Handout D1
Communicating with Sex Offenders: Questions Pertaining to Sexual History Tool

- How did you first learn about sex? What did your parents tell you about sex?
- How often do you masturbate? How old were you when you started to masturbate? What did your parents tell you about masturbation?
- What do you think about when you masturbate? What are your fantasies? Have they change over time?
- When did you start to date? Describe your first sexual experience.
- Describe your relationship patterns with adults.
- Describe your sexual relationships with your spouse/significant other.
- How often do you engage in sexual activity? Who initiates sex in the relationship?
- Have you ever been a victim of sexual abuse? What is the childhood sexual experience you recall? Have you ever been scared or humiliated sexually?
- Have you ever peeped in windows? Exposed yourself? Made obscene phone calls? Rubbed up against another person in public for sexual pleasure?
- How has your sexual deviancy affected your life (e.g., employment, school, family, health)?

Source: Orlando, Dennise. (1998). "Sex Offenders." *Special Needs Offenders Bulletin: A Publication of the Federal Judicial Center.* Washington D.C. Orlando adapted this list from George Cumming and Maureen Ball's Supervision of the Sex Offender, (VT: The Safer Society Press), 1997.

Handout
D2

A Place to Start
A Resource Kit for Preventing Sexual Violence

Tools for Individuals and Families

General Prevention Tool #4

Communication

Healthy communication assumes that we all have feelings - and the right to express them in ways that show respect for ourselves and others. Below are some helpful hints for healthy communication.

Ground Rules for Healthy Communication

Listen
Be patient
Look at the other person
Use "I" statements
Be honest
Provide feedback or reaction
Talk about talking
Be sensitive to cultural differences in communication
Be respectful
Take turns talking and listening

TIPS FOR LISTENING . . . .

- Stop talking. You can't listen while you are talking.
- Concentrate on what the other person is saying.
- Pay attention to nonverbal messages -- facial expression, hand motions, posture.
- Let the other person know you are listening.
- Give small verbal cues ("uh-huh," "I see").
- Remove distractions if possible (i.e., food, pens, reading materials).
- Listen for what is not said, as much as for what is said.
- Listen to how something is said. The feelings related to the words may be very important.
- Avoid thinking of your response until the other person has finished speaking.
- Tell the other person what you've heard (to be sure this is what was meant).
- Ask questions when you don't understand.

Handout D3
Things to Remember When Interviewing Sex Offenders

During presentence and supervision interviews, consider the following:

- In the initial stages of supervision, ask the offender for details about the offense, the offender's high-risk behaviors, and the typical risk situations preceding the offender's abuse.
- Specifically tell the offender the kinds of behaviors to avoid.
- Make sure that offenders know that "No Contact" means "No Contact" as offenders will rationalize that "No Contact" means "No Sexual Conact."
- Make sure the offender knows the consequences of failing to complete treatment.
- Anticipate that the offender may deny or minimize the sexually deviant behavior.
- When dealing with denial, avoid questions that require a yes or no response.
- Also, ask questions that require the offender to discuss what happened, not why it happened.
- If the offender is providing inconsistent information, seek clarity by asking something like "Do you remember when you said…" or saying "Your statements are confusing me; first you said…then you said…"
- Mix supportive comments with confrontation. Although sex offenders must be held accountable for their actions, it is helpful to acknowledge the difficulty of being honest about hidden sexual abuses and to offer supportive comments when the offender accepts responsibility for his or her behavior…Your objective is to show that you have some understanding of their perceived plight without endorsing or buying into their distortions.
- Ask questions about planning, selection of victims, and grooming or stalking that preceded the offense, as well as questions about the offense itself. How offenders talk about their offense indicates the degree of responsibility they are taking for their actions; how the offender chooses to offend will help you make decisions about the risk and supervision conditions.
- Although many officers are uncomfortable doing so, it is important to ask questions about the offender's deviant and nondeviant sexual history…

Source: Orlando, Dennise. (1998). "Sex Offenders." *Special Needs Offenders Bulletin: A Publication of the Federal Judicial Center.* Washington D.C.

Handout D4
Communicating with Sex Offenders: Questions Pertaining to Sexual Offense Tool

Where did the assault take place? Was the location selected randomly or is the locations always the same?

Describe in detail how you selected the victim. Were there certain characteristics about the victim that appealed to you (e.g., age, sex, physical appearance)?

What was the victim's reaction? Did the victim say anything, cry, submit, or fight back during the assault? Did you stop an any time during the assault because of the victim's reaction?

If the victim was a child, how did you know the child would cooperate? What made you think the child wouldn't tell?

What were you thinking and feeling during the abuse? Were you aroused during the assault? If so, what was arousing you?

What did you say to the victim during the offense? Did you ask or threaten the victim not to say anything after the assault?

To what extent were drugs and alcohol used? Were they used to lure the victim, to reduce the victim's reaction, or to reduce your own inhibitions before the offense?

Did you use a weapon during the assault? If so, how was it used?

Have you ever tried to stop the abusive behavior? How?

Source: Orlando, Dennise. (1998). "Sex Offenders." *Special Needs Offenders Bulletin: A Publication of the Federal Judicial Center.* Washington D.C. Orlando adapted this list from George Cumming and Maureen Ball's Supervision of the Sex Offender, (VT: The Safer Society Press), 1997.

