Impact of Denial of Sexual Offenses on Sentencing and Treatment Strategies

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Impact of Denial of Sexual Offenses on Sentencing and Treatment Strategies

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A thesis presented in partial fulfillment of the requirements of the Undergraduate Honors Program at the University of New Haven.

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University of New Haven

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Table of Contents

Abstract .............................................................................................................. 4
Introduction ........................................................................................................ 5
Literature Review .............................................................................................. 6
Current Study ..................................................................................................... 18

  Research Question ......................................................................................... 18
Method ............................................................................................................... 19
Results ............................................................................................................. 22

  Criminal Justice System .................................................................................. 22
  Sex Offender Characteristics .......................................................................... 25
  Role of Denial ................................................................................................. 27
  Addressing Denial .......................................................................................... 29
  Treatment and Probation ................................................................................ 32
Discussion ........................................................................................................ 36

  Limitations ..................................................................................................... 43
Conclusions and Directions for Future Research ............................................. 45
References ......................................................................................................... 47

Appendix A ....................................................................................................... 54
Abstract

The prevalence of sexual offenses calls for a reevaluation of how the system treats offenders and addresses indicators of risk. How an individual convicted of a sexual offense accepts or denies the assault can weigh heavily on the sanctions imposed upon them, and how the system processes the offender. Acceptance of guilt is an important goal in offender treatment programs, and denial is reportedly used as an indicator of high risk of recidivism. Deeper examination into how individuals who deny their offense are understood and processed throughout treatment aids in the identification of best practices for working with sex offender denial. Assessing practitioner conceptions of sex offender denial and treatment strategies targeting denial via interviews established a more in-depth understanding of how the criminal justice system engages with deniers. This study utilized interviews with probation officers and treatment staff to compile a comprehensive analysis of how professionals in the criminal justice system address sex offender denial. Key themes within the topic area of sex offender denial and treatment that arose through practitioner interviews consisted of how the criminal justice system processes these individuals, common characteristics of the sex offender criminal population, the role of denial in offending behavior and treatment, best practices for addressing denial in probation and treatment, and goals and strategies in sex offender probation and treatment.

*Keywords:* sex offender, denial, probation, treatment, minimization, victim
Impact of Denial of Sexual Offenses on Sentencing and Treatment Strategies

According to the Bureau of Justice Statistics’ (BJS) National Crime Victimization Survey (NCVS), there were over 393,980 instances of sexual victimization in 2017 (Morgan & Truman, 2018). The Federal Bureau of Investigation’s (FBI) Uniform Crime Report (UCR) recorded over 135,755 cases of rape reported to law enforcement in 2017 under the UCR revised definition of rape – “penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim” (FBI, 2018). Of these cases of sexual assault, it is calculated that roughly 60% of sex offenders who are convicted deny some element of their guilt; ranging from full denial of the offense, to the minimization of responsibility for, or the consequences of the assault (Craissati, 2015). It is possible that denial of offending impacts the sentence sexual offenders receive and subsequent post-sentence sanctions. Hood, Shute, Feilzer, and Wilcox (2002) observe that individuals who deny their offense are often labeled as high-risk by parole board members and practitioners who work with sex offenders, are expected to be more likely to reoffend upon release, and are therefore likely to be sanctioned to serving their full sentence in custody. Deniers are frequently withheld from treatment programs due to the expectation that they cannot be effectively treated if they do not acknowledge their guilt (Hood et al., 2002). Although some studies have found that those who deny their offense are not necessarily more likely to recidivate (Harkins, Beech, & Goodwill, 2010; Hood et al., 2002), the general assumption among professionals is often that denial increases the likelihood of sexual reoffending. The apparent disconnect between research and practice is problematic.

Examining how practitioners perceive and work with sex offender denial provides
a more nuanced understanding of current sex offender intervention strategies. Exploring how practitioners conceptualize denial assists in identifying and understanding the apparent discrepancy between research and practice. This study explored the general assumptions concerning sex offender denial that criminal justice professionals hold, and the intervention strategies commonly used to address their denial in treatment. Through interviews with practitioners, this study sought to examined current tools being utilized by probation and treatment staff to address offender denial, built an analysis of perceptions of denial, and identified best practices for working with sex offenders who deny their offense.

