

Sex Offender Treatment Intervention and Progress Scale (SOTIPS)

Individual: _____ Roger _____

Scorer: _____

Evaluation Date: _____

Setting: Community Residential

Months in Weekly Treatment: _____

Time of Evaluation: Initial

Months in Aftercare Treatment: _____

During Treatment

Total: _____

End of Treatment

Rating Guide (use definitions in scoring manual):

0 = minimal or no need for improvement
 1 = some need for improvement
 2 = considerable need for improvement
 3 = very considerable need for improvement

	0	1	2	3
Sexuality and Risk Responsibility				
1. Sexual Offense Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sexual Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Sexual Attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sexual Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Sexual Risk Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminality	0	1	2	3
6. Criminal and Rule-Breaking Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Criminal and Rule-Breaking Attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treatment and Supervision Cooperation	0	1	2	3
8. Stage of Change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Cooperation with Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Cooperation with Community Supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Management	0	1	2	3
11. Emotion Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Problem Solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Impulsivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Stability and Supports	0	1	2	3
14. Employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Social Influences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sub-totals				
			Total	

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Roger

Intake interview

Roger is 40 years old. He was recently placed on probation after having been convicted of sexually abusing his 10-year-old niece. He had lived with the victim and her mother for the past several years. According to the police affidavit, he molested her about 30 times over a two-year period. He verbally coerced her to touch his penis and perform oral sex on him. He also fondled her breasts and digitally penetrated her vagina.

1. Sexual Offense Responsibility

He said that the sexual offenses were the fault of both of them. He said, "I was older but she wanted to do it. She liked it." He also said, "She was kind of old. She really didn't tell on me. It stopped because my sister found out."

2. Sexual Behavior

He said he has not been sexually active with anyone since his arrest. He does not appear to have any sexual compulsions. His possession of a few Playboy and Hustler magazines is against his current probation conditions and he said he is willing to get rid of them. He said he masturbates about two times a week.

3. Sexual Attitudes

He justifies his sexual offending by saying, "I was older but she wanted to do it. She liked it." He also said, "She was kind of old. She really didn't tell on me. It stopped because my sister found out. We (Becky and I) were very close." He seems to recognize that these factors are no excuse for him abusing Becky and that sex with children is wrong but he seems relatively stuck on the fact that her lack of resistance meant it was okay. Additionally, he points out that she does not seem to have been harmed by the abuse. He is open to examining these views.

4. Sexual Interests

He said that 100% of his current sexual interests over the past 6 months are of consensual sex with adult females and he has a history of having age-appropriate sexual relationships with peers. He said that he has not thought of Becky in a sexual way since his arrest. However, he shows considerable interest in finding out when he can see Becky again. He has not undergone sexual arousal testing. His brother and sister said that although Roger began taking a special interest in Becky about two years ago, he has never seemed to have a particular interest in other children, children's television shows, or pictures of children.

5. Risk Management Application

Concerning his risk to re-offend, he said to the evaluator, "I won't. I learned my lesson. I just need to tell Becky we can't do this anymore. We have to be just cousins. We can't do sex stuff anymore. All we can be is regular friends. When do you think I can see her? Can you help me with that?" Since his arrest, his probation conditions require that he avoid contact with children and not hang out where children congregate. His sister or brother has usually been with him when he has gone outside of the home and they report no problems with him following these conditions. Roger said he understands and agrees to follow these conditions. However, as previously noted, he did not immediately discard his Playboy and Hustler magazines after being told about his "no pornography" condition, although some of his probation officer was not sure how well he initially understood this condition.

6. Criminal and Rule-Breaking Behavior

There are not reports that he has been in any trouble with the law. Except for his possession of pornography, he has not engaged in any type of rule-breaking behavior with respect to his probation or treatment conditions. He said he did not know that pornography possession was against his probation conditions.

7. Criminal and Rule-Breaking Attitudes

He has no criminal history other than the current sexual offense. He seems to have law-abiding attitudes.

8. Stage of Change

He knows that sex with children is against the law and that he cannot have sex with Becky. He is willing to begin sex offender treatment but is not sure that he needs it.

9. Cooperation with Treatment

He has not begun treatment, but has been cooperative with the evaluation process. He is not a talker but answered all questions asked of him. He was late for one of his initial interviews but his brother said they had car problems and called ahead to let the therapist know.