Handout D5

Types of Denial Used by Sex Offenders

Denial Type	What the offender might say
Denial of Fact	“Nothing Happened” or “I didn’t do it.”
Denial of Responsibility	“Something happened, but it wasn’t my idea.” “I was drunk.”
Denial of Sexual Intent	“Something happened, it was my idea, but it wasn’t sexual.” “I was only trying to teach her about body parts.”
Denial of Wrongfulness	“Something happened and it was my idea and it was sexual, but it wasn’t wrong.”
Denial of Self-Determination	"Something happened and it was my idea and it was sexual and it was wrong, but there were extenuating circumstances".
Denial of Harm	“I touched her, but I didn’t rape her.”
Denial of Sexual Gratification	“I only did it because she asked me to.”
Denial of Sexual Arousal	“I performed oral sex on him but never got aroused.”
Denial of Planning	“It just sort of happened.”
Denial of Magnitude/Extent	“In my seven years as a Cub Scout leader, I only touched two boys.”
Denial of Likelihood of Re-Occurrence	“It won’t happen again. I have found the Lord.”
Denial of Awareness	“I didn’t know that she was a minor.”
Denial of Denial	“I’m not denying anything.”

Handout D6

Seven Common Signs of Lying

1. **No eye contact.** Generally, if someone is lying they will not look you in the eye, at least during a certain part of the conversation. Normally, people make eye contact for at least half of a conversation, so anything less than this could be suspicious. One caveat: there are some people who will take great pains to make eye contact with you even if they're lying, simply to make you think they're not.

2. **Change in voice.** A change in the pitch of a person's tone, or a lot of stammering (umm, ah), or throat clearing could indicate a lie.
3. **Unusual body language.** If a person taps their foot a lot, fidgets with their hands, raises their shoulders, turns away from you or brings their hand to their face (to touch their chin or nose, etc.) -- in other words, if they act nervous or uncomfortable -- it could mean they're telling a lie. Also watch out for blushing (or becoming pale) and increased blinking.
4. **Something sounds fishy.** Making statements that contradict each other, are inconsistent or don't sound quite right are usually part of a lie.
5. **Overly defensive.** Sometimes when a person is lying they will become extremely defensive, refusing to answer any questions and even accusing you of lying. This may mean they have something to hide.
6. **Changes subject easily.** If someone is lying and you change the subject, chances are high that they'll go right along with it. A person telling the truth, however, will likely ask why you changed the subject and want to go back to it.
7. **Humor or sarcasm.** A guilty person will often try to change the subject using humor or sarcasm.

Source: **www.SixWise.com**

Handout D7
The Structured Sex Offender Treatment Review Tool

http://www.kbsolutions.com/html/ssotr.html

The Structured Sex Offender Treatment Review

- The SSOTR comes in two forms—one for treatment agencies and another for supervising agencies. Both forms include 31 questions, which assess matters critical in the management and treatment of sex offenders.
- SSOTR focuses on three critical areas of sex offender management:
    - The degree to which offenders assume responsibly for their past behavior
    - The steps offenders take to increase public safety
    - Collateral changes in offenders' life styles.

Offender Assumes Responsibility

1. *Denial*. The extent to which the offender denies the offense
2. *Level of Detail.* Offenders who are making progress in treatment and assuming responsibility will reveal more information.
3. *Disclosure Polygraph.* Offenders detail a complete sexual history and then submit to a polygraph. Non-deceptive offenders score more positively on the SSOTR than those who have not disclosed their sexual history or have been judged deceptive concerning their sexual history.
4. *Clarification.* Offenders must write a letter clarifying that the sexual assault was not the victim's fault.
5. *Restitution.* Offenders should write restitution plans approved by the treatment agency. Plans should include responsibility toward victim and how the offender will assist in the victim's recovery.

Steps Toward Increased Safety

1. *Compliance.* Offenders' compliance with terms and condition of probation and stipulations of treatment is critical.
2. *Cognitive Distortion.* Progress in treatment requires offenders' to identify and explain patterns of cognitive distortions.
3. *Offense Cycle.* Offenders should be able to identity and explain the components of their personal offense cycle.
4. *Demonstrate Interventions.* Offenders should be able to explain and demonstrate the intervention tools taught by the treatment agency.
5. *High Risk Situations.* Offenders should be able to identify and explain all the elements of a situation that make it high risk.
6. *Initiates Tool Use.* Offenders must also be willing to initiate the use of tools in their lives outside of treatment sessions. External verification of use of tools is required.

7. *Protects Possible Victims.* Offenders must place the safety and protection of potential victims above their own personal well-being. External verification of this behavior is required.
8. *Arousal Patterns.* Offenders must be able to identify and explain their own sexual arousal patterns—including preferences in victim selection.
9. *Lowered Deviant Response.* Deviant arousal or interest should be monitored according to treatment plan.
10. *Prevention Plan.* Offenders should have a comprehensive written prevention plan that is approved by the treatment agency, treatment group, and probation officer.
11. *Others Informed.* Significant others should be informed of offenses and risk. Treatment team members should be present to ensure that accurate information is presented in a non-manipulative manner.
12. *Ongoing Risk.* Offenders should be able to fully explain their on-going risk of sexual deviance.
13. *Externalized Control.* Offenders should establish a containment plan that places the locus of control outside the offender.
14. *Sexual Attitudes.* Offenders are expected to demonstrate respect for others by rejecting all beliefs, attitudes, or thoughts that support sexual offending.
15. *Monitoring Polygraphs.* Routine and frequent polygraph examinations is a way for offenders to demonstrate their commitment to public safety.
16. *Protects Family from Self.* Offenders may be required to reduce or eliminate contact with family for some portions of treatment if determined appropriate by the treatment team.