**Literature Review**

**Denial**

Denial of an offense includes different categories of deflecting and minimizing responsibility and guilt related to offending behavior. Approximately 30% of those convicted of sex offenses fully deny responsibility for their crime and up to 60% deny some element of their offense (Craissati, 2015). Apart from complete denial, offenders may justify their offense by neutralizing some aspect of their crime. Sex offenders may not take responsibility for their offending behavior and deny full guilt by rationalizing or mitigating the severity of the crime. Matza (1999) suggests that such rationalization may occur before the offense is committed, thereby enabling the offense to occur. An example of this would be transferring the blame to the victim, commonly by claiming that the victim was responsible for their own victimization by their appearance or the situation. Different from denying the offense altogether, Matza asserts that individuals who neutralize the offense reduce the overall seriousness by claiming that they were warranted
in their actions and, therefore, do not accept fault. A sex offender who has committed rape may argue that the victim had dressed provocatively and had been flirting with him. An incestual sex offender may deny that harm was caused and suggest that the sexual offense was a loving or educational act. Such neutralizations and justifications may be leveraged by sexual offenders to minimize their guilt.

Victim blaming is one of the more common characteristics of sexual offender denial as it acts as a barrier from guilt by shifting the responsibility from the offender to the victim. Historically, society encourages offender denial by blaming the victim, especially in sexual offenses, which affirms the denial of the crime by the assailant. Concepts such as those of Lerner’s (1965) “Just World” theory create a social ideal that the world is just and fair, and that the events that occur in life are the result of an individual’s actions (Hayes et al., 2013). Theories of “Just World” create an expectation of fault in the case of victimization, and allow the offender to minimize his or her responsibility for the assault and further deny guilt. Common forms of victim blaming include chastising the victim’s past sexual history, criticizing the clothes the victim wore at the time of the assault, and emphasizing that the victim was under the influence of alcohol. These minimization tactics redirect the fault for the offense away from the offender, and isolate the victim from society by holding them responsible for the assault (Hayes et al., 2013).

Arguably, denial may stem from more than an offender’s intention to avoid fault or mitigate guilt. The United States criminal justice system holds the notion of “innocent until proven guilty,” which ultimately shifts the responsibility of proving guilt to the prosecution and endorses the denial of the defendant. Through this systematic denial of
guilt, an individual is supported in their refutation of guilt which is continued beyond the point of conviction. As a result of this, key participants in the conviction process are expected to express some element of denial. For the defense, denial on the part of the criminal defense attorney functions as a means to effectively serve their legal obligation to the defendant (Bandes, 2006). Even if guilt is apparent and known, the defense must deny such truth and move forward in countering prosecutorial evidence and the conviction of the defendant. In turn, the offender is supported in their own denial of guilt through the encouragement of the defense. Denial is also an element of prosecution as the prosecutor often must reject the humanity of the individual, and consider them only as an offender under the crime they are suspected of committing (Bandes, 2006). The acceptance of denial by the system promotes the lack of admission of guilt by the offender and other influential parties involved in the pre-conviction process.

**Measuring Denial**

Measuring sex offender denial is a challenging task. The majority of studies examining denial use a dichotomous measure—that is, the offender completely denies or completely accepts their sexual offending. In recent years, research has begun to move towards utilizing a continuous measurement to assess denial, ranging from full denial to no denial (Jung & Nunes, 2012). Some research has assessed denial using different specific areas or categories to evaluate the role and impact of denial. Wright and Schneider (2004) outline three areas of denial: refutation, minimization, and depersonalization. Refutation refers to the offender acknowledging that an incident occurred, however the individual refuses to admit their guilt by asserting that their actions were not harmful and should not be considered an offense or by denying their
involvement completely. Minimization focuses on the offender’s justification of the offense, where the individual understands that their actions may be perceived as harmful but claims there are other factors that reduce their responsibility. Depersonalization describes an offender’s admittance of involvement and responsibility but denies their accountability; this is indicated through the offender’s denial of any planning involved in the offense, any sexually deviant behaviors or interests, and their vulnerability to re-offend in the future (Wright & Schneider, 2004). Different elements or categories of denial can be helpful for researchers and practitioners to consider when evaluating and working with sexual offenders and their denial.