10. Cooperation with Supervision

His probation officer said that Roger has attend all of his probation meetings and has been cooperative. The only concern was that his probation officer said that he reviewed the "no pornography" condition with Roger and later found out that Roger had a few Playboy and Hustler magazines that he had not discarded. Roger did so after being reminded of his probation conditions.

11. Emotion Management

His affect has always been rather flat. He said he began molesting Becky about two years ago after his girlfriend broke up with him and he got "down in the dumps" and was lonely. He said that over the past six months he has rarely felt lonely and regularly spends time socializing with friends.

12. Problem Solving

He generally is able to identify typical life problems and either work out solutions himself or enlist his sister or brother for help.

13. Impulsivity

His behavior is generally thoughtful and purposeful. However, in the past when he gets extra money he has occasionally spent it impulsively. To address this problem, about one year ago he asked his sister to manage his money for him. Since he began living with his brother, he asked his brother to manage his money.

14. Employment

He has worked at the same print shop for about six years doing janitorial work. He enjoys his work and likes his boss. His boss says that Roger is a quiet, good and reliable worker.

15. Residence

He has been living with his brother for the past six months. Although he preferred living with his sister and Becky, he likes living with his brother. They get along well and he has his own room.

16. Social Influences

He has a group of about three men his age with whom he socializes. They do not use alcohol or drugs and have never been in trouble with the law. They do not know about Roger's offense.

His only family are his older brother and sister. They have not talked in detail with Roger about his sexual offenses but believe he committed them. They support the "no contact" probation condition concerning Becky and other children. They willingly participated in an initial interview with Roger's treatment provider and case manager to assist in developing Roger's case plan.

Larry

Larry is 32 years old and is serving a sentence for sexually assaulting an adult female. When he was a teenager he was convicted of molesting his 11-year-old younger brother and sent to a residential treatment program. He also has two previous charges for exposing himself to adult women but they were dropped. He has been in sex offender treatment for nine months.

1. Sexual Offense Responsibility

When asked who was responsible for the current sexual offense, he said, "She did just lay there and let me do it. I think it may have been the medication I was on. It got me very aroused. Then she said to stop. It was a lot her fault. She said 'stop' but I was already too turned on to stop. I know she has slept with other guys on the first date before. I know it was wrong but I just couldn't, I just couldn't stop. I have mental illness you know."

2. Sexual Behavior

He said he has not been sexually active with anyone since his arrest. He said, "The Doctor says I have the highest sex drive. I do masturbate a couple of times as day." He reports that he sometimes gets an erection and "it won't go down." He said he has a fetish for older woman who wear white pants. About this fetish, he said, "... I get really excited and I try my hardest to turn my head or think about something else when I see the female bending over – not because she is just wearing the white pants, it is when she bends over, something with the way she does it and it triggers my reaction – I would just like to go up and grab that that person."

3. Sexual Attitudes

When asked about his current sexual offense, he said, "She did just lay there and let me do it. I think it may have been the medication I was on. It got me very aroused. Then she said to stop. It was a lot her fault. She said 'stop' but I was already too turned on to stop. I know she has slept with other guys on the first date before. I know it was wrong but I just couldn't, I just couldn't stop." He also said, "Well, if a woman started – I don't know what they call it, leading me on or something like that, and they want me to do something with them, I would get really upset if they would not have sex with me and then I would start thinking about offending them. I know it would be wrong, but it would be hard to stop."

4. Sexual Interests

He said that he is not aroused to children and that he never molested his younger brother. He has a long history of having consensual sexual relationships with adult females.

He said he is sexually interested in women who are about 10 years older than he is. Concerning his sexual interests in adult women, he said, "I can be thinking she likes me and if she does not like me and I am thinking in my head it is okay to go give her a hug, or a kiss or something like that. That would be totally wrong.... I am trying my hardest not to get into any trouble. My major risk factors are that if a older woman is wearing white pants I tend to get really excited and I try my hardest to turn my head or think about something else when I see the female bending over – not because she is just wearing the white pants, it is when she bends over, something with the way she does it and it triggers my reaction – I would just like to go up and grab that that person. So I have to stay away from her. I keep looking at her and I think she knows it and I don't want to." He said that about one half of his sexual fantasies are about forcing himself on a woman sexually. He has not undergone sexual arousal testing.

