Bethany Broida:

Welcome, everyone. My name is Bethany Broida and I am the Director of Communications at the National Criminal Justice Association. It is my pleasure to welcome you to "What Do We Know About Sexual Offending and Sex Offender Management and Treatment, Adult Risk Assessment and Recidivism." This webinar is the sixth in a nine-part series that is designed to provide policymakers and practitioners with trustworthy, up-to-date information they can use to identify and implement what works to combat sexual offending and prevent sexual victimization.

Registration is currently open for the next webinar in this series, Adult Typologies, which will take place on August 24th. Also, if you missed the prior webinars in this series, the webcast in the slides from those sessions are available on the NCJA website. Before I go any further, I would like to thank our wonderful partners at the SMART Office in the Department of Justice, Office of Justice Programs for making this webinar possible.

Before we begin, let me quickly cover a few logistical items. First, we will be recording today's session for future playback. The recording and the slides from this session will be posted on the NCJA website at www.ncja.org/webinars and it will be emailed to everyone who is registered for this session. Today's webinar is being audiocast to the speakers on your computer. If you would prefer to call in by phone, please use the number contained in your registration email or on the event info tab located on the top left-hand side of the screen. If you encounter issues with the audio during the webinar, please feel free to call in by phone.

Due to the number of people joining us today, we have muted all participants to reduce background noise. If you have questions to the presenters, we encourage you to submit them using the chat feature on the right-hand side of your screen. Please select Host and Presenter from the drop-down menu next to the text box. We have also included time for a question and answer period at the end of the presentation. However, you may submit your question at any time.

If you would like to communicate with NCJA staff during the webinar, please submit your comment using the chat feature to Bethany Broida or Host. If you have technical difficulties or get disconnected during the session, you can reconnect using the same link you used to join the session initially. Finally, in the last five minutes of the webinar, we will ask you to complete a short survey. The information you provide will help us plan and improve future webinars.

At this time, I would like to briefly introduce our speakers for today's session. In November 2014, Luis deBaca was appointed by President Barack Obama as the Director of the Justice Department's Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking, otherwise known as the SMART Office.

Mr. deBaca previously coordinated U.S. government activities in the global fight against contemporary forms of slavery as an ambassador-at-large for the State

Department's office to monitor and combat trafficking in persons, and served as counsel to the House Committee on the Judiciary, where his portfolio for Chairman John Conyers Jr. Included national security, intelligence, immigration, civil rights and modern slavery issues.

At the Justice Department from 1993 to 2006, he lead the investigation and prosecution of cases involving human trafficking, official misconduct, and hate crimes, as well as money laundering, organized crime and alien smuggling. He's the recipient of many awards, including the leading honor given by the National Human Trafficking Victim service provider community, the Freedom Network's Paul and Sheila Wellstone Award.

Next, Scott Matson is a Senior Policy Adviser at the SMART Office where he advises 37 states and the District of Columbia on adopting the standards for the Sex Offender Registration and Notification Act, otherwise known as SORNA. In addition, he leads the office's efforts on the Sex Offender Management and Planning Initiative. Before joining SMART, Scott was program manager at the Jett Foundation where he developed and managed the criminal justice portfolio that included sentencing and corrections policy, reentry, wrongful convictions, and the death penalty.

Prior to joining Jett, he was associate director of the Vera's Institute of Justice's Center on Sentencing and Corrections. He served as a research associate at the Center for Sex Offender Management where he provided training and technical assistance to a wide range of international, national, state and local audiences on issues related to sex offender management. He began his career at the Washington State Institute for Public Policy where he researched issues of importance to the state legislature, including sex offender registration, community notification, and civil commitment policies.

Next, Dr. Kevin Baldwin is a clinical psychologist with a dual emphasis on research and forensics. He has directed federally funded research projects, authored over a dozen articles and peer-reviewed journals, evaluated numerous specialty court programs, and has designed an evaluated substance abuse treatment programs. Dr. Baldwin is a senior researcher at Applied Research Services, a national consulting firm specializing in criminal justice research and policy analysis.

He also served as the director of Forensic Services at the Highland Institute, an Atlanta outpatient clinic, specializing in the assessment and treatment of person's with sexual behavior problems. He performs forensic examinations for state and federal courts, and probation parole authorities, serves as an expert witness in both juvenile and adult courts, and has worked in both inpatient and community-based mental health settings.

Dr. Baldwin is a frequent presenter at regional and national conferences. He has provided training and technical assistance to treatment and court staff in a variety

of settings. He earned his PhD at Georgia State University after completing an adult forensic internship at the University of North Carolina at Chapel Hill School of Medicine and the Federal Bureau of Prisons.

Our last presenter is Roger Przybylski, known as a consultant and founder for RKC Group, a private company that provides applied research and program evaluation services to organizations working on public safety issues. Prior to forming RKC Group in 1997, Mr. Przybylski served as associate director for the Illinois Criminal Justice Information Authority where he directed the agency's research division.

He's also served as the coordinator of research for the Chicago Police Department. He has been a project manager, contributing author, and editor to the SMART Office Sex Offender Management Literature Review Initiative, which this webinar series is based upon since the project's inception in 2010.

It's now my pleasure to turn the presentation over to Dr. deBaca.

Luis deBaca:

Thank you. Thanks, everybody, for being on today. We recognize that it's mid July and folks are taking vacation and everything else, so we especially appreciate spending your Monday afternoon with us. I would just briefly set the stage for what we're going to be talking about today in the context of the rest of the SOMAPI Project presentations that we've been going through over the last few months.

What we've really seen is, to me, in the SOMAPI Project is an attempt to really understand better the population of offenders and to be able to take from the broad conclusions down to the individual analysis that needs to be done. We recognize that there's no such thing as a class of sex offenders. There's a group of a bunch of individual humans who have made individual choices or have done things that affect other people. Every one of those people needs to be looked at and seen on their own particular circumstances and their own merits, at the same time, as we're thinking about what are the bigger systemic challenges and systemic responses.

I think that one of the things that you'll see today is that to me sums a lot of this up, is this notion of the interplay between risk assessment and issues of recidivism. There are a lot of assumptions that have been made over the last 20 years about recidivism and folks who commit sexual assault, whether it's lumping everybody into the stereotype of the pedophile, lumping everybody into the stereotype of the stranger rapist, or things like that. Pretty much, I think, valid concerns have been raised over the years as to exactly what the research basis is for those assumptions to policymakers and others make about the risk of reoffending, the risk to the community, et cetera.

That's why I'm so excited about the SOMAPI Project, is that we really are looking at sound structured approaches to analyzing these issues, and recognizing that sex offender management policies, if they are going to be effective, have to rely on risk

assessment. As many of you know, SORNA looks to the count of conviction as to whether somebody should be on the registry in the first place and there has been a debate across the state and in other jurisdictions as to whether the count of conviction or risk assessment, et cetera, as the entry point to the registration schemes should be where you're looking.

