

# A treatment program for sexually violent forensic psychiatric inpatients

Thijs Kanters (Ph.D. student) & Ruud H.J. Hornsveld  
(Ph.D.)

[Thijs.Kanters@Kijvelanden.nl](mailto:Thijs.Kanters@Kijvelanden.nl)

[www.Agressiehanteringstherapie.nl](http://www.Agressiehanteringstherapie.nl)



# Determinants of sexual aggressive behavior



# Measurement instruments

**Scores available for all patients:**

- **Psychopathy Checklist-Revised (PCL-R):  
Psychopathy**
- **Sexual Violence Risk-20 (SVR-20): Risk of sexual  
violence**



# **Sexual Violence Risk-20 (SVR-20; Boer, Wilson, Gauthier, & Hart, 1997)**

**20 items, rated as follows:**

**0 = does not apply**

**1 = probably or partially applies**

**2 = applies**

**Item 3 = PCL-R score: 30 or higher = 2, between 29 and 20 = 1, and 19 or lower = 0**

**Three domains:**

**a) Psychosocial adjustment (11 items)**

**b) Sexual offenses (7 items)**

**c) Future plans (2 items)**



## **a) Psychosocial adjustment**

- 1. Sexual deviation**
- 2. Victim of child abuse**
- 3. Psychopathy**
- 4. Cognitive impairment**
- 5. Substance use problems**
- 6. Suicidal / homicidal ideation**
- 7. Relationships problems**
- 8. Employment problems**
- 9. Past nonsexual violent offenses**
- 10. Past nonviolent offenses**
- 11. Past supervision failure**



## **b) Sexual offenses**

- 12. High density of offenses**
- 13. Multiple offense types**
- 14. Physical harm to victim(s)**
- 15. Uses weapons or threats of death**
- 16. Escalation in frequency / severity**
- 17. Extreme minimization / denial of offenses**
- 18. Attitudes that support / condone offenses**

## **c) Future plans**

- 19. Lacks realistic plans**
- 20. Negative attitude toward intervention**



## **Factor model**

**An exploratory factor analysis of the SVR-20 ( $N = 91$ ) yielded five factors:**

- 1. Non-sexual history (6 items)**
  - 2. Sexual offenses (4 items)**
  - 3. Use of violence (3 items)**
  - 4. Limited compliance (3 items)**
  - 5. Psychopathology (3 items)**
- Attitudes that support/condone offenses (1 item)**



## Cronbach's $\alpha$ , mean inter-item correlations, and mean item-scale correlations ( $N = 91$ )

<i>SVR-20</i>	<i>Items</i>	<i><math>\alpha</math></i>	<i>Inter-item</i>	<i>Item-scale</i>
Total	20	.51	.05	.16
Non-sexual history	6	.73	.31	.47
Sexual offenses	4	.65	.32	.43
Use of violence	3	.73	.47	.56
Limited compliance	3	.58	.31	.39
Psychopathology	3	.31	.13	.18
Attitudes towards offenses	1	---	---	---





## Correlations among subscales ( $N = 91$ )

<b>SVR-20</b>	<b>Items</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
<b>1 Total</b>	<b>20</b>	---					
<b>2 Non-sexual history</b>	<b>6</b>	<b>.71**</b>	---				
<b>3 Sexual offenses</b>	<b>4</b>	<b>.21*</b>	<b>-.25*</b>	---			
<b>4 Use of violence</b>	<b>3</b>	<b>.56**</b>	<b>.37**</b>	<b>-.18</b>	---		
<b>5 Limited compliance</b>	<b>3</b>	<b>.47**</b>	<b>.11</b>	<b>.02</b>	<b>.08</b>	---	
<b>6 Psychopathology</b>	<b>3</b>	<b>.33**</b>	<b>.18</b>	<b>-.13</b>	<b>.02</b>	<b>-.03</b>	---
<b>7 Attitudes towards offenses</b>	<b>1</b>	<b>.02</b>	<b>-.29**</b>	<b>.13</b>	<b>-.12</b>	<b>.20</b>	<b>-.09</b>