5. Sexual Risk Management

He has a fair understanding of many of his sexual offense risk factors but has considerable difficulty describing realistic and effective interventions. He has considerable difficulty managing his sexually intrusive thoughts towards female staff. He struggles to avoid making excessive sexually focused visual contact with female staff. He continues to approach female staff, but not male staff, in conversation at inappropriate times and this behavior is against program rules. However, he has not acted on any of his sexual impulses towards female staff. He continues to have anger management problems and anger is often a precursor to his aggressive sexual fantasies.

6. Criminal and Rule-Breaking Behavior

He has received 8 minor disciplinary reports for breaking rules in the prison. These are for smoking in unauthorized areas, being in areas of the prison without authorization, and lending some of his possessions to other inmates without permission. Some of these infractions are related to other inmates taking advantage of him.

7. Criminal and Rule-Breaking Attitudes

He has received 8 minor disciplinary reports for breaking rules in the prison (discussed in next section). When asked to explain these infractions, he gives multiple excuses such as, "I didn't understand the rules. Other residents do the same thing and don't get disciplined. I did it before and no one said anything." He does not seem to recognize how these excuses are related to his getting into trouble in the facility

8. Stage of Change

He states he is very pleased he has been accepted into treatment but vacillates between admitting he has a sexual offending problem for which he needs treatment and saying that if he simply stays away from the "wrong people" he will never reoffend.

9. Cooperation with Treatment

He attends all treatment sessions and attends on time. He gets help with homework assignments from an inmate tutor and generally has assignments prepared on time. He has a tendency to interrupt others in group and occasionally blurts out irrelevant comments. He resists assignments to keeping group informed about his disciplinary sanctions.

10. Cooperation with Supervision

In the months prior to his sentencing for the current offense, he broke several of his bail conditions.

11. Emotion Management

He has considerable problems with anxiety. He rubs his hands together and repeats himself when nervous. He gets angry easily and frequently. He says that anger is related to his sexual offending. He said, "If I am very ticked off, I start getting sexually aroused.... Yes, when I get angry I try to go masturbate so that I can get my anger to go away."

12. Problem Solving

He is able to identify many of his life problems but has difficulty staying focused on them long enough to generate possible solutions. When he does come up with realistic plans to solve problems, he tends to be poor at following through with them. For example, during a recent interview, he identified being teased by other inmates as a problem. With assistance, he generated possible solutions and could weigh their pros and cons, but he was not able to carry out a plan of action.

13. Impulsivity

He often says things to other inmates without thinking that get him in trouble or make him the butt of jokes. He acts surprised when he gets negative reactions from others for his inappropriate behaviors. He has recently accepted dares from other inmates to perform practical jokes on other inmates and does not think through the consequences of his actions.

14. Employment

He has a part time job as the unit cleaner and laundry person and has been quite responsible. He is also making good progress in reading and writing classes he attends twice a week in the educational building.

15. Residence

Prior to his incarceration, he lived a nomadic existence living in homeless shelters in Vermont and New Hampshire.

16. Social Influences

When asked whom he socializes with, he said, "My friends are generally a positive influence and I try to be the same to them. I did hang around a lot of guys who were doing drugs a few months ago but I didn't. The last few weeks I made friends with guys who don't drink or get in trouble. I know I can be frustrating sometimes but they know about my problem and want me to do good. They know I did what I did and help me deal with it."

He has not had contact with his parents for years. His grandmother visited him twice in the last six months, as did an aunt and one of his brothers. Staff met with his grandmother who said she believes he is a "victim" of the criminal justice system. She believes he may have had sex with the victim but that the victim has a bad reputation and probably is to blame. Staff have not talked with his aunt or brother, but Larry said they are pleased that he is in treatment and want him to cooperate with the program.

Violent Offender Treatment Intervention and Progress Scale (VOTIPS)

Individual: _____ Scorer: _____

Evaluation Date: _____ Setting: Community Residential

Months in Weekly Treatment: _____ Time of Evaluation: Initial

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Total: _____ End of Treatment

Rating Guide (use definitions in scoring manual):
 0 = minimal or no need for improvement
 1 = some need for improvement
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 3 = very considerable need for improvement

Risk Responsibility and Management	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
1. Violent Offense Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Risk Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminality	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
3. Criminal and Rule-Breaking Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Criminal and Rule-Breaking Attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treatment and Supervision Cooperation	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
5. Stage of Change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Cooperation with Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Cooperation with Community Supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Management	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
8. Emotion Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Problem Solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Impulsivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Stability and Supports	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
11. Employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Social Influences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sub-totals				
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