What we all agree on, I think, as far as risk assessment is that, risk assessment is a critical tool for looking at supervision decisions, for looking at what kind of therapeutic responses, what kind of supervision responses are necessary to protect not just the public, but also to be able to deal with the offender as we find them and get them what they need, as well as what the public needs.

As I said, the recidivism issues have been part of the urban myths surrounding this area for many years, but as with many myths, there are underlying realities. We're going to hear a little bit today about what some of those realities are as far as recidivism rates for adult sex offenders. The reality is that there are higher levels of recidivism for certain of the people in this population, and understanding who are those people, who are the ones who are greatest risk for that and not, I think, is our biggest challenge.

I'm going to sign off, I think, at this point simply by saying how impressed I've been with the SOMAPI product as it tees these things up, as it teases out the concepts of recidivism rates, the different groups and where they are, but also, as it shows us, who are the people that we need to be looking at five years from now, who are the people we need to be looking at 15 years from now, who are the people that we need to be looking at 25 and 30 years from now, as you don't necessarily have the same assumptions that will hold true for different classes of folks when you're looking at recidivism.

I'd like to turn it over to Scott. Again, thank you to the authors of SOMAPI and to everybody that's wrestling with this.

Scott Matson:

Thanks, Lue. This is Scott Matson from SMART Office. I just wanted to start by giving a bit of background about the SMART Office and the SOMAPI Project, which is the Sex Offender Management Assessment and Planning Initiative. For those of you who haven't been on our webinars in the past, this may be a new acronym for you. I want to thank those of you who have been listening in to some of the previous webinars and thanks for bearing with us to these intro slides.

I want to thank NCJA for their hard work on putting these webinars and for their work on the SOMAPI Project and for the help Chris Lobanov-Rostovsky and Roger Przybylski who have really served as our leads in this project, and to all the authors of the SOMAPI chapters including Kevin Baldwin, who's with us today.

Just to start out, thinking about where the SMART Office is coming at this from. We work with a lot of different folks in this field from law enforcement to judges and

corrections officials, and releasing authorities, supervision officers, treatment providers, academics, law enforcement. We know that they all have the same goal, which is to protect the public from sex offenders and preventing sexual violence. Over the years, a lot of different policies and programs have been created to help do this. Unfortunately, there isn't a lot that we know about these programs and what works, what doesn't works, what's promising, what's effective. What we do know is that programs are more likely to be effective when they're based on scientific evidence.

The SMART Office was established in 2006 by the passage of the Adam Walsh Act. We're the first federal office devoted solely to sex offender management related activities. Our primary responsibility is for assisting states, tribes and territories, and implementation of the Adam Walsh Act, specifically Title 1, the Sex Offender Registration Notification Act. We also see it as part of our mission to inform our constituencies about a broader scope of sex offender management activities that are needed to protect the public from these crimes.

That's where this project comes in, the SOMAPI Project, Sex Offender Management Assessment and Planning Initiative. We set out with the goal of identifying best practices, the gaps and needs of the field, and with the end goal of providing guidance and support to states and locals in implementing best practices.

The goal of SOMAPI is to identify research-supported programs for application across the U.S. and inform OJP and SMART about how we should direct our funding and our research grant-making opportunities. We did this by launching a multiphase initiative, which the first phase was to assess the state of research and practice in sex offender management. We did by contracting with NCJA, who brought on a host of subject matter experts to develop literature reviews for a variety of different subjects under the sex offender management arena and topic.

They put together quite a great group of literature reviews on these different topics. We brought together a group of national experts to come to D.C. and review the literature and let us know if we've missed anything, give us recommendations about what we should be focusing on in terms of future research and funding for specific programs that appear promising. All that information was incorporated into a final report.

The different literature review chapters are listed there in your screen now. We recognized the importance of distinguishing between adults and juveniles and therefore created two separate entire reports, basically, part one and part two; one specific for adults, one specific for juveniles. Those are the different areas on your screen.

As I mentioned, we put it altogether in a larger report and that report is available on the SMART website. You can access individual chapters and you can download and print the entire report from there. It includes our findings, policy implications,

future research needs. We're also working on a series of research briefs, five or sixpage documents for each one of those chapters. They will be standalone and can be shared with policymakers and others in your jurisdictions that may just want a brief synopsis of what's in different chapters.

We're also releasing this information through a variety of conferences both national and regional. As Bethany mentioned, this is the sixth in a nine-part webinar series releasing this information. We hope to be able to hold a national symposium in the fall of this year to release the information as well. You can keep your eye on our website at www.smart.gov to find out more about that potential symposium.

Just a bit of background about the literature review methods that the different authors used to try to create consistency across all of the chapters of the report. Source materials were identified using social science abstract databases, reaching out to relevant organizations and subject matter experts. We're looking really to focus on studies that were conducted within the last 15 years and really paying attention to those studies that employed the most rigorous scientific methods, and to those studies that incorporated systematic reviews and meta-analyses.

I'm going to end here. I'll come back for the Q&A session at the end. Right now, I want to turn it over to Kevin Baldwin, who will talk about risk assessment. Kevin?

Kevin Baldwin:

Great. Thanks very much, Scott. Thanks for both of you for the review and explaining how we got to this point. I'm going to talk about sex offender risk assessment today. That's a topic that's near and dear to my heart. Essentially, what I want to do is discuss just according to what Scott talked about, talk about the literature, talk about the findings, talk about conclusions, and in the end summarize what we know to be the case based on the research.

First off, there's been a great detail of advances that have been made in sex offender risk assessment and in the larger field of risk assessment for criminal and violent behavior. Essentially over the last 30 years, the information that's been gathered, the methods, the tools, the procedures really are quite important to clinicians, many of whom are engaged in risk assessment at various points in time, as well as to policymakers and the public alike.

What is risk assessment? Essentially, it involves the accurate assessment of the likelihood of future violent acts. What we're really trying to do is predict recidivism. Now, there's also different ways to define recidivism. We can talk about operational definition such as rearrest, reincarceration. Essentially, we're using a very broad understanding of recidivism. That means reverting to illegal behavior after someone has experienced legal consequences or an intervention for a prior criminal act.

Risk assessment and the practice of risk assessment spans the complete spectrum

of the adjudication process. It's used in all sorts of particular context, including dispositional purposes to help determine; for example, an appropriate sentence or custody level, the conditions of community supervision. It's used at the very other end of the adjudication spectrum in terms of determining who might be suitable for civil commitment and who might be in fact suitable suitable for release from a civil commitment facility.