\*  $p < .05$ ; \*\*  $p < .01$



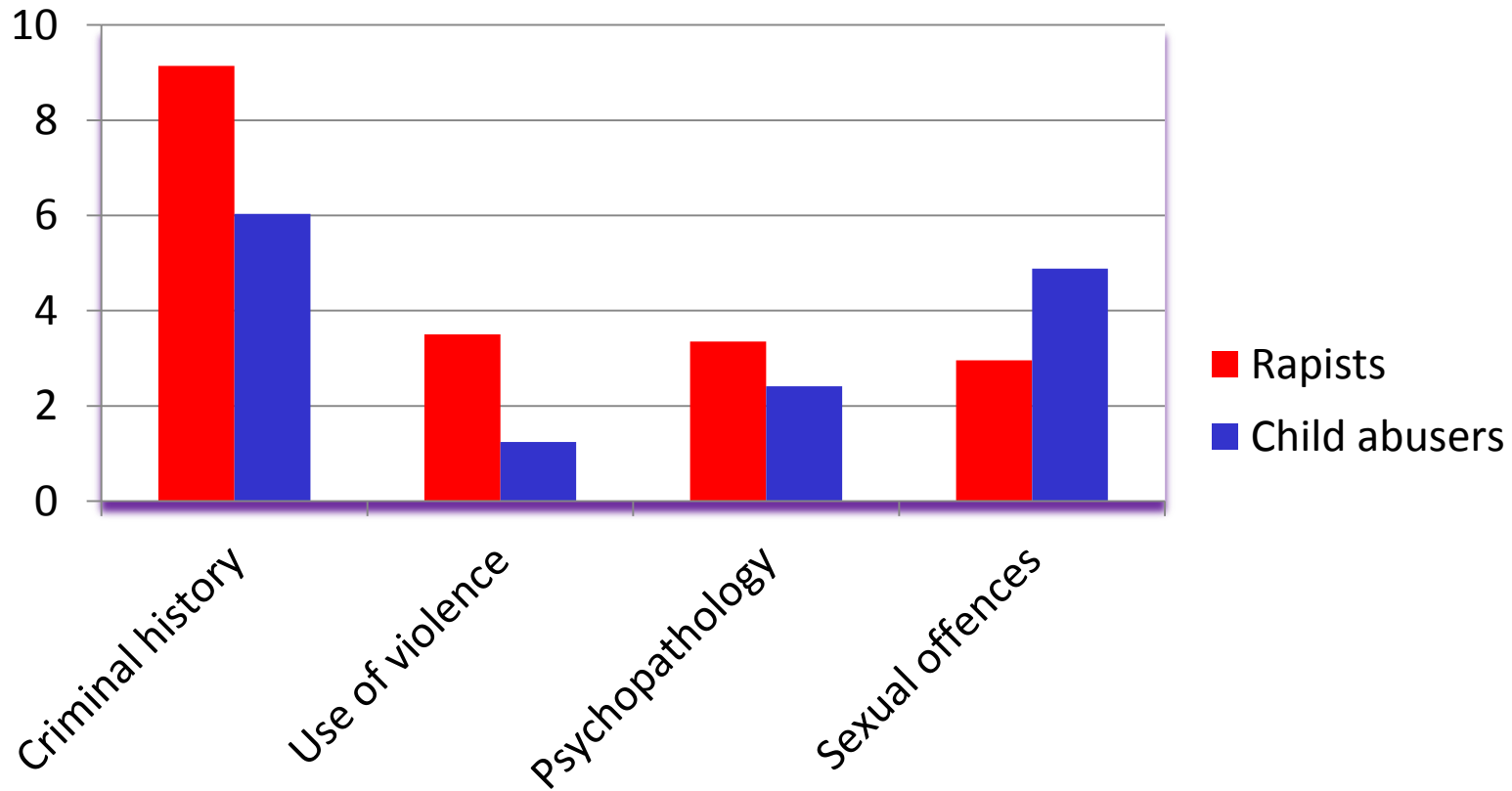
# Sexual Violence Risk for rapists ( $N = 51$ ) and child abusers ( $N = 40$ )

<i>Factor</i>	<i>Rapists</i>	<i>Child abusers</i>	<i>Statistics</i>
Total	23.18 (4.99)	19.20 (6.01)	$t(89) = -3.45^{**}$
Non-sexual history	9.14 (2.77)	6.03 (3.79)	$t(89) = -4.35^{**}$
Sexual offenses	2.96 (2.60)	4.88 (1.99)	$t(89) = 3.96^{**}$
Use of violence	3.50 (1.90)	1.24 (1.70)	$t(89) = -5.79^{**}$
Limited compliance	3.80 (1.78)	4.03 (1.86)	$t(89) = 0.58$
Psychopathology	3.35 (1.61)	2.41 (1.45)	$t(89) = -2.88^{**}$
Attitudes towards off.	0.43 (0.73)	0.73 (0.93)	$t(89) = 1.64$