Collateral Life Style Changes

1. *Eliminate Manipulation.* The extent to which the offender deals honestly and openly with professionals, significant others, employers, and potential victims is critical to assessing their progress in treatment.
2. *Eliminate Secrecy.* Offenders are expected to take steps to reveal all aspects of their lives to professionals and significant others.
3. *Confronts Others in Groups.* Offenders must be willing to be confronted about and face their own behavior. They must demonstrate a willingness to appropriately confront other members of the treatment group.
4. *Safe Living Arrangements.* Offenders are expected to live in a relatively risk free environment and should be able to explain any hazards that may be present.
5. *Substance Abuse Treatment.* Offenders who included the use of alcohol or drugs as part of their sexual deviance should demonstrate on-going substance abuse treatment.
6. *Anger Management Work.* On-going treatment for anger management should be confirmed as part of offender therapy.
7. *Eliminates Isolation.* The SSOTR examines the proportion of non-sleeping time spent in isolation from others.
8. *Financial Stability.* Offenders are expected to become and remain financially stable.

9. *Restitution to the Community*. Offenders should actively take steps to promote a sense of community well-being that aids in restoring a feeling of safety within the community.
10. *Relinquish Victim Stance.* Offenders are expected to place the needs of the victim and/or community over their personal needs.

Source adapted from Tanner, J., & DiLeo, D. (2000). Improving sex offender management. *The Journal of Offender Monitoring*, 13-15.

Structured Sex Offender Treatment Review
Case Review Sheet

Client: _____ **Date:** _____

(Underlined items are those for which a blank is allowed)

Review Element	Achieved	Current Focus	Progress Notes
1. Fully admits offense-No denial.	Y N	Y N	
2. Greater detail of offense(s).	Y N	Y N	
3. Non-deceptive disclosure poly.	Y N	Y N	
4. Clarification process complete.	Y N	Y N	
5. Restitution plan in place.	Y N	Y N	
6. Full compliance with conditions.	Y N	Y N	
7. I&E all cognitive distortions.	Y N	Y N	
8. I&E own offense cycle.	Y N	Y N	
9. Demonstrates all interventions.	Y N	Y N	
10. I&E high risk situations	Y N	Y N	
11. Initiates regular tool use.	Y N	Y N	
12. Protects possible victims.	Y N	Y N	
13. I&E sexual arousal patterns	Y N	Y N	
14. Lower deviant arousal/interest.	Y N	Y N	
15. Prevention plan in place.	Y N	Y N	
16. Others informed by Tx Team.	Y N	Y N	
17. Views self as ongoing risk.	Y N	Y N	
18. Externalizes life style control.	Y N	Y N	
19. Pro-social sexual attitudes.	Y N	Y N	
20. Passes monitoring polygraphs.	Y N	Y N	
21. Protects family from self.	Y N	Y N	
22. Eliminates manipulation.	Y N	Y N	
23. Eliminates secrecy.	Y N	Y N	
24. Confronts others in group.	Y N	Y N	
25. Safe living arrangements.	Y N	Y N	
26. Active substance abuse Tx.	Y N	Y N	
27. Anger management work.	Y N	Y N	
28. Eliminates isolation.	Y N	Y N	
29. Financial stability.	Y N	Y N	
30. Restitution to community.	Y N	Y N	
31. Relinquishes "Victim Stance".	Y N	Y N	

Created by Jim Tanner, Ph.D. & Stephen Brake, Ph.D. For further information contact jim@kbsolutions.com

Explanation of Review Questions

Assumes Responsibility for Past Behavior:

1. Fully Admits Offense(s) - No denial.

No Offender exhibits any form of denial concerning current offense.

For an excellent review of types of denial that should be considered as "no", please see Stephen Brake's "Levels and Types of Denial" found in Appendix B of the Colorado Standards & Guidelines for the Assessment, Evaluation, Treatment, and Behavioral Monitoring of Adult Sex Offenders. This document may be downloaded from: http://dcj.state.co.us/odvsom/sodoc.htm

Yes. The offender is not exhibiting any form of denial and admits all aspects of the offense.

2. Greater detail of offense(s).

No. Offender provides a level of detail for current offense(s) that is equal to or less than the level of detail provided by the victim statements or official records of these cases.

Yes Offender is providing more detail than are the victim(s) or official reports of the current offense(s).

3. Non-deceptive disclosure polygraphs.

No The offender has not yet provided a non-deceptive polygraph which covers his/her entire sexual history.

Yes The offender has provided a non-deceptive polygraph which covers his/her entire sexual history.

Blank Allowed only if your jurisdiction does not use polygraph as a monitoring tool.

4. Clarification process complete.

No The offender has not developed an approved clarification plan or has not yet provided the group or community, and victim (assuming victim is willing to do so) with a clarification of the offense in accordance with this approved clarification plan.