As research focusing on denial has shifted to consider denial on a continuum, researchers have developed different tools to measure denial on a scale. Eccles, Stringer, and Marshall (1997) developed a measure of denial which examined offenders’ responses to questions or statements regarding their offense to assess their denial or acceptance of their guilt. This tool, the Denial and Minimization Scale (DAMS), uses offender self-report surveys to determine the individual’s denial on a continuous scale from full denial to full acceptance of guilt (Eccles et al., 1997; Pake & Wilson, 2010). Another measure, the Comprehensive Inventory of Denial—Sex Offender version (CID-SO), uses mental health clinicians’ assessment of a sex offender through interviews and review of the individual’s records (Jung & Daniels, 2012). The CID-SO establishes four clusters of denial with four to five items each that the clinician can use to measure an offender’s acceptance or denial of guilt based on a three-point scale (Jung & Daniels, 2012). Using such scales to assess denial may help identify critical facets of denial, and provide some indication of how denial may change over time or in response to treatment (Jung &
Sexual Offenses in the System

As previously stated, approximately 135,755 reported cases of sexual assault recorded by the Uniform Crime Report in 2017, a 2.5% increase from the 2016 report (FBI, 2018). The number of offenders convicted of sexual abuse in federal criminal court has increased considerably in the last decade, according to the United States Sentencing Commission (2019). In the federal criminal justice system, over 90% of those convicted of a sexual abuse offense were sanctioned with mandatory minimum sentences of 10-15 years (USSC, 2019). There are a number of factors that contribute to an offender’s conviction and sentencing in the criminal justice system. Under mandatory minimum sentencing guidelines, past criminal history of the individual and the seriousness of the offense often have the greatest impact on the sanctions imposed on a convicted offender (USSC, 2018). However, there are additional details of each case and possible characteristics of the offender that may determine the sanctions assigned after a conviction. The sex offender’s denial during the stages of charges and conviction may influence the severity of the sanctions imposed on the sex offender and result in harsher sentencing.

An additional concern with denial of sexual offenses and the manner in which the justice system sanctions those who deny their offense is the possibility of a wrongful conviction. In recent years, with the advancement of DNA testing, the public exposure to wrongful convictions has significantly increased (West & Meterko, 2016). Numerous studies have been conducted to determine the prevalence of wrongful convictions and the need for the exoneration of sanctioned individuals who, by DNA evidence, have been
proven not guilty. Walsh, Hussenmann, Flynn, Yahner, and Golian (2017) concluded that 12% of cases with a sexual component resulted in a wrongful conviction. With recent media exposure to sexual misconduct and assault in addition to false accusations, impartial consideration of evidence is critical to maintaining the legitimacy of the criminal justice system. Additionally, imposed sanctions and treatment should serve to best benefit victims, communities, and offenders.

Discrepancies between suspected prevalence of sexual violence and reports of sexual victimization are cause for significant concern. According to the National Sexual Violence Resource Center (NSVRC, 2015), sexual violence is one of the most under-reported offenses with approximately 63% of sexual assaults not reported to officials. The Office for Victims of Crime (2018) note that a consistent estimate of 33% of sexual victimizations were reported to the police from 2006 to 2015. In recent years, publicized incidents of false reporting of sexual assaults have raised concern for individuals accused of, and punished for, crimes they did not commit. However, it is estimated that false reporting occurs between 2% and 10% of the time (NSVRC, 2015). The United States Sentencing Commission (2019) reported that sexual offense convictions accounted for 4.2% of federal convictions in 2016, totaling to 2,633 convicted offenders, a 1% increase from 2010.