\*  $p < .05$ , \*\*  $p < .01$



# Sexual Violence Risk (SVR-20)



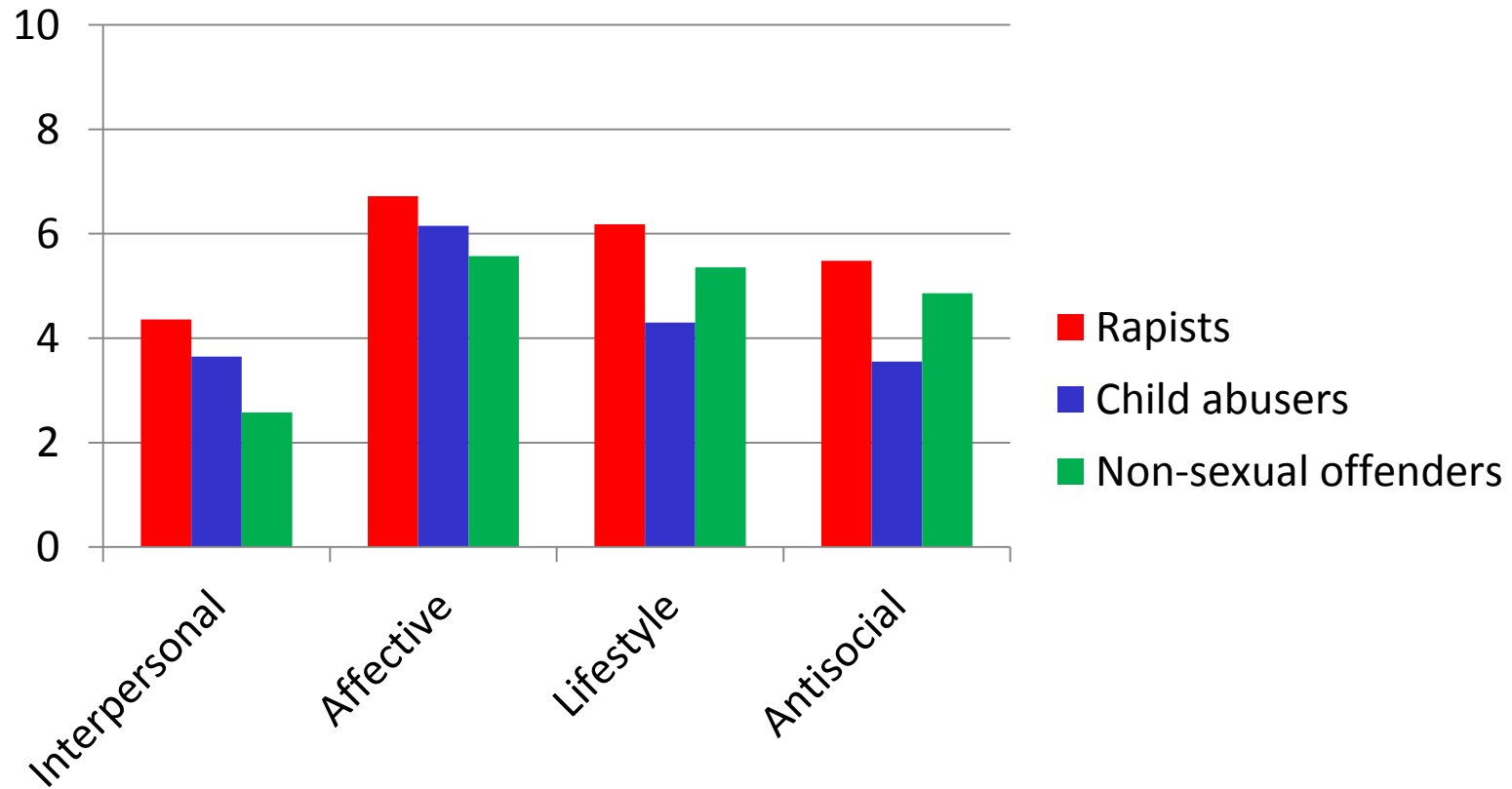
## Psychopathy (PCL-R) scores for non-sexual offenders ( $N = 261$ ), rapists ( $N = 51$ ) and child abusers ( $N = 40$ )