Yes The offender has a developed a clarification plan, has written a clarification letter and shared it with the treatment group. If the victim is willing, the offender **must** have presented this letter to the victim(s) in a controlled setting and answered all questions in accordance with the written clarification plan. If the victim is not willing to do a clarification, the offender must have provided a mock clarification to the group and/or participated in a community response panel presentation.

5. Restitution plan in place.

No The offender has no written plan outlining his responsibilities to assist in the treatment and restitution of the victim(s) of his offenses.

Yes The offender has developed an approved plan which outlines **how** (s)he is responsible for and will assist the victim(s) in obtaining required treatment and/or support in repairing the damage done to their lives as a result of the offense

Takes Steps Toward Increased Safety

6. Full compliance with conditions.

No The offender is not 100% in compliance with:
A. Terms and conditions of Probation/Parole or supervision.
B. Terms of the treatment contract.

Yes The offender is 100% in compliance with all terms of supervision and treatment.

7. I&E all cognitive distortions.

No. The offender cannot accurately and completely Identify and Explain all of his/her patterns of cognitive distortions.

Yes The offender can accurately and completely Identify and Explain all of his/her patterns of cognitive distortions.

Created by Jim Tanner, Ph.D. & Stephen Brake, Ph.D. For further information contact jim@kbsolutions.com

8. I&E own offense cycle.

No. The offender cannot accurately and completely Identify and **E**xplain the components of his/her personal offense cycle and their interrelationships

Yes The offender can accurately and completely Identify and **E**xplain each component of his/her personal offense cycle. The offender can explain how these elements interrelate and lead to potential offenses.

9. Demonstrates all interventions.

No The offender cannot explain and demonstrate all intervention tools taught by the treatment provider.

Yes The offender can explain and demonstrate all intervention tools taught by the treatment provider.

10. I&E high risk situations

No. The offender cannot accurately and completely Identify and **E**xplain all elements which make a situation high risk for the offender.

Yes The offender can accurately and completely **I**dentify and **E**xplain all elements which make a situation high risk for the offender.

11. Initiates regular tool use.

No The offender does not **demonstrate** (through externally verified means) the regular use of intervention tools.

Yes The offender **demonstrates** regular use of intervention tools. This demonstration must take the form of external verification of the tool use by members of the offender's containment group. Self report of tool use does not warrant a "yes".

12. Protects possible victims

No. The offender does not **demonstrate** though his behavior that (s)he places the safety of potential victims above his/her personal well-being.

Yes The offender **demonstrates** through his behavior that (s)he places the safety of potential victims above his/her personal well-being. This demonstration must take the form of external verification by members of the offender's containment group. This could include appropriate notification of potential victims.

13. I&E own sexual arousal patterns.

No The offender cannot accurately and completely Identify and **E**xplain his own sexual arousal patterns.

Yes The offender can accurately and completely Identify and **E**xplain his own sexual arousal patterns

14. Lower deviant arousal/interest.

No. The offender has not reduced deviant sexual arousal or interest (as measured by PPG or Abel).

Yes The offender has reduced deviant sexual arousal or interest (as measured by PPG or Abel).

Blank The offender's treatment provider does not utilize PPG to measure deviant sexual arousal or Abel Screen to measure deviant sexual interest.

15. Prevention plan in place.

No. The offender has no written and approved sexual offense prevention plan.

Yes The offender has a written and approved sexual offense prevention plan.

Created by Jim Tanner, Ph.D. & Stephen Brake, Ph.D. For further information contact jim@kbsolutions.com

16. Others informed by Tx Team.

No. Individuals significantly involved in the offender's life are not appropriately and fully informed of the offender's sexual offense or are informed only by the offender.

Yes. Individuals significantly involved in the offender's life are appropriately and fully informed of the offender's sexual offense and are informed by treatment team.

Blank There are no individuals significantly involved in the offender's life. ("Eliminates Isolation" item must be checked "No" if this item is left blank).

17. Views self as ongoing risk.

No The offender minimizes or denies his/her ongoing risk. - or - The offender believes "this will never happen again". - or - The offender believes (s)he is "cured".

Yes The offender understands and can explain his/her ongoing risk.

18. Externalizes life style control.

No. The offender establishes a containment or safety plan which relies on self-management or on uninformed or under-informed others. The locus of control of containment lies with the offender.

Yes The offender establishes a containment or safety plan which places the locus of control outside the offender. Those individuals who are a part of the containment plan or safety plan are appropriately informed.

19. Pro-social sexual attitudes.

No. The offender harbors beliefs, attitudes or thoughts which support sexual offending. This includes verbal disrespect of women, children, and others.

Yes. The offender has identified and rejected all beliefs, attitudes or thoughts which support sexual offending and demonstrates respect for others.

20. Passes monitoring polygraphs.

No. The offender was determined to be deceptive or "non-conclusive" on a monitoring polygraph during the period of the review.

Yes The offender was determined to be non-deceptive on a monitoring polygraph during the period of the review.

Blank The offender did not take a monitoring polygraph during the period of the review.

21. Protects family from self.

No. Does not comply with no-contact conditions, and/or does not encourage family to be in treatment.

Yes. Willing to have no contact with family if team requires it (even if family desire to see him), encourages family involvement in treatment.

