


Therapist features that enhance effectiveness

- Empathic
- Directive
- Flexible
- Warm
- Encourages participation
- Respectful
- Asks open-ended questions
- Instills hope



Marshall, W. L., Fernandez, Y. M., Serran, G. A., Mulloy, R., Thornton, D., Mann, R. E., & Anderson, D. (2003). *Aggression and Violent Behavior*, 8, 205-234.


Jim's Tips...

**...for talking with adolescents
and young adults
about difficult issues**

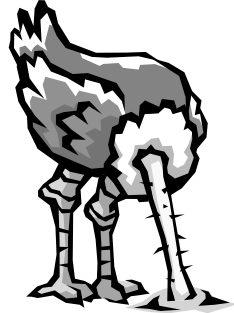
2. The Approach

Informed Consent Conversation

- the assessment process (interviewing, testing, document review, informant interview)
- time requirements
- nature of the questions
- access to, and storage of, information
- limits of confidentiality
- possible risks / benefits
- possible alternatives
- assessment report and feedback
- specific agency expectations, rules, etc.



Be aware of (and enhance)
your own comfort level
talking about sexual issues.



Advantages of a Second Interviewer

1. New and continued learning for both
2. Quality assurance for assessments
3. Protection against vicarious trauma
4. Client familiarity with a second therapist if therapist absence
5. Client familiarity if need for second therapist
6. Second set of opinions/observations
7. Allows for spontaneous "correction"
8. Enhanced clinical recording
9. Second rater for structured assessment checklists
10. Provides for observations of client with a different person
(age, gender, style)



Make predictions regarding
defenses—i.e., normalize
defenses

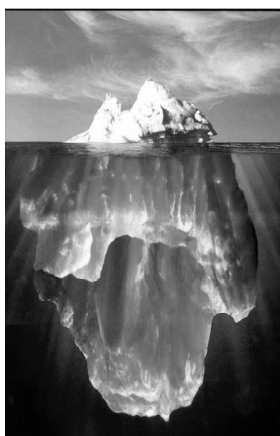


"sometimes the topics are so hard to talk
about that people sometimes say, 'I don't
remember', or 'I don't know' ..."

Avoid closed-ended questions

"Did you...?, Do you ever...?,
Have you ever...?, Can you
remember a time when...?"





If you are asking about a
negative, or potentially
embarrassing behavior,
assume that there is a lot
of it.

If you are asking about a
positive, or socially-
desirable, behavior, assume
that there is none of it.



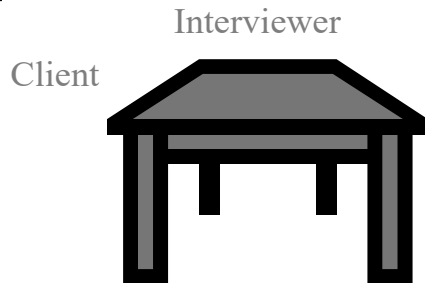
(e.g., friends, dating, career plans,
prevention strategies)

Be careful not to supply the answer with the question.





Sit at 90°



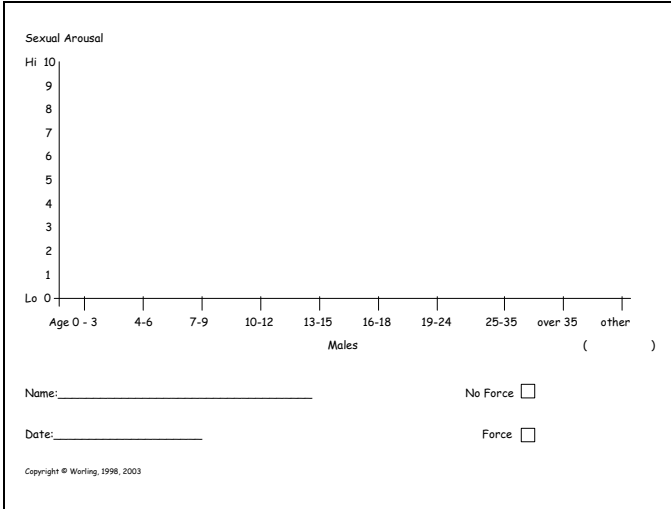
Use concrete materials such as timelines, maps, floor plans, charts, graphs, drawings, etc.