Risk assessment is something that's done all across the spectrum of adjudication. It's also something that's done for treatment providers, if not on a daily basis, at least on a very frequent basis, as those who provide treatment and supervision and management of sex offenders try to bring their tools to bear to reduce continually the likelihood that sexual offenders are going to recidivate. It's really critical. Therefore, given the broad spectrum of use and the number of context in which sexual offender recidivism risk takes place that we really rely on the best possible research that we have.

Policies and practices that dictate what we do with sex offenders in the community, in correctional facilities, from registration to notification statutes, like the Adam Walsh Act, are state efforts to decide who should be treated, how they should be treated, how much treatment is necessary. Local policies such as residency restrictions, these things all rely on risk assessment and therefore, frankly, when we talk about the ways that we as a society manage sex offenders, we really oftentimes have to predicate those decisions on the results of risk assessment. Risk assessment really ought to be used in such a way that it promotes good decisionmaking, both at a supervisory level, at a treatment level, at a dispositional level. It's really critical that the results of risk assessment be used to help people make good decisions.

By good decisions, one of the things that I think is critical when we talk about good, good is a pretty loose term, really, what we're talking about is accuracy. We want to make sure that when we're assessing the risk of a particular sex offender that that assessment is as accurate possible. In order to do that though, we really need to understand two things. The first thing we need to understand critically is the degree to which an individual offender matches a known group of particular sex offenders.

Just a few minutes ago, it was conveyed by the director that different types of sex offenders often display and evidence different rates of reoffending. We need to be able to identify accurately which type of group the offender we're assessing fits into. The second thing we really need to do is have an understanding that the risk assessment that we're using incorporates factors that as best as possible reflect what we know accurately predicts risk. We need to know that the factors we're using in risk assessment are a good representation of those factors that in the literature have been demonstrated to be reliably related to risk or reoffense.

I'm going to talk now about some of the different types of sex offender risk

assessment that have been categorized by Karl Hanson. Many of you are likely familiar with Dr. Hanson and his work. He is actually pretty much widely regarded as the world's leading authority on sex offender risk assessment and likely on sex offender recidivism and the factors that contribute to that. Hanson has essentially grouped sex offender risk assessment into a few different types, and I'm going to go through those now.

The first of those is unguided or unstructured clinical judgment. Essentially, what this method entails is using personal experience to arrive at a risk estimate without relying on a specific list of risk factors or any sort of underlying theory in order to prioritize or weight any of the information used. This is clinical judgment. It's basically relying on your gut feel or your clinical impression based on your accumulated wisdom and experience as a clinician.

The second type of risk assessment that Hanson discusses is guided or structured clinical judgment. What that involves is using a finite list of factors that are thought to be related to risk that are, rather than being drawn from the professional literature, they're actually drawn from personal experience and/or a theory rather than what we have found through studies of recidivism.

The third is research-guided clinical judgment. That's where basically a finite list of factors is identified in the literature, but there's no real specified means of taking those factors and combining them in a consistent manner. It's essentially looking at the literature and saying, "These different factors are important," but there's no real means of consistently applying manner of combining those things into a meaningful consistent judgment.

The next approach is called the pure actuarial approach. What that means is that an existing instrument, an instrument that's been developed is used and that instrument is comprised of a finite weighted set of factors that have been identified in the literature as being associated with risk. The instrument is used to identify typically the presence or absence, kind of a yes or no thing, is this thing present or is it not, of each risk factor, and an estimate of risk or total score is arrived at through a standard prescribed means of combining those factors.

The final approach elucidated by Hanson is the adjusted actuarial approach. That's where you take a pure actuarial measure and then you have a finite list of considerations that are used to either raise or lower the assessed level of risk.

Another name that is likely familiar to many of you is that of James Bonta. He's a criminologist. He and Andrews, together, two Canadian criminologists, developed the RNR or the risk-needs-responsivity model of offender assessment and correction of behavior. They are very well-known and you've likely heard of an assessment that they developed called the LSI-R, the Level of Service Inventory-Revised. Bonta, in a manner, is similar to Karl Hanson. He's basically grouped risk assessment into three different categories or three different generations.

The first generation identified by Bonta is unstructured professional opinion. That corresponds to Hanson's unstructured clinical judgment. Of second generation are actuarial methods using static factors. Static factors are those things that don't typically change a great deal, things like age at first offense, number of priors. That corresponds to Hanson's actuarial approach. The third generation involves using both static and dynamic factors. Another name for dynamic factors are criminogenic needs. Other people use the term that is basically psychologically relevant or meaningful risk factors.

Dynamic means they can change. Those are things like lifestyle instability factors, if someone has a stable residence, if someone has a stable job history, if they are actively abusing substances, are they participating actively in and doing what they're supposed to be doing relative to treatment and supervision. Those are the three generations that Bonta has identified that correspond somewhat to Karl Hanson's identified sex offender risk assessments.

Including dynamic with static factors can be really useful in fact. Most of the methods that Karl Hanson has come up with, he and his colleagues, like the Static-99. By its name, you can tell it includes static factors. One of the things that's been really helpful in the last few years is that a number of researchers have identified specifically dynamic risk factors that you can use in addition to those factors to get a better sense not only of someone's risk. The static factors combined with dynamic factors, those dynamic factors tell us really frankly what our treatment targets can be.

Bonta's third generation risk assessment methods show a special promise because by looking at those factors, those criminogenic factors that are basically thought to drive the criminal behavior, if we can identify those things as treatments targets and then apply research-based, evidence-based treatment to address those things, we can ameliorate the risk and reduce risk reoffense.

How do we understand what these factors are? I think that it's important to go over that and Roger is going to talk a lot more about this I think in the next section. That is, those factors that are known to contribute to recidivism. Essentially, we do research. Folks like Karl Hanson and others have done large meta-analyses where they've gathered a great deal of information on characteristics of offenders and then what happened, the degree to which they recidivate, how long it took them to recidivate, and those that didn't recidivate.

What they were able to do with these very large studies, some of which comprised tens of thousands of subjects is that they looked to particular characteristics that recidivists displayed and then they compared those folks that had that characteristic to folks that didn't. Then they looked at the degree to which those particular factors together, as well as in situ and in isolation, were able to predict recidivism.

Hanson and his colleagues had published a series of meta-analyses that have identified pretty much the universe of static risk factors that we know to be reliably related to sex offender recidivism. What they found, as well as other researchers, is that to date there is no single risk factor by itself in isolation that's been found to be a robust predictor of recidivism. There's no smoking gun. There's no one thing we can say. That's in fact why the risk assessments that we use today have a number of different factors, because there's not one. There's many.

What are those? The strongest risk predictors for sex offender recidivism are related to sexual criminality. There's a list of them on the slide you see before you. Sexual interest in children, history of prior sexual offset, age of onset of sexual offending behavior, and committing a variety of sexual offenses. Those things we know are quite predictive. If someone possesses all those things, then certainly their risk is considered higher than someone who doesn't have those things.

