC-99 samples where survival data were available (Millbrook, Pinel, HM Prison), based on offence-free time in the community. "Offence-free" means no new sexual or violent convictions, nor a non-violent conviction that would have resulted in more than minimal jail time (1-2 months).

Age Reduces Risk.

Prentky, R.A. & Lee, A.F.S., (2007). Effect of age-at release on long term sexual re-offense rates in civilly committed sexual offenders. *Sex Abuse*, 19, 43-59.

Hanson, R.K., (2006). Does Static-99 Predict Recidivism Among Older Sexual Offenders? *Public Safety and Emergency Preparedness Canada. Sex Abuse* (2006) 18:343–355

Static-99 (Hanson & Thornton, 2000) is the most commonly used actuarial risk tool for estimating sexual offender recidivism risk. Recent research has suggested that its methods of accounting for the offenders' ages may be insufficient to capture declines in recidivism risk associated with advanced age. Using data from 8 samples (combined size of 3,425 sexual offenders), the present study found that older offenders had lower Static-99 scores than younger offenders and that Static-99 was moderately accurate in estimating relative recidivism risk in all age groups. Older offenders, however, had lower sexual recidivism rates than would be expected based on their Static-99 risk categories. Consequently, evaluators using Static-99 should consider advanced age in their overall estimate of risk.

Doren, D.M., (2006). What do we know about the effect of aging on recidivism risk for sexual offenders? *Sexual Abuse: A Journal of Research and Treatment*, 18:2, 137-157.

Meta-analytic and multiple sample study findings indicate there is an overall inverse relationship between sexual offenders' age at the time of their release from incarceration and their sexual recidivism risk (Hanson, 2002; Hanson & Bussière, 1998). Very recent studies, however, document limits to the generalizability of that finding. This article attempts to integrate the new empirical results into a coherent picture concerning the relationship between aging and recidivism risk for sexual offenders. The purpose is to determine the extent to which empirically-based conclusions can be drawn about how to incorporate the issue of offender age in sexual recidivism risk assessments. Overall, instead of finding straightforward conclusions of a practical nature, a series of study-specific conclusions were found that were often mutually exclusive. Further analyses of existing data were conducted in an attempt to tease out meaningful hypotheses concerning the relationship between offender age and sexual recidivism. Numerous potentially interacting variables were uncovered including participation in treatment, type of risk measure used, type of sexual offender, jurisdiction, and even a

different measure of offender age. Implications of these findings are discussed.

Stability Reduces Risk.

Housing

California Sex Offender Management Board, (2008). An Assessment of Current Management Practices of Adult Sex Offenders in California.

Current research concludes that suitable and stable housing for sex offenders is critical to reducing recidivism and increasing community safety.

Employment

California Sex Offender Management Board, (2008). An Assessment of Current Management Practices of Adult Sex Offenders in California.

Commonwealth of Virginia Department of Corrections. (DOC VA,2002). Sex Offender Community Containment Model.

In 2001, the Virginia Criminal Sentencing Commission completed a risk assessment study of 579 paroled sex offenders over a five-year period. The commission concluded that, "Those offenders not employed or not regularly employed (employed at least 75% of the time) were found to recidivate at higher rates than offenders who experienced stable employment" (p. 8).

Intimate Relationships Reduce Risk.

Hanson, R.K., Bussiere, M.T., (1998). Predicting relapse: A meta-analysis of sexual offender recidivism studies. *Journal of Consulting and Clinical Psychology*, edited by the American Psychological Association, 66:2, 348-62.

Research suggests that having a prolonged intimate connection to someone may be a protective factor against sexual re-offending.

Evidence from 61 follow-up studies was examined to identify the factors most strongly related to recidivism among sexual offenders. On average, the sexual offense recidivism rate was low (13,4%; n=23,393). There were, however, subgroups of offenders who recidivated at high rates. Sexual offense recidivism was best predicted by measures of sexual deviancy (e.g.,

deviant sexual preferences, prior sexual offenses) and, to a lesser extent, by general criminological factors (e.g., age, total prior offenses). Those offenders who failed to complete treatment were at higher risk for re-offending than those who completed treatment. The predictors of nonsexual violent recidivism and general (any) recidivism were similar to those predictors found among nonsexual criminals (e.g., prior violent offenses, age, juvenile delinquency).

Social Support Reduces Risk.

Sex Offender Treatment Reduces Risk.