Legislations passed in recent years, such as the PROTECT Act and the Adam Walsh Act, have resulted from an increased public concern regarding sexual offenders, specifically those targeting children (Cohen & Spidell, 2016). These legal actions established harsher sentencing conditions for convicted offenders, focusing on increasing mandatory minimum sentences and post-conviction supervision standards (Cohen &
Stricter requirements for sanctioning convicted sex offenders unnecessarily increases the amount of time an individual is involved with the criminal justice system. Excessive sentencing requires considerable economic and human resources, yet fails to reduce the potential risk posed by sex offenders. Indeed, some scholars have argued that excessive sentences exacerbate risk and reduce public safety (Tonry, 2018). Currently, convicted sex offenders enter post-conviction supervision at high levels and require numerous risk assessments at different points during custody and beyond (Cohen & Spidell, 2016).

Scholars have long commented that the decisions made following arrest have considerable repercussions for the defendant and victim alike (Walker, 2014). Plea bargaining is considered an essential aspect of the justice system as the majority of cases reach an agreement and do not go to trial (Molesworth, 2008). Despite this, arguments against the use of pleas have been made. For sexual offenses, the application of an Alford plea—where an individual enters a guilty plea but maintains their innocence—has been reviewed and criticized (Molesworth, 2008; Ward, 2003). For such a plea to be accepted by the court, the judge must find that there is sufficient evidence provided by the State to conclude that the individual is guilty. However, by accepting an Alford plea, the system allows an offender to deny their responsibility and guilt despite technically entering a guilty plea.

Plea agreements often result in revictimization if the victim feels as though their suffering was not taken seriously, or that the offender was not truly held responsible for their crime. The impact of an Alford plea on the victim of a sexual offense can be significant as it allows the offender to avoid acknowledging their crime and admitting
their responsibility (Flynn, 2011). This lack of acknowledgement impedes a victim’s ability to cope with the crime committed against them and reach a recovery state (Molesworth, 2008). Additionally, Alford pleas tend to not have the minimizing effect they are assumed to have. An individual may be inclined to enter a plea in belief that it will allow them to maintain their innocence which will translate to more lenient sentencing. However, Ward (2003) argues that those who enter an Alford plea are often given harsher sanctions than those who entered a guilty plea, frequently have their probation revoked, and are denied early-release parole. Alford pleas encourage offender denial while offering little benefit to the victim, offender, or justice system as a whole.

Assessment of Risk

Denial amongst sex offender is often considered an indicator of the individual being high-risk and likely to recidivate upon release (Hood et al., 2002). However, it has been found that denial of a sexual offense is not significantly correlated with recidivism in convicted sex offenders over a 10-year follow-up period (Harkins et al., 2010). The most significant factor that indicated re-offense was risk-level initially predicted, not denial (Harkins et al., 2010). Hood et al. (2002) concluded that denial was considered a high-risk factor by Parole Board members, which impacts the board’s decisions regarding the individual’s eligibility for early-release. Such an example highlights the disconnect between research and working practice. These findings do not, however, indicate that denial is unimportant when considering effective engagement and treatment of sexual offenders.

Individuals convicted of sexual offenses are generally viewed negatively by the public and professionals alike. Additionally, Hood et al. (2002) argued that the general
assumption of most professionals encountering sex offenders is that those who deny their offense are at a higher risk of re-offense, however, they also found these assumptions have not been supported by research on denial and recidivism. Due to this common assumption, deniers are frequently labeled as more dangerous than offenders who accept their guilt. This perceived dangerousness often leads Parole Boards to not consider the offender for release, and therefore the denier is required to complete the full length of their sentence in custody (Hood et al., 2002). If denial does not increase sexual offending risk, the additional prison expenditure appears moot.