The Timeline

Gay-----Straight

Female-----Male



Self-report sexual arousal graphs

(www.drjamesworling.com)


~~...the sexual offense...~~

~~...the incident...~~


~~...the assault...~~

...the sexual offending...

(avoid singularity)



Denial &
Minimization



1. Shame and embarrassment are natural
2. Aggressive confrontation is harmful
3. "Denial" is not predictive of future risk
4. There is no research to suggest that a "full" disclosure of all details is necessary for successful outcome

People with low self-esteem...

- Expect people not to like them
- Seek poor quality partners
- Have poor relationships with others
- Lack empathy
- Engage in cognitive distortions
- Experience frequent emotional distress
- Underestimate their abilities
- Expect to do poorly and to fail
- Set lower goals for themselves
- Unlikely to practice scheduled tasks
- Readily give up adherence to prevention

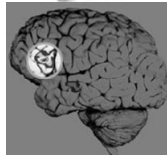
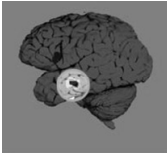


From Baumeister (1993); Marshall (1996); Marshall, Anderson, & Champagne (1996)

Enhancing self-esteem



www.brainwise-plc.org



Enhancing affective regulation/expression

Affective expression / regulation

- recognizing / labeling affective states
- relaxation training & practice
- thought records
- mindfulness
- exercises from manualized approaches
(e.g., *Coping Cat*, *Mood Management*, *Dealing With Depression*, *Beyond the Blues*, etc.)
- modification of the environment
- self-instructional training
- psychopharmacological intervention



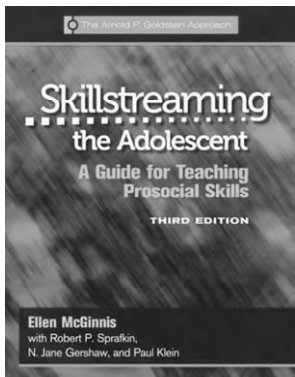
- workbooks by Instant Help Publishing
- DBT skills for adolescents (Rathus & Miller)
- The Grimace app

The following behaviours can lead to problems (True or False):

1. ___ Masturbating when others can see or hear you
2. ___ Masturbating using an object
3. ___ Masturbating while remembering my sexual offending
4. ___ Masturbating to deal with my anger or sadness
5. ___ Masturbating to relax and fall asleep
6. ___ Masturbating to fantasies of people at school or work
7. ___ Masturbating to fantasies of young girls/boys
8. ___ Masturbating several times a day
9. ___ Masturbating in a public space
10. ___ Masturbating while viewing sexual material
11. ___ Masturbating while thinking about my romantic partner

Masturbation

- What function does masturbation serve?
- Is masturbation "normal"?
- At what age do people first engage in masturbation?
- Are there cultural or religious values regarding masturbation?
- What messages does our society send about masturbation?
- How can masturbation affect our sexual thoughts, attitudes, and interests?
- What do your family and friends think about masturbation?
- What factors affect how often you masturbate?
- How was masturbation connected to your sexual offending?
- What role did sexual media play in your masturbation habits before and after the sexual offending?