Those are variables or factors specifically related to sexual criminality. In addition to those factors, however, there are other significant factors that are more related to lifestyle and stability and criminality. Those are risk factors more associated with general criminality.

When we take those two things together, factors related to sexual criminality and factors related to general criminality, those two groups of factors together oftentimes comprise the things that we include in sex offender risk assessment. One thing that we've not found in the research to be predictive of risk is the specific type of conviction. To date, no study has found that the crime of conviction is an accurate assessment or predictor of risk.

As I noted a few minutes ago, static risk factors, a number of them have been established in a number of studies, in particular the meta-analyses, the large meta-analyses that Karl Hanson and his colleagues have conducted over the years. More recently, a number of dynamic risk factors have been combined into instruments that have been developed that help us understand what those more changeable factors are that contribute to risk. Things such as someone who's actively abusing substances or who's not complying with probation requirements, someone who is not at all cooperating with treatment, continues to miss court hearings, those things, the lack of cooperation with the dictates that tell folks what they need to do when they're on community supervision.

We've got these static factors and dynamic factors. What we're finding is that instruments that incorporate both of those are becoming more and more prevalent, which is certainly a good thing, because we know that they both have their place, that the static factors and the dynamic factors both are important things to consider in coming up with the overall assessment of sex offender risk for recidivism.

One of the large studies that I talked about earlier, the meta-analyses that Hanson conducted is with Morton-Bourgon. What they did is they essentially concluded that empirically derived, in other words, it comes from the research, empirically derived actuarial approaches are more accurate than unstructured professional judgment in assessing risk. If you go back to a few slides where we talked about Hanson's elucidation of different types of sex offender risk assessment, Hanson and colleagues have found essentially that actuarial approaches that are derived from the research literature are more accurate than unstructured professional judgment in assessing risk.

This is a debate that's raged since at least 1954 when Paul Meehl published an article in the Journal Science, which essentially cast doubt on the ability of clinicians to make accurate risk assessments based on clinical judgment. We'll talk a bit more about that later. Essentially, what they found was that structured professional judgment methods fell in between the more accurate actuarial approaches and the rather inaccurate unstructured professional judgment in terms of the ability to assess risk.

We talked about dynamic risk factor and current efforts to incorporate dynamic risk factors into an overall risk assessment scheme. One of the things that we found is that it's important to do that, but using dynamic risk factors to adjust actuarial scores may not be the best way. In fact, the literature that has looked at adjustment of actuarial scales has found that, unfortunately, oftentimes when we adjust an actuarial scale, we actually decrease its predictive accuracy.

Another finding that has emerged is that there is no single best assessment instrument. We've not been able to say, "This one is the best in all circumstances with all people." It's just not possible. I don't know that that will ever be possible, but it's certainly not now. As a result, it's important to consider using more than one instrument when you're doing sex offender risk assessment.

Some of the support, some of the reasons for administering more than one measure, classical test theory. I apologize ahead of time if that brings back bad memories of classes you might have taken in graduate school. Classical test theory, one tenet of classical test theory states essentially that, the more items a measure has, the more reliable it's going to be. If any of you have ever taken the MMPI or the MSI, you know that there are many, many items on each of those measures. When we add items, all of the things being equal, we do increase the reliability and coverage, especially if those items cover more than one area.

Another factor that supports the use of more than one measure is that there are more than one factor involved in sex offense recidivism. Earlier we talked about the sexual criminality and the general criminality factors. Those are our two constructs that we think and many researchers agree, have a say in the degree to which someone is likely to reoffend. There are multiple dimensions or pathways, in fact. Quite a few folks have centered on those two, sexual criminality and general

criminality.

One of the big challenges that we face in risk assessment is communicating results. It's not enough frankly to come up with a risk assessment. It's critically important that that information is conveyed, is communicated in such a way as to make it most useful to the decision-makers that have to rely on that information. Frankly, it does no good if when we do a risk assessment, if we come up with some esoteric means of communicating the results. It's not going to help anybody. It's not going to help in management. It's not going to help in dispositional hearings.

Communication of results is critical. There are a number of different ways that we can communicate the results. Oftentimes, it's important to communicate the results in more than one way. Some folks like to hear categorical descriptors or nominal descriptors of risk, such as low, moderate and high. The problem is that people have different ideas as to what high means. Some people think that high might mean 75% or greater. Others might see high risk as being 30% or greater. Whereas, it's important a lot of times to include those nominal descriptors, there's a limitation and that people has varying interpretations of what those mean.

As a result, it's important also to provide a numerical indicator of risk. Those things often take the form of a probability or a percentile rank or a risk ratio. Frankly, I think a lot of the consumers of this information are not all that familiar with risk ratio, so I put this on here for inclusion, but that's not one that I would recommend you rely on unless you've got a sophisticated audience. People are more likely to understand probabilities and percentile ranks, although, clearly, folks don't understand those all that intuitively as well, which is why we want to combine them with nominal descriptors.

Some limitations. We've made a lot of progress in terms of the ability of professionals to accurately estimate the likelihood of sexual reoffense. That being said, we are unable to estimate either the timing or severity of such future criminal conduct. We don't know when and we can't say when. We also don't know how severe it's going to be. Frankly, we've also not got to the point where we're able to perfectly predict. We're much better, but we are by no means perfect.

There is, as I noted earlier, no single best risk assessment. Certain populations have no validated risk assessment, for instance, child pornography offenders. Despite work addressing child pornography offenders in particular, to date we have no validated risk assessment for child pornography offenders, nor do we have one that could be applied reliably to female offenders. Despite the tendency to use actuarial measures that in the measure itself eliminates clinical judgment, clinical judgment still has a very important part to play in sex offender risk assessment. That is that it's important to be applied in terms of deciding which instrument or instruments to use in any given assessment.

Couple level limitations. We need more research in terms of how we revise the

findings of risk assessment based on what we know about dynamic risk factors. One of the things that has been researched a lot recently, in particular, by Jill Levenson down in Florida, has been the impact of sex offender policy on offenders. As many of you know, Florida has some of the more stringent sex offender laws in our nation. Among those are some pretty wide-ranging limitations on where registered sex offenders can live and work. That's resulted in sex offender living under bridges or moving very frequently.

The destabilizing impact of those dynamic risk factors, we need to know more about how those things, in particular, as well as other destabilizing factors, how they impact risk. It's also going to be really important for us to continue to refine the manner in which we communicate the results of our risk assessment. We need to speak with those people we communicate with. I think it's really critical. If you work doing assessments for a court, to talk with your judge, to talk with the attorneys as to what's most helpful to them in terms of how you can best communicate the results of risk assessment.