Center for Sex Offender Management, U.S. Department of Justice, (2006). Understanding treatment for adults and juveniles who have committed sex offenses. http://www.csom.org/pubs/treatment_brief.pdf.

Hanson, R.K., Gordon, A., Harris, A.J., Murphy, W., Quinsey, V.L., Seto, M.C., (2002). First report of the collaborative outcome data project on the effectiveness of psychological treatment for sex offenders, *Sex Abuse*, 14:2, 164-97.

This meta-analytic review examined the effectiveness of psychological treatment for sex offenders by summarizing data from 43 studies (combined $n = 9,454$). Averaged across all studies, the sexual offense recidivism rate was lower for the treatment groups (12.3%) than the comparison groups (16.8%, 38 studies, unweighted average). A similar pattern was found for general recidivism, although the overall rates were predictably higher (treatment 27.9%, comparison 39.2%, 30 studies). Current treatments (cognitive-behavioral, $k = 13$; systemic, $k = 2$) were associated with reductions in both sexual recidivism (from 17.4 to 9.9%) and general recidivism (from 51 to 32%). Older forms of treatment (operating prior to 1980) appeared to have little effect. Future directions for improving the quality of sex offender treatment outcome evaluations are discussed.

Losel, F., & Schumcker, M., (2005). The effectiveness of treatment for sexual offenders: A Comprehensive meta-analysis, *Journal of Experimental Criminology*, 1:1, 117-146.

The article reports a meta-analysis on controlled outcome evaluations of sexual offender treatment. From 2,039 documents published in five languages, 69 studies containing 80 independent comparisons between treated and untreated offenders fulfilled stepwise eligibility criteria (total N = 22,181). Despite a wide range of positive and negative effect sizes, the majority confirmed the benefits of treatment. Treated offenders showed 6 percentage points or 37% less sexual recidivism than controls. Effects for violent and general recidivism were in a similar range. Organic treatments (surgical castration and hormonal medication) showed larger effects than psychosocial interventions. However, this difference was partially confounded with methodological and offender variables. Among psychological programs, cognitive-behavioral approaches revealed the most robust effect. Nonbehavioral treatments did not demonstrate a significant impact. There was no outcome difference between randomized and other designs, however, group equivalence was associated with slightly larger effects. Various other moderators had a stronger impact on effect size (e.g., small sample size, quality of outcome reporting, program completion vs. dropout, age homogeneity, outpatient treatment, and authors' affiliation with the program). More differentiated, high-quality evaluations are needed to clarify: What works for whom under which circumstances?

Prentky, R. & Schwartz, B. (December, 2006). Treatment of Adult Sex Offenders. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence. Retrieved month/day/year, from: <http://www.vawnet.org>

Given the failure of more traditional correctional remedies, such as deterrence and incapacitation, for reducing the level of sexual violence in society, other interventions must be actively sought. One potentially effective intervention for known offenders is treatment. A dispassionate conclusion would be that treatment is not likely to be effective for all offenders and that treatment is likely to be effective for some offenders. Essentially, such a conclusion is accurate and, for most of us, obvious. Given the extraordinary variation of sex offenders, it would be only logical that some, but not all, offenders would benefit from treatment. Stated otherwise, treatment undoubtedly will help to restore some offenders to a nonoffending lifestyle and will fail to touch other offenders. The answer to the question of "how many" fall into each category is unclear, since, as we have seen, it often depends on the particular sample. Based on the research

discussed here, it is reasonable to conclude that current treatment interventions can reduce rates of sexual recidivism by 5% – 10% in mixed samples of adult male sex offenders.

Community Notification can Increase the Risks to the Community.

Zevitz, R. G. (2006). Sex offender community notification: Its role in recidivism and offender reintegration. *Criminal Justice Studies*, 19, 193–208.

Failure to Register does Not Increase Risk.

Minnesota Department of Corrections, (2010). The effects of Failure to Register on sex offender recidivism.

<http://www.doc.state.mn.us/PAGES/files/large-files/Publications/03-10FailuretoRegisterstudy.pdf>

The findings suggest that registration noncompliance does not significantly increase the risk of either sexual or general recidivism. Yet, given that past behavior is often the best predictor of future behavior, a prior FTR conviction was one of the strongest predictors of future registration noncompliance. The results also indicated the risk of registration noncompliance was significantly lower for offenders who had a GED or high school degree at the time of release from prison. This finding suggests that specifically targeting undereducated predatory offenders with educational programming may be an effective strategy to help reduce registration noncompliance and, more narrowly, reincarceration costs resulting from FTR recidivism.