- 1. Identification of social skills to be strengthened**
- 2. Teaching specific social skills**
(modeling, role playing, reverse role playing, self-talk, identification of automatic thoughts)

Enhance social skills/relationships

FREE CD WITH BLANK SCALES

The Incredible 5-Point Scale:

The Significantly Improved and Expanded Second Edition

Assisting students in understanding social interactions and controlling their emotional responses

Karl Dunn Buron and Mitzel Curtis

Parental Reactions

- Shock
- Disbelief
- Anger
- Confusion
- Guilt
- Shame
- Hopelessness

Enhance parent-child relationships

human brain development

outcome research

parent and family involvement

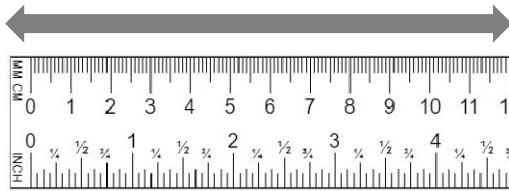
evolving sexual interests

Parent Groups

- shame/guilt/resiliency
- teen brain development
- treatment goals and approaches
- sexual values, norms, and laws
- communication and discipline with teens
- sexualized media



How *MUCH* Accountability?



Enhance accountability (if needed)

Recovering memories in “amnesic” individuals

Marshall, Serran, Marshall, & Fernandez (2005) *Sexual Abuse*, 17, 31-38.



Supportive, nonjudgmental, and understanding approach to assisting clients to recall sexual offending behaviours

(“I don’t remember...”)



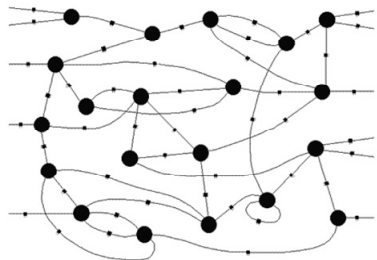
Recovering memories in "amnesic" individuals
Marshall, Serran, Marshall, & Fernandez (2005)

1. Explain the importance of recalling the details of the sexual offending



Recovering memories in "amnesic" individuals
Marshall, Serran, Marshall, & Fernandez (2005)

2. Describe the "neural network" model of memory (Kosslyn & Koenig, 1995)—
i.e., memories stored in a **network** of interconnected cells; not discrete cells—
spread of activation leads to recovery





Recovering memories in "amnesic" individuals
Marshall, Serran, Marshall, & Fernandez (2005)

3. Help client to use contextual cues and imagery to begin memory activation

Begin with "nonthreatening" features of the day (*Think of what you were wearing, Think of what you might have had for breakfast...*)



Recovering memories in "amnesic" individuals
Marshall, Serran, Marshall, & Fernandez (2005)

4. After more recall of "nonthreatening" details, move to just before **OR** just after the sexual offending and progress towards the offending



1. Normalize denial ("It's human")
2. Examine function of denial of NONsexual issues
3. Examine pros & cons for someone denying sexual offending
4. If necessary, help parents to accept POSSIBILITY that sexual offending could have occurred
5. Acknowledge just how DIFFICULT it would be to change stories now

("I didn't do it...")

If all else fails...



“Let’s work together so that you are not accused of offending sexually in the future?”



How does shame impact individuals who have offended sexually?

- Reduced empathy for those who were abused
- Increased blaming of others for sexual offending
- Social withdrawal
- Increased avoidance
- Minimization / Denial of sexual offending
- Self-harming behaviours

Worling, J. R., Josefowitz, N., & Maltar, M. (2011). *In M Calder (Ed.), Contemporary practice with young people who sexually abuse*, pp. 320-334.

How to reduce shame for youth who have sexually offended



1. Provide warm and compassionate support
2. Separate the offending from the person

Worling, J. R., Josefowitz, N., & Maltar, M. (2011). In M Calder (Ed.), *Contemporary practice with young people who sexually abuse*, pp. 320-334.

Road to Reoffending

What was happening prior to the offense?

Feelings

Sexual Thoughts

How did you convince yourself?