Finally, it's critical that we use risk assessment information, specifically, dynamic risk factors to understand how we can mitigate and manage risk. The promise of Bonta's third generation risk assessment is that we can identify treatment targets and management targets, things like substance abuse, things like lack of education, lack of employment options. Those sorts of things that if we can mitigate and if we can address in a clinical or educational standpoint or management standpoint, we can reliably reduce risk for reoffense, because as was stated in the introduction, that's our goal. We want to know what the risk factors are so that we can identify them, address them, ameliorate them, and ultimately reduce the risk of sex offender.

Couple things that Karl Hanson has recommended specifically for future sex offender risk assessment. These are things that he thinks we ought to be working on. The first of those is to assess risk factors that can be meaningfully understood. In other words, things that make sense. They have some face of validity to them. They are not esoteric factors that nobody outside of our fellow assessors can understand.

Secondly, assess clinically useful causal factors. That gets to identifying those treatment targets that we can then address by applying evidence-based practices and reducing risk. The third, this has to do with communication, to provide precise estimates of recidivism risk. The more studies we do, the more research we do on this, the more refined our ability to provide those precise estimates is going to be. The more we know about offenders, the more we know about their proclivities towards reoffending, the better we'll be at that.

The next one, allow all relevant risk factors to be considered. That's certainly a goal to work towards. I don't know that we'll get to that point anytime soon, maybe not in my lifetime certainly, but that we're able to incorporate as many of the relevant

risk factors as possible into our methods.

Next, inform development of treatment and management tools. We just spoke about that a minute ago and that really the goal here is to reduce risk of reoffense. If we can apply evidence-based treatment and management tools to do that, then we're certainly playing a part in the larger goal of reducing risk of victimization. We also want to be able to allow for the assessment of changes in risk. Risk rises and falls based on dynamic factors. We for instance know that as people age, their risk, all of the things being equal, goes down. We need risk assessment measures that not only show people increase in risk, but also the document that the risk goes down.

We also need to look at protective factors. We in the field of assessment oftentimes in clinical psychology focus so much on what's wrong with folks and we don't oftentimes look at what's right with folks. There's been a movement in mental health over the number of the last 10 or 15 years in large part spurred by Martin Seligman on what's known as positive psychology, looking at those factors that protect folks against harm. Whether it's heart disease or reoffending, we've got to be able to better incorporate those protective factors into our risk assessments.

We also need to be able to engage to client and offender in the assessment process. We need to make this a process whereby we rely on the true expert, and that is the person knows more about themselves than we'll likely ever know. That's an important thing. Finally, use methods that are easy to implement across a broad range of settings, not make these things so difficult that it essentially requires a specialist to administer and interpret.

Couple conclusions and policy implications. There have been significant advances made in this area over the past two or three decades. We are now at a point where we have a number of reliable valid risk assessment approaches, which is a great thing. There are a number that we can choose from. There is significant research support for the use of purely actuarial approaches, as well as the use of structure professional judgment and the mechanical combination of items from structured risk schemes, like the SVR-20, adding the scores of that particular measure together to come up with a particular score.

No research on which risk assessment approaches are best for specific testing, circumstances and context. We need to address that. We need to know how best to apply these tools in specific context and under specific circumstances. We do know, however, that meta-analyses, that is combinations of studies, suggest that using purely actuarial approaches should be favored over other approaches and that the approach should be determined by these things, the context of the assessment setting, the characteristics of the individual being assessed, and the specific purpose to which the risk assessment is to be put.

Actuarial tools can be completed quickly and easily by trained personnel or even automated. That's a big strength of actuarial tools. It's critical, however, to provide ongoing training and monitoring of evaluators, and also ongoing consultation and training with those folks that are consumers of risk information.

One of the big challenges moving forward is to identify and continue to refine our understanding of static and dynamic risk factors, and the interplay between the two. We need to develop a mechanism to incorporate those into the risk assessment process and to take that information and feed it directly into tailored interventions. Earlier, I had mentioned a measure called LSI-R. That's the Level of Service Inventory-Revised. That's based on the risk-needs-responsivity model of Bonta and Andrews.

The latest version of that measure is the LSCMI, which is the Case Management Inventory. What that does is just that. It basically uses risk-needs-responsivity information to come up with a treatment plan that applies particularly identified interventions to address the needs found to exist when we're identifying a person and assessing a person.

Hanson and his colleague, Morton-Bourgon, have stated that given its genesis in data, in other words, given its empirical nature, the empirical actuarial approach will ultimately provide the best estimates of absolute risk. We know where they stand and that is that they believe that for now and into the future, empirical actuarial tools will ultimately be our best bet. They recommend that you use those unless there's clear and justifiable reason to do so or not to do so, such as, for instance, we're assessing female sexual offenders or child pornography offenders when no applicable risk assessment exists. In that case, we need to use clinical judgment. We need to use other means of arriving at an estimate of risk.

Some specific recommendations and these are time-bound. Remember, these things are always in development and this is not considered something that is cast in stone. At this time, for assessing the likelihood of sexual recidivism, remember those two general categories of sexual and general recidivism; Static-99R, Static-2002R, the MnSOST-R, the Risk Matrix-2000 Sex, and adding the items from the SVR-20. Those are the best supported measures for assessing the likelihood of sexual recidivism. For assessing the likelihood of violent including sexual recidivism, the best supported measures are the VRAG, the SORAG, the Risk Matrix-2000 Combined, the SIR, and the LSI-R and its variants.

By contrast to what we've just noted, what we found is that, relying solely on an offense-based risk assessment classification, as stipulated the Adam Walsh Act, in fact, what actually decrease the accuracy of sex offender risk assessment procedures are already in wide use today. That's something certainly to keep in mind, that the actuarial approaches are certainly preferred over using an offense-based risk classification system.

What you'll see on the next slide, and I am not going to read them, these are the notes. You'll have this available to you. There's a number of notes and references, and I'm going to turn this over to Roger when I get to his opening slide.

R. Przybylski: Thank you, Kevin. Can you hear me okay?

Bethany Broida: Yeah, we can hear you just fine, Roger.

R. Przybylski: Thank you. Good afternoon everyone that's in the audience. I'm going to talk with

you today about the evidence concerning the recidivism of adult sex offenders. What I wanted to do is start out by talking a bit about some of the key considerations that need to be taken into account when you're examining recidivism research and interpreting recidivism research findings. Some of these issues are relevant for recidivism research, in general, but there also are issues that

are specific to research for sex offenders that we need to be familiar with.

Unfortunately, recidivism continues to be a difficult concept to measure, especially in the context of sex offenders. The surreptitious nature of sex crimes, the fact that few sexual offenses are reported to authorities, in variation in the way researchers calculate recidivism rates, they all contribute to the problem. These issues no doubt have contributed to a lack of consensus, if you will, regarding the proper interpretation of some research findings and the validity of certain conclusions.