Blank The offender has no family involved and/or family does not wish involvement.

Necessary Collateral Life Style Changes

22. Eliminates manipulation

No. The offender attempts to manipulate the treatment provider, supervising officer, employer, potential victim, or any significant other during the review period.

Yes The offender deals honestly and openly with the treatment provider, supervising officer, employer, potential victim, or any significant other during the review period.

23. Eliminates secrecy

No. The offender hides or attempts to hide aspects of his/her life from the treatment provider, supervising officer, and/or any significant other during the review period.

Yes The offender takes steps to reveal all aspects of his/her life to the treatment provider, supervising officer, and/or significant other during the review period.

24. Confronts others in group.

No. The offender does not confront others during treatment groups.

Yes The offender appropriately confronts others during treatment groups.

25. Safe living arrangements

No. Lives in an area close to high-risk environment and/or lives with uninformed person(s) who maximize risk.

Yes Chooses to live in a relatively risk free environment, lives with informed person(s) who are part of the containment, and can explain hazards present in his/her living arrangement.

26. Active substance abuse Tx.

No. The offender has not actively participated in substance abuse treatment during the review period.

Yes. The offender has actively participated in substance abuse treatment during the review period

Blank Substance use was **not** involved in any of the offender's offenses AND it has been determined the offender is not in need of substance abuse treatment through a validated substance abuse assessment.

27. Anger management work.

No. The offender is not currently involved in anger management treatment.

Yes. The offender is currently involved in anger management in treatment and can demonstrate (s)he continues to utilize these skills. Note: anger management in treatment is an ongoing part of the sexual offender's offense specific treatment.

28. Eliminates isolation.

No. Offender has more than 20% of his non-sleeping time spent in isolation from others. (This item MUST be marked "No" if the offender has no significant others in his/her life - see item #16)

Yes Offender has 20% or less of his non-sleeping time spent in isolation from others.

29. Financial stability

No. Offender is not financially stable.

Yes. Offender is financially stable.

30 Restitution to community

No. Offender has not developed a community restitution plan or is not in compliance with a community restitution plan.

Yes. Offender has developed a community restitution plan which demonstrates his/her desire to restore a sense of "safety" to the community. AND The offender is actively taking steps to promote a sense of community well-being by implementing this plan.

31. Relinquishes "Victim Stance".

No. The offender is focused on his/her "losses" and "needs".

Yes. The offender is focused on the needs of the victim and community. The offender places the needs of the victim and/or community over his/her personal needs.

Created by Jim Tanner, Ph.D. & Stephen Brake, Ph.D. For further information contact jim@kbsolutions.com

Handout D8
Accountability Tool

Accountability Report

Client: _____ Therapist(s) _____

Date _____ PO _____

If you have any questions about any of these definitions or requirements, immediately ask your sponsor, therapist, PO or raise the matter in group therapy.

Contacts with minors	**Masturbation**	**Thoughts and Fantasies**
Number of sightings in week: # _____ (may estimate) Number of "significant contacts:" # _____ We recommend you carry a small notebook or other means to take note of occurrences. Complete a **Minor Contact Form** for any and all significant contacts.	# ____ times in week # ____ times Directed Masturbation Conditioning # ____ times "Boredom Tape" Protocol Did you masturbate to any deviant fantasies? Yes No Did you use pornography? Yes No If yes, complete a **Fantasy Log** for each time.	# sexual thoughts _____ (Passing, momentary notions - non deviant) # **deviant** thoughts _____ # sexual **fantasies** _____ ("entertaining the thought" - non deviant) # deviant **fantasies** _____ **Complete a Fantasy Log** for each deviant fantasy. **Report deviant thoughts** in group therapy.

Substance Use	**Anger Management**	**Other**
Did you consume any alcohol since your last group session? **Yes No** Did you use any controlled substances since your last group session (include prescriptions. **Yes No** If yes to either, submit a written explanation.	# ____ time you felt angry # ____ times you yelled, argued with, or verbally abused someone. # ____ times you pushed or hit someone. Submit an anger log for the above incidents. If you believe your level of anger does not justify a log, raise the question in group.	View Pornography? **Yes No** Did you trespass, peep or expose yourself? **Yes No** Did you engage in sexual behavior with anyone or anything? **Yes No** If yes to any, explain to group and submit a written statement.

Have you violated treatment rules or corrections supervision in any way? **Yes No**
If yes, make a note here and explain to group.

Have you been dishonest and untruthful in this report? **Yes No**
If yes, make a note here and explain to group.

Signature _____ Date: _____

Handout D9
Safety Plan Tool

SAFETY PLAN AND CONTRACT

NAME OF OFFENDER: _____

SUPERVISOR: _____

This safety plan consists of four pages of specific rules and instructions. All four pages must be included for this plan to be approved.

I _____ agree to the following rules designed for child/community safety during visitation or reunification.

PREVENTION:

The offender will not be alone or unsupervised with children at any time; any contact with children will be within the eyesight of an adult supervisor who is fully aware of the offender's history and accepts the potential for future abuse to occur.