<i>Scales</i>	<i>Non-sexual offenders</i>	<i>Rapists</i>	<i>Child abusers</i>	<i>Statistics</i>
Psychopathy	19.31 (7.63) <sup>a</sup>	25.12 (6.69) <sup>b</sup>	19.58 (7.86) <sup>a</sup>	$F(2,349) = 12.65^{**}$
Interpersonal	2.58 (2.22) <sup>a</sup>	4.36 (2.43) <sup>b</sup>	3.65 (2.30) <sup>b</sup>	$F(2,349) = 15.15^{**}$
Affective	5.57 (1.79) <sup>a</sup>	6.72 (1.36) <sup>b</sup>	6.15 (1.83) <sup>ab</sup>	$F(2,349) = 9.99^{**}$
Lifestyle	5.36 (2.71) <sup>a</sup>	6.18 (2.60) <sup>b</sup>	4.30 (2.81) <sup>ab</sup>	$F(2,349) = 5.38^{**}$
Antisocial	4.86 (2.80) <sup>a</sup>	5.48 (2.49) <sup>a</sup>	3.55 (2.77) <sup>b</sup>	$F(2,349) = 5.72^{**}$

**Note:** Means not sharing similar subscripts differ at  $p < .05$



# Psychopathy (PCL-R)



## **New measurement instruments**

- **Kijvelanden Questionnaire about Sexuality (KVS)**
- **Implicit Association Test (IAT)**
- **Rigiscan<sup>®</sup>Plus**



# Kijvelanden Questionnaire about Sexuality (KVS)

- Contains 31 items
- Distinguishes between the cognitive distortions of pedophiles and rapists

18. Sex with children is only harmful when the child is forced by violence.

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Totally disagree	Disagree	Neutral	Agree	Totally agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

I have chosen this answer because:

*.....Sex between children and adults can produce a positive sexual experience when all the vulnerabilities of the child are taken into account. Sex forced by violence is always wrong .....*



# **Kijvelanden Questionnaire about Sexuality (KVS)**

## **Clinical practice:**

- **Rapists refuse to fill in the items that are related to children**
- **The given explanation has no relation to cognitive distortions (e.g.: “no comment,” “that's logical!”)**
- **The given explanation doesn't match the cognitive distortions observed during therapy (social desirability)**





# **Implicit Association Test (IAT)**

**Measures the cognitive distortions of child abusers and rapists**

**Hypotheses:**

- **Child abusers associate children with sex**
- **Rapists associate sex with power/status**