While there's broad agreement that observed recidivism rates are not true reoffense rates, the magnitude of the gap between observed and actual reoffending, the propensity of sex offenders to reoffend over the life course, and whether it's valid to characterize sex offender recidivism rates as low or as high, these are all examples of key issues that are subject to very divergent viewpoints.

Now, despite the controversies, I think research findings on sex offender recidivism can indeed help policymakers and practitioners in several important ways. They can provide an empirical basis for better understanding the differential public safety risks that are posed by different types of offenders. They can help identify the risk factors that are related to recidivism and they can help policymakers and practitioners design and deliver a more tailored and effective recidivism reduction strategies.

Numerous scholars have described the key issues that need to be considered when we're interpreting sex offender recidivism research. Perhaps, chief among these is the recognition that recidivism rates are not true reoffense rates. Recidivism rates are typically based on officially recorded information such as an arrest, a criminal conviction or incarceration. Because these official statistics reflect only offenses that come to the attention of authorities, they indeed are a diluted measure of reoffending.

Now, due to the frequency with which sex crimes are not reported to the police

and the disparity between a number of sex offenses reported and those that are solved by arrest, and I think the research also points out that there's a disproportionate attrition of certain sex offenses and sex offenders within the criminal justice system, because of these things, researchers do widely agree that observed recidivism rates are underestimates of the true reoffense rates of sex offenders.

Now, even though the basic meaning of recidivism is rather clear cut, recidivism rates are often measured very differently from one study to the next, and different ways of measuring recidivism can produce substantially different results. Therefore, comparing rates that were derived in different ways can really lead to inaccurate conclusions. This is really a very important point. Some of the most common ways in which measurement variation occurs in recidivism research relates to operational definitions, something Kevin mentioned, different follow-up periods, and also differences in the nature of the population that's being studied.

Now, an operational definition states in very concrete terms precisely how something is going to be measured. When researchers operationally define recidivism for a study, they need to specify whether the recidivism event is constituted by an arrest, a conviction, a return to prison or something else. There are various reasons why one definition might be employed in lieu of others. It's critically important to recognize that different operational definitions of recidivism will indeed produce different research findings.

The length of time an offender is tracked to determine if recidivism occurred also varies from one study to the next. Recidivism rates will naturally increase as offenders are followed for longer time periods, because there's more time when they're at risk to reoffend and more time for recidivism to be detected. You have to be cognizant to the length of the follow-up period whenever you're interpreting recidivism research results.

Variation in the types of offender studies is common as well. For example, some studies focus on offenders released from prison, while other studies might focus on offenders, let's say, that are discharged from probation. Because offenders released from prison typically have a more serious criminal history than probationers and criminal history in turn is related to recidivism, recidivism rates are likely to be higher for prison releasees than they are for probationers.

In addition, if you'd think about context like parolees, they may be subject to more behavioral constraints than probationers. As a result, they have higher recidivism rates due to technical violations of conditions of release. My point is that you have to be very cognizant of the population being studied and be very cautious when comparing the recidivism rates across studies that have markedly different populations.

With all that in mind, I'm going to jump into now the research findings. As I move

into this materials, I'll be citing data on different types of recidivism, for example, sexual recidivism versus general recidivism. I think knowledge about both types, general and sexual, is important because many sex offenders do indeed in both sexual and non-sexual criminal behavior. A research has shown that sex offenders, in fact, are more likely to recidivate with a non-sexual offense than with a sexual offense.

Information about the recidivism rates of different types of sex offenders also is really important. Although sex offenders are often viewed as a single group as Director deBaca had mentioned, they indeed are, in reality, a diverse mixture of individuals who have committed an array of illegal acts ranging from non-contact offenses such as exhibitionism to violent sexual assaults. Just aggregating sex offenders in recidivism research really helps to unmask important differences in both the propensity to reoffend and the factors that are associated to reoffending.

The first slide that I have up here in terms of the research findings is beginning to tell us a little bit about the findings from what is perhaps the largest single study of sex offender recidivism that's been conducted to date. The study was published by the Department of Justice, Bureau of Justice Statistics in 2003 and then examined the recidivism patterns of 9,691 male sex offenders released from prison, 15 states back in 1994. These offenders accounted for about two-thirds of all male sex offenders released from state prisons in the United States in that year.

Using a three-year follow-up, post-release follow-up period, rearrest and reconviction rates for sexual and other crimes were reported for the entire sample of sex offenders, as well as for different categories of sex offenders. The researchers found a sexual recidivism rate of 5.3% for the entire sample of sex offenders, again, based on an arrest during the three-year follow-up period. The violent and overall arrest recidivism rates for the entire sample of sex offenders were much higher. 17.1% of the sex offenders were rearrested for a violent crime and 43% were rearrested for a crime of any kind during the three-year follow-up period.

Now, as part of the study, the researchers also conducted a comparative analysis of recidivism among sex offenders and non-sex offenders. I wanted to mention this because I think this actually is important information in terms of what I mentioned earlier about the fact that sex offenders tend to basically have a rearrest rate for many different types of crimes. When you start to look at these comparative numbers, I find them to be extremely interesting and relevant for policy and practice here.

Again, the findings were based on a three-year post-release period, follow-up period, and it involved, again, the 9,691 sex offenders and actually more than 260,000 non-sex offenders released from prison. The analysis revealed that once released, the sex offenders had a lower overall rearrest rate than non-sex offenders, 43% compared to 68%, but their sex crime rearrest rate was four times

higher than the rate for non-sex offenders, 5.3% compared to 1.3%. Very similar [findings 01:04:19] are consistently found in other studies.

Another important study because of its very large sample size, but it's conducted by Sample and Gray in the state of Illinois. The research has examined the arrest recidivism of more than 146,000 offenders who were originally arrested in Illinois in 1990. The arrestees were categorized as sex offenders based on their most serious charge being a sex offense. The study looked at one-year, three-year, five-year rearrest rates for a new sexual offense.

As the numbers on the slide show you that the recidivism rates were 2.2% after one year, 4.8% after three years of follow-up, and 6.5% after five years of follow-up. The sex offenders in the study had one-year, three-year, and five-year rearrest rates for any crime of 21.3%, 37.4%, and 45.1%, respectively. You see how much higher those numbers are when we start to look at the differences between general recidivism and sexual recidivism.

Now, another important study that I wanted to mention briefly here was conducted by Harris and Hanson. This was a meta-analysis that was published back in 2004. The research employed a combined sample of more than 4,700 sex offenders drawn from 10 prior studies and Harris and Hanson generated recidivism estimates based on new charges or conviction for sexual offenses using five, 10, and 15-year follow-up periods for several categories of sex offenders.