The following people are approved to supervise contact between the offender and children:

_____legal guardian (yes / no) circle one

_____ legal guardian (yes / no) circle one

_____ legal guardian (yes / no) circle one

When the supervisor leaves the room, the offender will

_____

_____

_____

Our child care plans for work hours are:

_____

_____

_____

1. The offender will never be responsible for babysitting or supervising children.
2. Discipline of the children will be done primarily by the supervisor.
3. Physical affection between the offender and children will be brief and will avoid bodily contact.
4. The Offender will never discuss sex or dating with the children.
5. Physical hygiene assistance is always to be done by the supervisor.
   This includes: Bathing; Dressing; Diapering; Toileting
6. There will be no tickling or wrestling between the offender and children.
7. The Offender will never have secrets with any child.
8. The Offender will never enter the children's bedroom alone.
9. The Offender will never enter the bathroom while a child is in it nor will the offender allow a child to enter the bathroom while he/she is in it.
10. All bedroom and bathroom doors will have locks.
11. If mutually agreed, children will be permitted to lock doors.
12. All family members will sleep in their own beds.
13. All family members bathe, shower and toilet separately.
14. No family member shall enter a bathroom or bedroom without knocking and receiving permission to enter.

15. All family members will be dressed at all times (pajamas and robes are O.K. if covering is adequate).
16. Alcohol and drug use is completely and strictly prohibited.
17. No pornography or sexually oriented materials (magazines, pictures or videos) will be in the home.

INTERVENTION

In the event that prevention measures break down and the offender does not appear to be following the specified rules, the supervisor will immediately separate the offender and children by:

_____

_____

_____

In the event that child sexual abuse recurs, **the supervisor will immediately**

- Report the abuse to the local child prevention agency:

  The **Department of Human Services – Child Welfare Division :**

  Grants Pass, OR (541) 474-3120

  Medford, OR (541) 776-6120

  Klamath Falls, OR (541) 883-5570

  Roseburg, OR (541) 440-3373

- Cooperate with authorities conducting an investigation
- Cooperate with the Offender's probation/parole officer listed below:

  _____

- Secure a restraining order

- _____

- _____

Some other, more specific rules that apply to our family based on the offender's past patterns, grooming behaviors, and known high-risk factors are:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Probation/Parole Officer Date

Therapist Date

Supervisor Date

Offender Date

Handout D10
Tips for Communicating with Victims

(FROM JUSTICE SOLUTIONS)
http://www.justicesolutions.org/art_pub_communicating_with_victims.pdf

From Beth Sheller, R.N., M.S.N. Clinical Nurse Specialist in Nashville

SOME "DO'S" AND "DON'TS" OF COMMUNICATING WITH VICTIMS*

DO:

- Attempt foremost to communicate trust, support and confidence.
- Calm and comfort victims. Ask "How are you doing?"
- Allow victims time to tell what happened and describe how they are feeling in their own words.
- Give victims back the control the offender took away by letting them decide when and where to talk.
- Reassure them that their feelings are quite normal and natural, even though they may seem a bit unusual at the moment.
- Let the victim know that any feelings of anger, distress, frustration, fear, etc. are *not* uncommon and are perfectly justifiable.
- Be willing to *listen* to the victim share his or her experience if he or she wants to talk about the crime and its effects, and *validate* that experience with empathy and support.
- Be alert for hidden meanings and messages not directly expressed by the victim, without making unwarranted assumptions.
- Be encouraging, but not unrealistic.
- Be alert for opportunities to stress the victim's qualities and strengths (without being patronizing)
- Accept the fact that you may never know whether a victim follows through with your recommendations.
- Have a information and referral system – with names, addresses, telephone numbers, e-mails, anc web sites/pages – to determine appropriate referrals.
- Offer to make referral calls/contacts for further information and victim support (to ensure that a connection is actually made for the victim).
- Ask for assistance from a supervisor if a call appears to be too difficult to handle yourself.
- Recognize the mistakes will be made, and that increased communication skills come from learnir from your mistake.
- Understand that many victims will have extreme difficulty reconstructing their lives after a violent crime, and that some may *never* recover from the tragedy.

DON'T:

- Be judgmental or blame the victim for the crime that was committed against him or her.

- "Second guess" how the victim reacted to the crime, either at the time it was occurring or in the aftermath of a violent act.

- Avoid the victim, or avoid listening about his or her reaction to the crime. Listening about and validating those experiences and emotions are critical to a victim's reconstruction after a crime.

- Try to frame the victim's experience to any possibly similar experiences, including your own. I *essential* to individualize each victim, each crime, and each victim's reaction to that crime.

- Be "over-helpful" by making decisions and choices for victims. Since no victim *chooses* to be victimized or has control over a violent act committed against him or her, the ability for victims *regain control* over their lives, and *make decisions* affecting their lives, becomes very importan

  • Be discouraged if you feel a call has been unsuccessful. You are not expected to "solve" mos problems with a single phone call.

  • Be afraid of silence. Use it constructively. Don't talk more than the victim caller.

  • Become flustered by the victim's anxiety or urgency. One of the most important things is tha must remain calm, even in a crisis. Remember too that your anxiety can easily be transmitted o the telephone.

  • "Take sides" with a victim who has had difficult experiences with the criminal or juvenile jus system. Work to solve problems, and assure the victim that you will do your best to address the identified needs. Avoid "trash talk" about allied professionals at all costs!

  • Become defensive or arrogant, or get into an argument with a victim.