**Treatment and Programs**

Denial of an offense is a multi-faceted concept that must be approached cautiously in order to reach a positive rehabilitative outcome of a treatment program. A heavy-handed approach that seeks to “smash” denial may leave the sex offender feeling vulnerable, thereby increasing the risk he or she poses (Janicki, 2015). Recognizing the important role motivation plays in treatment outcomes, Miller and Rollnick (2013) suggested that practitioners should assess the degree of denial and attempt to establish an effective treatment tool to work with the offender’s ambivalence. Thus, effective clinical work focuses on motivating the individual to accept their guilt, often using the tool of Motivational Interviewing (MI). Offenders must see the benefits of change and become open to the idea of accepting their offense (Miller & Rollnick, 2013). To achieve acceptance and rehabilitation, the individual must have the desire to change for themselves. Miller and Rollnick (2013) also suggested that a practitioner should aim to highlight the reasons for change, while motivating the individual to initiate a step towards accepting their offense.
The style of treatment is critical in the shift from denial to acceptance in a healthy manner that does not leave the offender vulnerable, which can often lead to re-offending (Janicki, 2015). Emotional vulnerability of the offender can become a dangerous factor in their risk and recovery. Putting emphasis on “protective factors” during treatment may help mitigate the overwhelming exposure an offender may feel (Janicki, 2015). The Association for the Treatment of Sexual Abusers (ATSA, 2014) recognize effective treatment for convicted sex offenders focuses on three principles: risk, need, and responsibility. These aim to structure the treatment to fit the offender and create a successful program to guide the individual to an offense-free life post-conviction (ATSA, 2014). The structure of a treatment program impacts how an individual will likely respond to the treatment and be successful in their re-integration into society post-conviction.

In recent decades, there has been a shift from a punitive focus on punishment to emphasizing rehabilitation and treatment of offenders (Mann & Barnett, 2012; McGuire, 1995). Increased research on and use of treatment programs as post-conviction measures aims to create a more effective means to reduce sexual recidivism. There is debate surrounding modern treatment programs for sexual offenders, determining if there are other factors to credit with reduced re-offending of individuals involved in treatment (Friendship, Mann, & Beech, 2003). Initiatives towards rehabilitative treatment for convicted sex offenders have been adopted, including variations of Sex Offender Treatment Programs (SOTP) (Friendship et al., 2003). Following the implementation of programs, research studies have been conducted to evaluate the effectiveness of the SOTP in place. Friendship et al. (2003) examine the SOTP of England and Wales and its
effectiveness when targeting sex offender recidivism. The results of the study found insignificant evidence to support that the treatment program lowered re-offending in individuals who were involved in the treatment program. Similar to other studies (Harkins et al., 2010), Friendship et al. (2003) found a correlation between assigned risk-level and re-offending post-conviction. Friendship et al. (2003) observed significant differences between medium-low and medium-high risk offenders who participated in SOTP and those who did not. Assessing the effectiveness of treatment programs can be a difficult task due to additional factors involved that may influence recidivism (Friendship et al., 2003). Concurring elements affect the outcome of many treatment studies including assigned risk level. Furthermore, the length of the follow-up period restricts the parameter to capture acts of recidivism and the extent of re-offending.

Many modern treatment programs for convicted sex offenders include the use of a polygraph to determine if the individual is following the conditions of their program and if they have re-offended. The polygraph is an additional measure to assess the effectiveness of a program and identify recidivism more accurately than using re-arrest or reconviction data alone. Studies on polygraph testing have concluded that convicted offenders admit to high risk behavior during post-conviction polygraphs (McGrath, Cumming, Hoke, & Bonn-Miller, 2007). This discovery is important as it aids in molding treatment and post-conviction supervision services to better match the individual receiving the treatment. Although McGrath et al. (2007) did not determine any significant differences in sexual or violent re-offending between those who had polygraph compliance testing and those who did not, it is important to acknowledge elements of programs that serve a greater purpose in building effective and impactful treatment.
strategies.