Planning

High Risk Situations

STOP

Coping

Strong Feelings

Road to **STOP** Offending

Name: _____

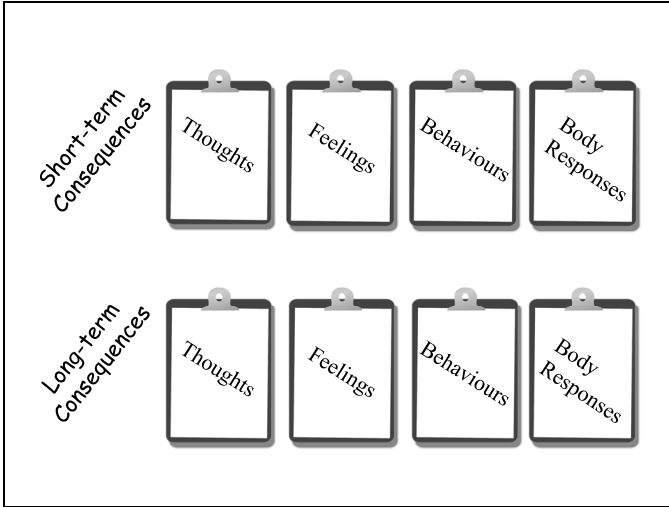
Date: _____

Develop offense-prevention plans

"High Risk" Game

GRADUALLY present increasingly riskier situations


Provide acceptable coping responses for each situation

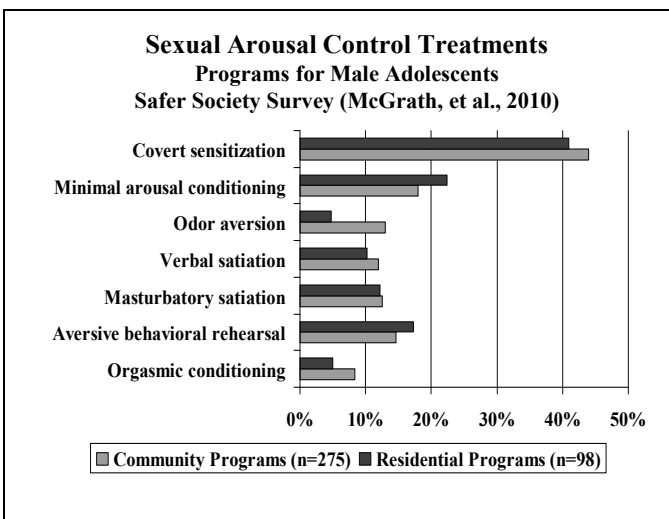


Enhance awareness of impact of sexual offending

Letter of responsibility / apology Way & Balthazor, 1990

- give an apology
- briefly outline what you did
- briefly outline how you did it
- explain that you are responsible
- explain that the person who was abused is NOT responsible
- explain how you may have hurt the person
- explain how you may have hurt others
- explain why you are glad that the offending was discovered and why disclosure is important
- explain how you are working to prevent reoffending





Enhance healthy sexual interests



Behavioral Interventions To Reduce Deviant Sexual Arousal...?

1. Ethical concerns (punishment, consent, masturbation, sexual media, etc.)
2. Lack of empirical support with adolescents
3. Potential iatrogenic harm
4. Questions regarding long-term change
5. Undue emphasis on sexual arousal

Thought Stopping



- Johnston, Ward, & Hudson, 1997
- Shingler, 2009

ironic rebound effect



Mindfulness-based strategies

Is it *ever* appropriate to *use* sexual media in treatment??



Build Opportunities for Healthy Sexuality

- Intimacy skills
- Positive sexual knowledge
- Positive sexual attitudes
- Communication/Negotiation skills
- Problem-solving skills
- Hope for healthy sexual future




Socratic questions, true/false quizzes, stories/videos

↓
Critical thinking
↓

Personal Values Statements

- Sexual Media
- Masturbation
- Romantic Relationships
- Communication
- Internet and Smartphones
- Future Sexual Behavior (prevention)
- Courtesy & Respect
- Motivation & Perseverance



2010
Behavioral Sciences & The Law, 28

20-year prospective follow-up study of specialized treatment for adolescents who offended sexually

Worling, Litteljohn, & Bookalam

Ontario Ministry of Children & Youth Services,
 Thistletown Regional Centre, SAFE-T Program (1983-2013)