**Task: classify the items as soon as possible into the appropriate category**



# Implicit Association Test (IAT)

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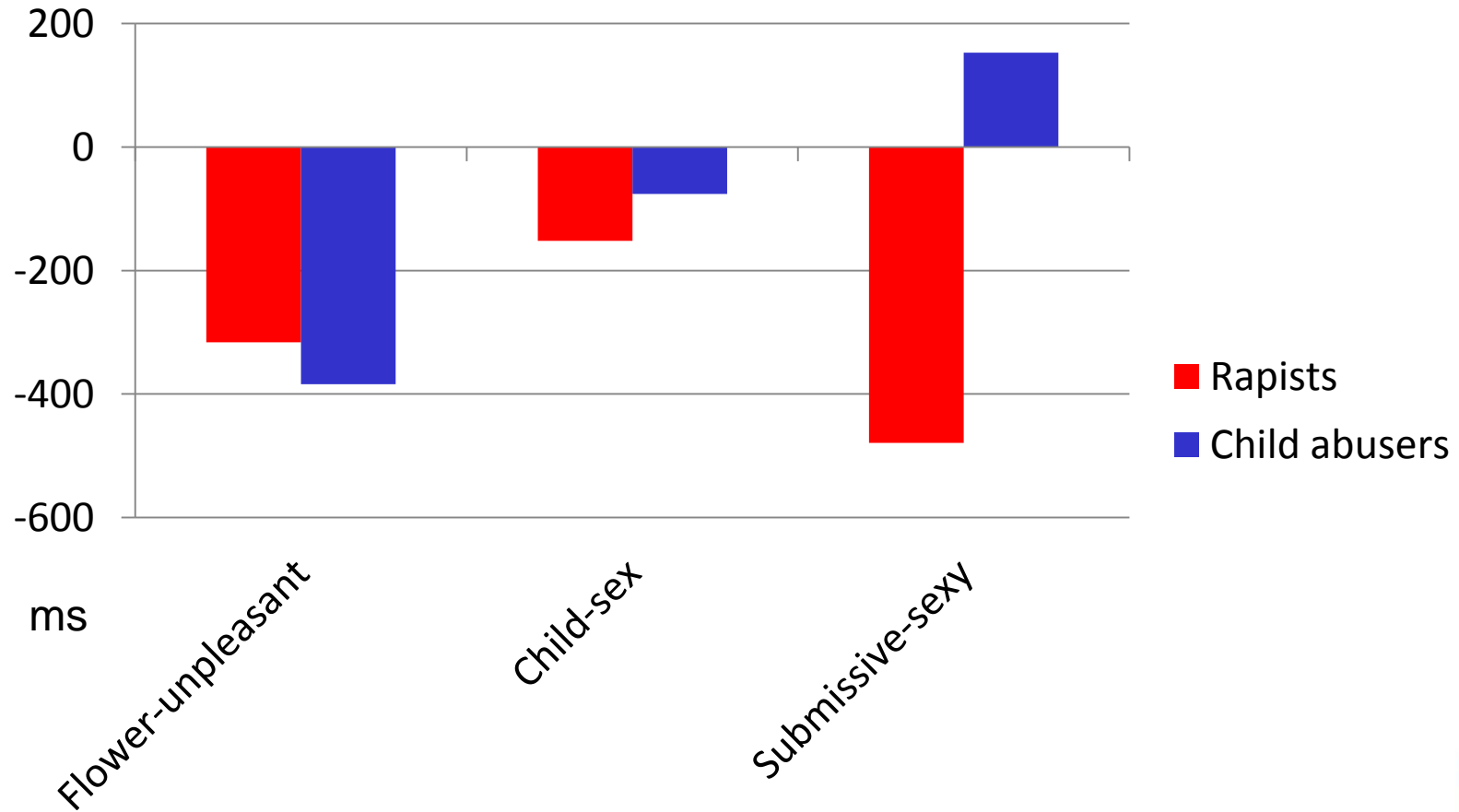
IAT type	Child abusers ( <i>n</i> = 9)	Rapists ( <i>n</i> = 6)	Statistics
	<i>M</i> ( <i>SD</i> )	<i>M</i> ( <i>SD</i> )	
Flower-unpleasant	- 384.77 (254.31)	- 316.56 (230.17)	<i>t</i> = - 0.53
Child-sex	- 76.94 (147.42)	- 152.33 (201.59)	<i>t</i> = 0.84
Submissive-sexy	153.57 (607.54)	- 479.21 (492.45)	<i>t</i> = 2.21*

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\* *p* < .05



# Implicit Association Test (IAT)



# Implicit Association Test (IAT)

## Conclusion

- The IAT seems to be a promising instrument for measuring cognitive distortions

## Future research

- Test more sex offenders
- Test staff members and students as control conditions
- Relate IAT-effects with risk assessment instruments



# Psychophysiological measurement of sexual arousal

## Rigiscan®Plus

Originally, the Rigiscan®Plus has been developed for the analysis of erectile dysfunctions. It measures penis activity by registering rigidity, circumference, frequency and duration of nocturnal erections.

## Heart rate and skin conductance

Are considered as an alternative measure for sexual arousal (e.g.: patients refuse to cooperate or Rigiscan®Plus is not suitable for measuring sexual arousal)



# Development of program



# Sexual Aggression Control Therapy

## Framework

- **Offense script (individual sessions)**
- **Sexual information (VRIS; 14 group sessions)**
- **Cognitive distortions + Psychomotor therapy (22 group sessions)**
- **Self-regulation skills + Drama therapy (22 group sessions)**
- **Booster sessions**



# **VRIS (Friendship, relations, intimacy, and sexuality)**

- **Development of intimacy and sexuality (5 sessions)**
- **Sexual organs, preservatives, sexually transmitted diseases, and sexual diversity (4 sessions)**
- **Friendship and relations (2 sessions)**
- **Sexual prejudices and pornography (2 sessions)**
- **Sexual violence (1 session)**
- **Evaluation (1 session)**





# Cognitive distortions

- **Women as sex objects**
- **Children as sex objects**
- **Women are unknowable**
- **Children are interested in sex**
- **Male sex drive is uncontrollable**
- **Nature of harm**
- **Dangerous world**
- **Sexual entitlement**



# Self-regulation skills

- **Prosocial network**
- **Sexuality and intimate relations**
- **Work and leisure activities**
- **Managing high-risk situations**



## **Additional treatment**

- **Rapists also follow the treatment program for violent inpatients**
- **Child molesters have to use pharmacotherapy**