Treatment programs for convicted sex offenders have varied significantly in their goals and methods. Tests such as penile plethysmography use offender sexual arousal response to stimuli to assess sexual preferences and thinking (Laws, Hanson, Osborn, & Greenbaum, 2000). Harsh biologically based treatment techniques, such as physical and chemical castration, are still in practice yet continue to raise significant ethical debate (Andrews & Bonta, 2015). Recently, treatment programs have shifted to using cognitive-behavioral therapy (CBT), which aims to work towards changing the individual’s way of thinking and processing (Kim, Benekos, & Merlo, 2015). CBT focuses on addressing an individual’s thought processes and attitudes to shift actions away from inappropriate or unacceptable behavior (Kim et al., 2015). Sex offender treatment has moved to CBT to counter patterns of thinking and behavior that lead to re-offending.

For sex offender treatment, programs that utilize the cognitive-behavioral approach have become the most common today (Terry, 2006). These programs have various goals to ultimately re-shape the individual to be a productive member of society upon reentry. Individual cognitive-behavioral programs often have different processes, however, there are commonalities among each treatment. Before starting treatment, offenders must go through a series of examinations and evaluations to access the risks and needs of the individual; background checks, psychometric tests, interviews, PPG sexual arousal tests, and polygraphs are common aspects of the pre-treatment analyses (Terry, 2006). The most important goal of cognitive-behavioral programs is to transition the offender to acknowledge and accept responsibility for their behavior, ultimately eradicating all elements of denial (Moster, Wnuk, & Jeglic, 2008; Terry, 2006).
Modifying thinking to reduce offending behavior through CBT aims to shift sexually deviant thoughts to model socially acceptable ideals and actions. Treatment must identify cognitive distortions and offender denial, which foster deviant thinking and evolve into offending behavior (Nezu, Nezu, & Dudek). Beckett, Beech, Fisher, and Fordham (1994) found that pedophiles held a cognitive distortion that their molestation of children was consensual and caused no harm to the victim. Thought distortions like these and many others are common deflectors of deviancy or responsibility by an offender, and cognitive-behavioral programs seek to disassemble such thinking (Moster et al., 2008). Effective treatment must address offender distortions and denial to diminish sexually deviant behavior and reduce re-offending, while cradling offender vulnerability (Janicki, 2015; Moster et al., 2008).

**Current Study**

The purpose of the current study was to examine how criminal justice practitioners understand and respond to sexual offenders’ denial, and to explore how responses to denial influence the offenders’ journey through the criminal justice system. This study analysed the topic of sex offender denial through interviews with criminal justice professionals, including probation officers and treatment staff. The practitioner interviews were analyzed to highlight the general perceptions of deniers held by criminal justice professionals and to understand how denial influences treatment progress. Inquiry into the conviction and sentencing process was also conducted to highlight the role of denial in the pre-incarceration process and the impact of the court actions on offender denial.

**Research Question**
This qualitative study aimed to address a primary research question and gather details on current field practices. Specifically, the current research answers the research question: How do professionals who work with sex offenders experience, understand, and respond to sex offender denial? Researchers also focused on the methods of risk assessment, and the impact of denial on evaluation in treatment and probation. Additionally, this study examined current treatment practices for working with sex offenders, and looked to establish best practices for working with this population of offenders and their denial.

**Method**

**Participants**

The current study incorporated a range of participants that consisted of current and former probation and treatment staff who work or worked with sex offenders and denial. There were a total of 19 interviews conducted. Two interviews were conducted at the University of New Haven with faculty members who are former probation officers with experience working with offender denial. Twelve interviews were conducted with current probation officers in the Sex Offender Unit at the New Haven and Hartford Probation Offices, and five interviews were held with treatment staff at the Connection at the Center for the Treatment of Problem Sexual Behavior (CTPSB) office. Due to the interruption to the transcriptions and analysis during the period of the COVID-19 virus pandemic in the course of this research, the following analysis will only consist of seven interviews from the New Haven Probation Office and two interviews from the University of New Haven. To have a range of opinions, practitioners of varying levels of experience and gender working with sex offenders were interviewed. Years of experience amongst
the participants whose interviews were analyzed ranged from five to 19 years working in probation, with an average experience of 12.8 years and a total of 115 years of experience working in probation. Two of the participants were female and the other 15 were male. Interviews were set up with the assistance and agreement of officers working in the Sex Offender Program under Connecticut Support Services Division (CSSD) Adult Probation, and treatment staff at the Center for the Treatment of Problem Sexual Behavior (CTPSB).