  • Expect to be a psychotherapist, nor to know all the "right" answers. Your job is to listen and the victim – to the degree possible – in handling his or her immediate issues.

SOURCES:

Kaufman-Yavitz, Louise. (N.D.). "Some Common Do's and Don't's." St. Louis, MO

Seymour, Anne. (1998). "Do's and Don't's in Supporting Victims of Crime. Unpublished.

Stout, Ed. (N.D.). "Victim First Aid." St. Louis, MO: Aid for Victims of Crime.

GOOD THINGS TO SAY TO VICTIMS

- ✓ How can I help you?
- ✓ What can I do for you?
- ✓ I'm sorry.
- ✓ What happened is not your fault.
- ✓ I believe you.
- ✓ Your case is important/unique.
- ✓ Are you safe?
- ✓ Do you have any concerns about your safety?
- ✓ Who else have your spoken to?
- ✓ Would you like a referral for further victim assistance?
- ✓ Can I make any calls for you?
- ✓ Do you need anything else?
- ✓ If you do, contact me at....
- ✓ I'm sorry to bother you.
- ✓ I know this is one more interruption in your life.
- ✓ If you have a serious problem or crisis, dial 911.
- ✓ You are not going crazy.
- ✓ I can't imagine, but...
- ✓ I can't possibly understand what you are going through, but I'm going to try and help you.
- ✓ I don't know, but I'll find out.
- ✓ How are you doing?
- ✓ Let's see if we can figure out your most important needs right now.
- ✓ I'm glad you called.

BAD THINGS TO SAY TO VICTIMS

- ✓ I know how you feel.
- ✓ I understand what you' re going through.
- ✓ Why???
- ✓ Why were you....didn't you...?
- ✓ Your case reminds me of another victim I dealt with...
- ✓ As a general rule of thumb...
- ✓ It's God's will (or any religious platitude).
- ✓ Move on, put it behind you.
- ✓ You need to get over it/ get on with your life.
- ✓ I can promise you that will happen for sure.
- ✓ If I were in your shoes....
- ✓ You're so strong...
- ✓ You're so lucky...
- ✓ At least you weren't hurt.
- ✓ You should forgive.
- ✓ Time heals all wounds.
- ✓ Why didn't you.....?
- ✓ It could be worse.
- ✓ What you need is.....
- ✓ Drunk driving "accident."
- ✓ Get over it. Get on with your life.
- ✓ You're not the only victim I'm trying to help.
- ✓ Offenders aren't really bad people...
- ✓ The poor defendant had a really tough childhood....
- ✓ Nothing at all.
- ✓ Avoid using generalizations.
- ✓ Avoid comparisons with other victims or cases.

NONVERBAL COMMUNICATION ON THE TELEPHONE

"No mortal can keep a secret. If the lips are silent, he chatters with his fingertips; betrayal oozes out of every pore."
– Sigmund Freud

Nonverbal messages play an important role in our business and personal lives. Consequences of ignorance about nonverbal communication can be costly. Nonverbal messages can have a strong influence on the message we communicate to others.

Interpreting Vocal Messages

Vocal factors include the way we use our voice, apart from the words themselves – pitch, tone, volume, etc. Much information is transmitted through vocal patterns.

Vocal factors are an essential part of the communicated message. Factors such as pitch, tone, rhythm, and inflection convey different emotions. For example, when you "raise your voice," the message is one of increased emotion such as anger or frustration. High volume with irregular inflection can convey cheerfulness.

- *Pitch.* How high or low your voice is can reveal much about your personality style and emotions.
- *Tone.* Listeners can read into the tone of your voice, and can determine frustration, anger, boredom, and other emotions.
- *Rhythm.* To be most effective, rhythm should be steady. A varied rhythm can be hard to follow.
- *Inflection.* A friendly voice ends statements with a lilt in the voice.
- *Clarity.* A clear and steady speaking voice is best for gathering and conveying information. Slow down, speak deliberately, and you will be understood.
- *Timing/Pace.* The timing and pace of communication can also give you verbal clues. A "pregnant pause" may set the listener up for an important announcement. A drawn out reply may indicate indifference, and a quick, short reply may indicate impatience.

Effective Listening

No matter how effective your questions are, if you aren't listening, you won't get the information. Listening is a mental process. There is a very real difference between hearing and listening.

We can hear things going on all around us that do not register with the brain in the sense of provoking thought. This type of hearing usually "goes in one ear and out the other."

Listening – active listening – assumes an understanding or comprehension that hearing does not. This type of listening weighs and considers what is being said.

Active Listening Techniques

Selective Listening

Selective listening is the skill of focusing on the words that reveal your client's need and problems. Selective listening highlights your client's objectives. The thing that distinguishes selective listeners is their ability to go beyond the spoken words and "hear" the underlying motivation.

- Give your clients your complete attention. Let other telephone calls be answered by colleagues. Don't try to complete peripheral work while talking with a client. Don't allow yourself to be distracted by activity around your desk.

Responsive Listening

Responsive listening is sometimes called "reactive" listening. That is because you react to points your client makes, and your verbally or non-verbally support them. As you talk, you endorse or reinforce your client's assertions, and you ask additional questions to clarify what you've heard.