Levenson, J.S., Letrouneau, E., Armstrong, K., Zgoba, K.M., (2010). Failure to Register as a sex offender: Is it associated with recidivism? *Washington & Lee Law School Justice Quarterly*, 27:3, 305-31.

Zgoba, K.M., & Levenson, J., (2011). Failure to Register as a Predictor of Sex Offense Recidivism: The Big Bad Wolf or a red herring? *Sexual Abuse: A Journal of Research and Treatment*, 1-22.

<http://www.ovsom.texas.gov/docs/Failure-to-Register-as-a-Predictor-of-Sex-Offense-Recidivism-2011.pdf>

This quasi-experimental study analyzed the recidivism outcomes of 1,125 sexual offenders in two groups. The first group comprised 644 registered

sex offenders who were convicted of a sex crime and at some point failed to register after release from prison. The comparison group contained 481 registered sex offenders released from prison during a similar time frame who did not fail to register after their release. The groups were then tracked for both sexual and nonsexual offenses to determine whether failure to register under Megan's Law is predictive of reoffending. Failure to register was not a significant predictor of sexual recidivism, casting doubt on the belief that sex offenders who are noncompliant with registration are especially sexually dangerous. Few differences between groups were detected, but FTR offenders were more likely to have sexually assaulted a stranger and to have adult female victims, further challenging the stereotype of the child predator who absconds to evade detection. Potential policy implications are discussed.

Levenson, J.S., Sandler, J.C., & Freeman, N.J. (2012). Failure-to-register laws and public safety: An examination of risk factors and sex offense recidivism. *Law & Human Behavior*, 36, 555-565.

Levenson, J.S., & Harris, A.J., (2012). 100,000 sex offenders missing... or are they? Deconstruction of an urban legend. *Criminal Justice Policy Review*, 23, 375-386.

Levenson, J.S., Ackerman, A.A., & Harris, A.J. (2013). Catch me if you can: An analysis of fugitive sex offenders. *Sexual Abuse: A Journal of Research and Treatment*. DOI: 10.1177/1079063213480820

Washington State Institute for Public Policy, (2006). Sex offender sentencing in Washington State: Failure to Register as a Sex Offender-Revised. http://www.wsipp.wa.gov/ReportFile/926/Wsipp_Failure-to-Register-as-a-Sex-Offender-Revised_Failure-to-Register.pdf

Sex offenders convicted of failure to register have higher subsequent recidivism rates than those without a conviction:

38.5 percent versus 22.9 percent for felony recidivism

15.8 percent versus 9.4 percent for violent felony

4.3 percent versus 2.8 percent for felony sex convictions.

That is, sex offenders with a conviction for failure to register have recidivism rates that are 50 percent higher than the rates of those without a conviction.

Brant, J., (2013). Failure to Register: Are violations overblown? *Sexual Abuse: A Journal of Research and Treatment*

A 2006 report from the state of Washington suggests that FTR offenders recidivate at a rate 50% higher than compliant sexual offenders. However, upon closer review of that data, five-year felony sexual offense recidivism rates for compliant offenders were 2.8% compared to 4.3% for offenders with FTR citations.

If lengthy periods of registration are not really reducing recidivism or making communities safer. Being required to register for decades is, in reality, retribution with interminable opportunities for FTR. Prudent public policies are compromised when violations of the “civil” requirements of registration carry severe criminal penalties so damaging that offenders may never recover.

The social challenges attached to being a “sex offender” and FTR by proxy, are extensive, insidious, and unrelenting. Just when offenders believe conscientious effort and time will eventually put the “SO” label and stigma behind them, one mistake can result in felony FTR becoming lifelong evidence of a previous registerable offense—even if it occurred as a juvenile. With felony FTR, most guys will never wake up from the subsequent housing, employment, and social nightmares. Compromised stabilities undermine the pro-social principles of Good Lives and other well-established tenets of recovery.

Juvenile Offenders have Lower Rates of Reoffense than Adults.

Caldwell, M. F. (2002). What we do not know about juvenile sexual reoffense risk. *Child Maltreatment*, 7,291–302.

Caldwell, M. (2007). Sexual offense adjudication and recidivism among juvenile offenders. *Sexual Abuse: A Journal of Research and Treatment*, 19, 107–113.