The five-year sexual recidivism estimate for all sex offenders in the analysis was 14%. The 10-year and 15-year sexual recidivism rate estimates for all sex offenders were 20% and 24%, respectively. Now, using the same data set, Hanson, Morton, and Harris actually reported that the 20-year sexual recidivism rate for the sample was 27%.

One of the most important findings, I think, that emerged from this analysis was that the 15-year sexual recidivism rate for offenders who already had a prior conviction for sexual offense that that sexual recidivism rate was nearly twice the rate that was found for first-time sex offenders, 37% compared to 19%. Another important finding was that the rate of reoffending decreased. The longer offenders have been offense-free.

Now, researchers studying the recidivism of sex offenders are increasingly reporting recidivism rates specifically for rapists. In the BJS study of male sex offenders released from state prisons back in 1994, again, this is arguably one of the largest individual recidivism studies of rape that's undertaken to date. The study included a sample of 3,115 rapists and the researchers found that 5% of the 3,115 rapists released from state prison that year were arrested for a new sex offense during a three-year follow-up period.

Again, of these 3,115, 2.5% were charged specifically with another rape. For violent

crime in overall recidivism rate found for rapists were 18% and 46%, respectively. Like sex offenders, overall, rapists had a lower overall recidivism rate than non-sex offenders in the study, but a higher sexual recidivism rate. Again, one of the most important findings here that emerged from this was that about half of the rapists, again, with more than one prior arrest, were rearrested within three years of release. This was a rate that's nearly double that of rapists with just one prior arrest.

Now, Harris and Hanson also examined the recidivism specifically of rapists using a relatively large sample size. In their analysis, they had a sample basically of over 1,000 rapists. I think the number was on the slide there. It's 1,038 altogether. The recidivism estimates were reported for three distinct follow-up periods, five years, 10 years and 15 years. You can see on the slide what the figures are. The sexual recidivism rates for rapists based, again, on new charges or convictions were 14% at five years, 21% at 10 years, and 24% at 15 years.

Now, another important study, because of its lengthy follow-up period, in fact, the follow-up period was 25 years, this was conducted by Robert Prentky and his colleagues. Generalizing some of these studies findings to offenders that are engaged in rape behavior today is problematic because the study period began back in 1959 and then ended in 1985. Moreover, sex offender treatment practices that you find today, of course, are far different than they were back in those time periods.

In addition, the study sample consisted of individuals who were deemed to be sexually dangerous, and in fact they were civilly committed. The sample is not at all representative of all rapists or sex offenders today. The 25-year follow-up period employed in the research is arguably one of the longest ever used to examine the recidivism of rapists. Certain findings from the study I think do have significance for the measurement and interpretation of recidivism rates today.

The study conducted by Prentky examined both short-term and long-term sexual and general recidivism within a population of only 136 rapists. The research has found sexual recidivism rates based on a new charge of 9% after one year of follow-up, 19% after five years of follow-up, 31% after 15 years of follow-up, and then based on the 25-year follow-up period, they found the sexual recidivism rate of 39%. The overall recidivism rate for any charge by the end of the 25-year follow-up period was 75%.

Now, Prentky and his colleagues acknowledged that generalizing the rates found in the study to other samples of sex offenders indeed is problematic, but they also suggested that the crucial point to be gleaned from the study is the potential variability over the rates and not the specific numbers themselves. I think it's worth noting that despite the study's inherent limitations, some rapists remained at risk to reoffend long, long after the discharge and that conventional follow-up periods of three years or five years indeed would miss roughly half of the first-time

recidivist identified after 25 years of follow-up in this Prentky study.

Now, a relatively large body of research exists on the recidivism rates of child molesters. While unreported crime affects all recidivism research, it's particularly problematic in studies of child molesting offenders, because several studies have demonstrated the likelihood that a sexual assault reported to law enforcement actually decreases with the victim's age.

Now, the BJS study that looked at sex offenders released from state prisons back in '94 included a very large sample of child molesters. The researchers reported 5.1% recidivism rate for a new sex crime, again, based on a three-year follow-up period, 14.1% violent crime recidivism rate, and a 39.4% recidivism rate for any type of crime. Child molesters with more than one prior arrest, again, had an overall recidivism rate nearly double that of child molesters with only one prior arrest.

As might be expected, child molesters were more likely than any other type of offenders, sexual or non-sexual to be arrested for a sex crime against a child following release from prison. Moreover, released child molesters with more than one prior arrest for child molesting were three times more likely to be arrested for child molesting than released child molesters with no more than one prior arrest.

Two other studies that I had mentioned earlier also make important contributions to our knowledge base about the recidivism patterns of child molesters. Findings from Harris and Hanson's analysis in 2004, I think, are particularly compelling, because they document differential rates of recidivism for different types of child molesters based on varying follow-up periods. Again, this analysis looked at five, 10 and 15-year follow-up periods. I wanted to use the table that's on the screen here to illustrate the variation that you tend to find across these different categories.

What's really important here to glean from this table is that what Hanson and Harris' study found, is that molesters of boys had the highest rates of sexual recidivism. Different patterns of reoffending within the child molester populations have indeed been found in other studies as well with that consistent finding, that molesters of boys have higher recidivism rates than other types of child molesters.

Now, Prentky and his colleagues also examined the recidivism rates of child molesters. I've talked a little bit about the Prentky study earlier and the fact that it used this very long follow-up period of 25 years. The one point I wanted to make here is that, there's a significant difference in what was found by Prentky and his colleagues and what was found in the Harris and Hanson analysis. In fact, the differences, in a sense, are rather striking, even though this would tell you that there's a difference here in terms of the final period in one study being 15 years and the other being 25.

Prentky's analysis using that 25-year follow-up period found a recidivism rate of 52% and that really is strikingly different in what was found by Harris and Hanson

using the 15 years. They found a 23% rate. I think this is a really interesting finding because of the controversy that it has stirred.

The difference that you see here really can be interpreted in two different ways. The one interpretation, indeed, is that the first-time recidivism for child molesters may occur 20 or more years after a criminal justice intervention and that recidivism estimates that are derived from shorter follow-up periods are really likely to underestimate the lifetime risk of child molester reoffending. An alternative interpretation is that the difference is primarily an artifact of sampling. The difference is basically between the two populations and that the lifetime prevalence of sexual recidivism for child molesters overall is far, far lower than the 52% suggested by the Prentky research.

Now, I want to think probably for the sake of time make some very quick comments about the remaining slides and give folks a chance, I think, to be able to maybe get one or two questions in and handle the survey. There is a very limited body of research that exists today on the recidivism rates of exhibitionists. I use this table here just to try and illustrate one of the key things that we do know, and that it is very difficult to be able to interpret the findings about the recidivism rates of exhibitionists, because the studies that have been done have tended to have very great variation in terms of follow-up periods, the operational definitions that have been employed, and also actually about the populations that have been used here.