- *Verbal feedback*. Responsive listening also involves providing feedback, which demonstrates to your client that you are paying attention and appreciating the importance of what s/he is telling you. Sometimes merely saying, "I see," or even, "Uh-huh" as your client answers your questions can build rapport, demonstrate your interest and attention, and encourage the client to keep talking.

- *Take notes*. You cannot expect to remember everything a client tells you. Some information, however, is essential. Taking notes demonstrates your professionalism and concern, as well as preserves important information.

- *Verify thoughts and feelings*. Empathetic listening means putting yourself in your client's shoes – to t he degree possible – and verifying what you have heard. One basic technique is summarizing what the client says to you:
  "If I understand you correctly, you'd like to complete the written victim impact statement <u>and</u> testify at the sentencing hearing."

  Another way to listen empathetically is to demonstrate that you are trying to understand – to the

degree possible – what your client is feeling.

"If I were in your shoes, I might have concerns about that also."

- *Confirm what you hear*. Have you heard correctly? Do you really understand what you client has told you? You can ensure that you do by simply repeating back to the client, in your own words, your understanding of his or her position.

  "From what you've said so far, I understand that you're asking for specific information about when you'll get your restitution paid."

  Don't parrot your customer's words – paraphrase them. Test your own comprehension through restatement. If you get a point or two wrong, that is all right. You avoid misunderstanding down the line, when it could lead to client disappointment or irritation, and to a loss of confidence in you.

  "Let me see if I hear what you're saying. You need to know if you have any rights if your offender violates his conditions of probation."

Transition

Before a professional decides on which course to take, he or she confirms the information. Doctors ask, "Where does it hurt?" Lawyers ask, "Do you have that in writing?" You, too, must confirm your client's statements and go on to build a relationship.

"Has anyone given you written information about your rights as a victim, and about services available to assist you?

"Do you have receipts for any of your things that were stolen? It's helpful in order to fully document your losses for the pre-sentence investigation.

TELEPHONE SKILLS CHECK LIST

- ✓ Used proper greeting to client (asking how he or she would like to be addressed).
- ✓ Maintained friendly, calm tone of voice.
- ✓ Listened without interrupting or assuming.
- ✓ Checked for understanding of the client's key concerns or problems.
- ✓ Asked questions for clarification.
- ✓ Provided as much detail as the client required.
- ✓ Verified the client's identification.
- ✓ Avoided technical jargon.
- ✓ Matched client's communication skills.
- ✓ Offered alternative solutions.
- ✓ Demonstrated a good working knowledge of victims' rights and services within your agency, and in allied professional agencies.
- ✓ Closed conversation by asking if anything further could be done.
- ✓ Initiated follow-up documentation, and offered to make additional contacts for further information and victim assistance.
- ✓ Thanked the client for calling.
- ✓ Emphasized the importance and value of the client's involvement in the justice process.

Adapted from "Telephone Skills" found at www.changedynamics.com, January 2001.

TELEPHONE COMMUNICATIONS:
RESPONDING TO DIFFICULT QUESTIONS

VICTIM CALLER	LISTENER/RESPONDER
Can you help me?	I'd like to try. Can you tell me more about your situation, and we'll see what we can do.
Tell me more about what that means.	Perhaps it will become clearer as we discuss the reasons why you called.
What should I do about my problem?	What do you feel is possible for you to do at this time?
I want you to help me make a decision. That's why I called.	I'd like to be helpful to you. Which of the things we've discussed do you feel most comfortable in carrying out?
Everyone so far has treated me like a dog.	I'm so sorry you feel you've been treated badly. I'm going to try my best to help you in a respectful way.
I hope you have a couple of hours to talk to me!	I wish I did! Right now I have (amount of time). Let's try and identify your major needs and concerns, and see if we can address them with this time. Otherwise, we can reschedule when we both have more time.
That (allied professional) is an idiot!	I'm sorry you had such a bad experience. Let's talk about what happened and see if I can help you solve your problem.
Can you guarantee (this) will happen?	I'm sorry, I can't guarantee anything. However, I can work closely with you to see if we can help make it happen.
Do I have to tell you who I am?	Only if you decide to do so.
You seem so factual and objective. Do you really care what happens to me?	Yes, I do.
How can you care about a stranger – someone you've never met?	If you share your personal concerns with me, I don't feel you are a stranger.
You don't care!	Why do you feel that way? Perhaps if we talk more about the reason you've called, you'll be better able to judge.

SOURCES:

Kaufman-Yavitz, Louise. (N.D.). "Some Common Do's and Don't's." St. Louis, MO
Seymour, Anne. (1998). "Do's and Don't's in Supporting Victims of Crime. Unpublished.
Stout, Ed. (N.D.). "Victim First Aid." St. Louis, MO: Aid for Victims of Crime.

Handout D11
Communicating with Treatment Providers: Checklist

_____ Provide treatment provider copy of police reports

_____ Provide treatment provider copy of victim impact statement

_____ Provide treatment provider synopsis of criminal history

_____ Provide treatment provider child protection reports

_____ Provide treatment provider available risk assessment reports

_____ Provide treatment provider prior treatment reports and supervision records

_____ Check with supervisor to make sure that you are following agency/district police and procedures regarding confidentiality and disclosure.

Source: Orlando, Dennise. (1998). "Sex Offenders." *Special Needs Offenders Bulletin: A Publication of the Federal Judicial Center.* Washington D.C.