Caldwell, M.F., & Dickinson, C., (2009). Sex offender registration and recidivism risk in juvenile sexual offenders, *Behavioral Sciences & the Law*, 27, 941-956.

Caldwell, M.C. (2010). Study characteristics and recidivism base rates in juvenile sex offender recidivism. *International Journal of Offender Therapy and Comparative Criminology*, 54, 197–212.

Community notification does not deter juvenile sex offenders.

Letourneau, E.J., et al., (2010). Do sex offender registration and notification requirements deter juvenile sex crimes? *Criminal Justice and Behavior*, 37(5), 553-569.

Levenson, J. S. (2003). Community notification and civil commitment of sex offenders: A review of policies designed to combat sexual violence. *Journal of Child Sexual Abuse*, 12 (3/4), 17–52.

Worling, J.R., & Langstrom, (2006). Risk of sexual recidivism in adolescents who offend sexually; Correlates and assessment. In H.E. Barbaree and W.L. Marshall (Eds.), *The Juvenile sex Offender*, Second Edition. New York, NY: The Guildford Press.

Juvenile Offenders Risk Reduced by Treatment.

Bijleveld, C. & Hendriks, J., (2008). Recidivism among juvenile sex offenders after residential treatment. *Journal of Sexual Aggression*, 14(1), 19 - 32.

Borduin, C. M., & Schaeffer, C. M. (2003). Multisystemic treatment of juvenile sexual offenders: A progress report. In M. H. Miner & E. Coleman (Eds.), *Sex offender treatment: Accomplishments, challenges, and future directions* (pp. 19-36). New York: Oxford.

Borduin, C. M., Schaeffer, C. M., & Heiblum, N. (2009). A randomized clinical trial of multisystemic therapy with juvenile sexual offenders: Effects on youth social ecology and criminal activity. *Journal of Consulting and Clinical Psychology*, 77, 26-37.

Center for Sex Offender Management, U.S. Department of Justice, (2006). Understanding treatment for adults and juveniles who have committed sex offenses. http://www.csom.org/pubs/treatment_brief.pdf.

Worling, J.R., & Curwen, T., (2000). Adolescent sexual offender recidivism: success of specialized treatment and implications for risk prediction. *Child Abuse & Neglect*, 24(7), 965-82.

Worling, J. R.(2004). Essentials of a good intervention program for sexually abusive juveniles: Offense related treatment tasks. In G. O'Reilly, W. L. Marshall, A. Carr, & R. C. Beckett (Eds.), *The handbook of clinical intervention with young people who sexually abuse* (pp. 275-296). New York: Brunner-Routledge.

Worling, J.R., Littlejohn, A., & Bookalam, David, (2010). 20-year prospective follow-up study of specialized treatment for adolescents who offended sexually. *Behavioral Sciences & the Law*, 28, 46-57.

Collateral Consequences of Community Notification are Severe for Juveniles.

Edwards,W., & Hensley, C. (2001). Contextualizing sex offender management legislation and policy: Evaluating the problem of latent consequences in community notification laws. *International Journal of Offender Therapy and Comparative Criminology*, 45(1), 83-101.

Human Rights Watch, Nicole Pittman, (2013). Raised on the registry: The irreparable harm of lacing children on sex offender registries in the U.S. <https://www.hrw.org/report/2013/05/01/raised-registry/irreparable-harm-placing-children-sex-offender-registries-us>. ISBN: 978-1-62313-0084,

Letourneau, E. J. & Miner, M. H. (2005). Juvenile sex offenders: A case against the legal and clinical status quo. *Sexual Abuse: A Journal of Research and Treatment*, 17, 293-312.

Levenson, J. S., D'Amora, D. A., & Hern, A. (2007). Megan's Law and its impact on community re-entry for sex offenders. *Behavioral Sciences & the Law*, 25, 587– 602.

Levenson, J.S., & Tewksbury, R., (2009). Collateral Damage: Family members of registered sex offenders. *Journal of Criminal Justice*, 34, 54 – 68.

Tewksbury, R. (2005). Collateral consequences of sex offender registration. *Journal of Contemporary Criminal Justice*, 21, 82-90.

Tewksbury, R., (2007). Exile at home: The unintended collateral consequences of sex offender residency restrictions. *Harvard Civil Rights-Civil Liberties Law Review*, 42, 531 – 541.

Trivits, L. C., & Reppucci, N. D. (2002). Application of Megan's Law to juveniles. *American Psychologist*, 57, 690 –704.