I think that our information in this area is a little tenuous, but we do have pretty solid information about the recidivism rates of female sex offenders and how they compare to male sex offenders. Now, indeed, the proportion of sexual offenses that are perpetrated by females is very, very low. The research that's been done on recidivism for female sex offenders suggests that the recidivism rates are likely to be in the area, when we're talking about a follow-up period, perhaps five years, likely to be in the area of only 1%. Recidivism for any crime for female sex offenders of course is much higher. It's in the area of 20%, but again, that is significantly, significantly lower than what we find for male sexual offenders.

For the sake of time, what I do want to do here is maybe say a couple of words that are in closing about what all of this sort of means. I think the one thing that is really important to come away with here, again, is this really very solid understanding of the fact that official records do underestimate recidivism and that the observed rates that we do see here, however, ranged from about 5% after three years, again we're talking about sexual recidivism, to about 24% after 15 years.

Sex offenders regardless of type have higher rates of general recidivism than sexual recidivism. This really does suggest from a policy and practice standpoint that we do need to be concerned with interventions and with assessing risk in a way that's going to be able to look at all types of recidivism in addition to sexual recidivism alone. The other thing that I do want to mention in closing here is that finding relates to the low recidivism rates for female sex offenders.

The fact of the matter is, I think Kevin pointed this out, that we don't have a validated risk assessment instrument to be able to assess female sex offenders. I think most of the policies and programming that we do have out there for female sex offenders indeed has followed the model that we've put in place for males. As Cortoni and his colleagues have pointed, the folks that have done a significant amount of research on female sex offenders, is that we're probably going to be much more better off if we employ interventions and approaches with female sex offenders that we have developed for female offenders, in general. We're going to be much better off going in that direction than we are in applying the types of things that we've done with male sex offenders.

The other really important point that I want to make, and this was what Director deBaca was mentioning very early on during the webinar, is that there is absolutely no question that sexual offenders are not a homogeneous group. We see significant variation in the propensity to reoffend both short term and long term among different types of sex offenders. Our policies and our practices indeed do have to take that into account and treat sex offenders based on the information that we know for their particular types of risk and characteristics that they have, and that a one-size-fits-all approach is not going to be effective nor provide a very significant return on taxpayer investment.

I know that we've gone long here and I just really wanted to try and tie that up as we were coming close to the end here. I'll step away and turn this back over to Scott. Maybe there's time for question, but I do know that you want to do the survey to get some feedback on the webinar as well. Scott, I'll hand it back over to you.

Scott Matson:

Thanks, Roger, and thank you, Kevin. You guys did a great job. That was a lot to cover in a very short period of time. Why don't we go ahead and open up the survey now? So, you can all have a chance to fill that out. We really appreciate the feedback that you all give us, so we can help inform our future webinars. There is a way to submit questions. It's up there on the screen. There's a Q&A chat function that Bethany put the slide up there and had posed a question.

We did receive a few questions during the registration and a couple during the actual webinar. I want to ask Kevin a specific question related to risk assessment. One came in that I thought was relevant. The participant asked, "When assessing sex offender risk, what is the best way to combine the use of a more general criminal risk assessment tool with sex-offense specific tools that are static and dynamic?" You there, Kevin?

Kevin Baldwin: The survey is on and I no longer have control over my mute.

Scott Matson: You're on now. We can hear you.

Kevin Baldwin: Great. The question is about combining general assessments of sex offender risk

and sex offender specific ones. There's no real way to combine the scores of the two. What I think would be recommended would be that you, and specifically in cases where is a broad pattern of offending, use both to inform the offender's risk for general offending, as Roger noted, exceeds the risk for sex offending.

Administer them both and then use the results of both to come up with a means of understanding what needs to be targeted in terms of the criminogenic needs that

would be amenable to evidence-based treatment strategies.

Scott Matson: Thanks. Following up on that one, there's another question that came in about a

specific tool. It's like a Hanson stable and acute assessments in combination with Static-99. Do you know of any jurisdictions that are using those? You talked a little

bit about the advantages of them. Maybe you could recap a little bit.

Kevin Baldwin: Sure. I know California and Georgia, they're used quite extensively by community

corrections officials. They're also used extensively in Scotland and Wales. The idea being that, of course, it's great to be able to use the dynamic factors so that you can really tailor your management of these offenders in the community to address

issues that would be amenable to change and, therefore, reduced recidivism.

Other than that, there's I think a lot of community corrections folks on the line. I'm not sure if there's a way that we can share information afterwards, but I imagine a

number of folks do have experience using those in the field as part of their

supervision as sex offenders in the community.

Scott Matson: I suppose people could submit that information in that chat function.

Kevin Baldwin: Yeah. That'd be great.

Scott Matson: Also, I thought I mentioned the SOTIPS tool that the Vermont folks developed.

Kevin Baldwin: Yes.

Scott Matson: It's similar. Do you know much about that, Kevin? Can you talk about that at all?

Kevin Baldwin: Just a bit. Not enough to really speak intelligently about it. Yeah, it's got good

preliminary research finding that supports it.

Scott Matson: SOTIPS was developed as a treatment intervention progress scale up in Vermont to

measure how sex offenders were progressing through treatment, and to couple with a more static tool to predict a shorter-term recidivism rate. We're actually supporting the validation of that tool in New York City and in Maricopa County, Arizona. We should hopefully have some results in the next couple of years. I know

that's another tool very similar to the static and stable combination.

Speaking of static, do you know the best way to get training for the Static-99?

Kevin Baldwin: Yeah. The best way to do that is to go to the website, which is www.static99.org.

That's S-T-A-T-I-C99.org. You can click on the Training tab. When you click on the Training tab, you'll see there's a list of certified trainers as well as other training resources such as questionnaires, person to contact with questions. That's probably your best way to get training on that and other associated measures that have

been developed by Karl Hanson and his colleagues.

Scott Matson: Great. Thanks.

Kevin Baldwin: Sure.

Scott Matson: Bethany, maybe this is a question for you. In the chat function, we do have a

number of people who have put up good information about the tools that they're using. Is there any way to share that with the audience, perhaps with the future

recording or with the slide?

Bethany Broida: I think the easiest thing for us to do is compile it afterwards. When we send the

slides and the recording back to the attendees, we'll include that information in the

email.

Scott Matson: Great. That sounds like it'd be really helpful for folks. I think it's great for me to see

this information too. I think we should probably stop there, recognizing that we're

one minute to go. I want to thank Kevin and Roger and for all of you who participated. We hope you'll join us for our next webinar in the series on adult typologies. It's going to be on August 24th. Registration is currently open for that

webinar. Bethany has put the registration link up on your screen there,

NCJA.org/webinars.

We hope you can register for that one and attend. Again, thank you all, and thanks

to our presenters. Have a great afternoon.

Kevin Baldwin: Thanks. You too.