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SEX OFFENDER TREATMENT IN PRISON

Introduction

Seventeen percent of Minnesota inmates are incarcerated for a governing sex offense, and an additional 14 percent have a prior felony conviction for a sex offense¹. More than 90 percent will be released back into the community. Long-term, intensive residential sex offender treatment is used to reduce their risk of reoffending.

Providing treatment in prison has a number of advantages. Offenders are incarcerated, so the community is protected from re-offense. Several Department of Corrections (DOC) facilities have units that serve as therapeutic communities where offender behavior can be closely monitored. Treatment teams work collaboratively to develop treatment plans, provide therapy services, and share observations. Release planners assist offenders in preparing for transition to the community.

Assessment and Treatment

Offenders receive an intake assessment which determines sex offender treatment needs. Male offenders are first housed at the Minnesota Correctional Facility (MCF)-St. Cloud and female offenders at the MCF-Shakopee. The DOC Risk

Assessment/Community Notification unit conducts a risk assessment to determine the appropriate treatment directive for the offender.

The DOC operates its sex offender programming system according to the Risk-Need-Responsivity model², which is proven to be the most effective approach to reducing recidivism. The Risk principle states that the highest risk offenders receive the most intensive services. Offenders who are high-risk, and are deemed likely candidates for civil commitment, are given a treatment directive to the Minnesota Sex Offender Program (MSOP)-DOC site at the MCF-Moose Lake. Offenders who are seen as moderate-to-high risk are directed to enter the Sex Offender Treatment Program (SOTP) at the MCF-Lino Lakes or the MCF-Rush City. Offenders who are seen as lower risk are also directed to SOTP, but are given lower priority for entry into the programs.

Program Descriptions

Medium Custody Facilities

Lino Lakes-SOTP: Offers intermediate to long-term residential programming, which includes chemical dependency treatment, special programming for offenders with lower intellectual functioning, and an extensive transitional program to prepare offenders for release.

MSOP-DOC: Offers long-term residential programming clinically staffed by the MSOP for offenders judged likely to be candidates for civil commitment upon release. Offenders needing transitional and/or chemical dependency programming are accommodated.

Close Custody Facility

Rush City-SOTP: Offers intermediate to long-term, residential programming within a close custody facility.

Female Facility

Shakopee: Offers long-term programming for female offenders who have committed a sexual offense.

Juvenile Facility

Red Wing: Provides sex offender treatment for juveniles. Residents also participate in the facility's campus-wide therapeutic community. Substance abuse education classes are available.

¹ Sex Offenders in Prison, DOC Backgrounder, January 2011

² Risk-Need-Responsivity model for offender assessment and rehabilitation, published by Public Safety Canada, https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/rsk-nd-rspnsvty/index-eng.aspx

Once an offender enters a treatment program, they receive a detailed psychological assessment which identifies deficits that contributed to offending and place the offender at risk for re-offense. An individualized treatment plan is developed addressing these deficits (e.g., sexual interests, attitudes and behaviors, antisocial thinking and behavior, self-management skills, substance abuse issues, and concerns related to relationships and social functioning). Treatment is tailored to the motivation, learning style, strengths, and weaknesses of the offender, which increases the offender's likelihood of benefitting from treatment.

Treatment includes daily group therapy, individual therapy, psychoeducational classes, community meetings, individual study, and community-building activities. Therapeutic communities encourage treatment participants to behave responsibly and to be willing to hold others accountable if they behave in an antisocial manner. This trains offenders to be good citizens and prepares them to live a responsible lifestyle after release.

Release Planning

Offenders in sex offender treatment programs are eligible to receive release planning services. This includes improving an offender's employability (e.g., training in resume writing, interviewing, and good work behaviors), assisting in finding an appropriate and safe residence, setting up post-release treatment and aftercare, and communicating with the corrections agent who will provide supervision. Offenders who complete treatment prior to release participate in aftercare programming within the facility.

Treatment Effectiveness

The DOC completed a study of the effectiveness of prison-based sex offender treatment which was published in a major criminological journal³. It examined 2,040 sex offenders released from Minnesota prisons between 1990 and 2003. The average follow-up period to track recidivism was 9.3 years. Offenders who participated in sex offender treatment within the DOC reduced the risk

of arrest for a new sex offense by 27 percent (33 percent for offenders who completed treatment). Participation in treatment also lowered the risk of rearrest for a violent crime (sexual and non-sexual) by 18 percent. Minnesota has the United State's only Prison-Based Sex Offender Treatment Program listed as "promising" (i.e., support by research) on the Federal Government's crimesolutions.gov website.

Table 1 Sex Offender Treatment Beds

Facility/Program	FY14
Lino Lakes	270
Moose Lake (DOC)	50
Rush City	71
Red Wing	20
Shakopee	8
Total	419

Table 2 Treatment Statistics

Offenders assessed as needing treatment yearly: 596

Offenders entering a DOC long-term treatment program: 898

Offenders successfully completing treatment: 66.7%

Average program completion time: 16 months

FY14 Budget \$4.16 M

Decrease in Sex Offender Recidivism

Since 1990, the sexual recidivism rate in Minnesota has dropped sharply, as the three-year reconviction rate for 2002 releases was 3 percent, compared to 17 percent for the 1990 releases.⁴ Factors in this reduction include:

- -Longer and more intensive supervision upon release, by fully-trained corrections agents with smaller, specialized caseloads
- -Successful treatment participation within prison and community-based programs
- -Collaboration between treatment, probation, and law enforcement

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³ Duwe, G. and Goldman, R. (2009). The Impact of Prison-Based Treatment on Sex Offender Recidivism: Evidence From Minnesota. Sexual Abuse: A Journal of Research and Treatment, September 2009; vol. 21, 2: pp. 279-307

⁴ Sex Offender Recidivism in Minnesota, published by DOC, April 2007.