Following receiving approval from the Internal Review Board (IRB), the researchers filed an Application for Approval of Research Proposal through the CSSD’s Internal Research Review Committee (IRRC). After extensive efforts and multiple requests for change in the overall contents of the study, approval via a Memorandum of Understanding (MOU) between the Connecticut Judicial Branch Court Support Services Division (JBCSSD) and the University of New Haven was received. To gather the data for this study, prospective participants were asked to participate via requests sent out by office supervisors who were given basic information about the study and copies of the MOU to share with the participants.

Informed consent was obtained prior to beginning the interviews with the participants via a written consent form with the signature of the practitioner. The names of the practitioners remained confidential and were not included in any of the recorded data; each participant was assigned a non-identifiable number to organize and analyze the interview data.

**Interview Protocol**

Semi-structured interviews with criminal justice professionals were undertaken to explore their perceptions in relation to sexual offender denial and the strategies and
approaches adopted to work with denial, and suggestions for improvement in treatment for this population of offenders. An interview protocol was developed to be used during interviews (see Appendix A). The protocol served as a guide to engender a “conversational partnership” (Rubin & Rubin, 2005, p.129). Open-ended interview questions explored participants’ experience with and understanding of sexual offender denial, and the strategies and approaches they adopted to work with denial. Another important topic that was explored through interviews is the methods used by current treatment programs within the justice system to confront offender denial. These sets of questions focused on how the system and practitioners process offenders who deny their offense. One of the questions examined how denial affects the offender’s eligibility for different treatment programs, and if offenders who deny their offense are more or less likely to be included in treatment. Questions regarding behaviors of individuals who deny their offense were also asked, as well as general inquiries were made into common characteristics among the sex offender population. A number of questions addressed the current practices used to respond to offender denial. In addition, practitioners were asked if the system is in need of reform when assessing and treating denial, and what improvements they would suggest, if any.

**Procedure**

Practitioner interviews were held at the University of New Haven, the New Haven and Hartford Probation Offices and at The Connection, CTPSB facility in Meriden in private rooms and conducted by the researchers, each lasting roughly 25-35 minutes. Prior to the start of the interview, participants were asked to sign an informed consent form to indicate that they agreed to participate in the study, allowed the researchers to
record the interview via an audio voice recorder and that they were aware of any potential risks and benefits. Participants were assured that all personal information would remain confidential and the recordings were to be used for analysis then destroyed. In-person interviews allowed for a more open conversation between participants and the researchers, and promoted in-depth inquiry into sex offender denial and treatment. The recordings were transcribed by the researcher and two undergraduate students.

**Data Analysis**

Transcriptions of the recordings enhanced the researcher’s personal notes and were useful for data analysis purposes. The transcripts were line-by-line coded to identify thematic patterns and these patterns were then examined to reach the conclusions of the study. Codes were derived from the interview transcripts to organize the data collected from the participants. Second-level coding was conducted by sorting transcription codes into domains; reoccurring themes within these domains were then identified. This method of qualitative analysis promotes the recovery of participants’ narratives as they apply to the focus of this study. The rigorous coding approach used in this qualitative study enhanced the extraction of data from the interviews to preserve participants’ voices in the analysis. First level codes were pulled from the practitioner interviews and sorted to build themes within the data. These themes were grouped together into broader domains. The analyzed domains that were found are the criminal justice system, addressing denial, sex offender characteristics, treatment and probation, and the role of denial.

**Results**

**Criminal Justice System**

In recent years, there has been a shift in the focus of the United States criminal
justice system from a punitive, punishment-oriented approach to a more rehabilitative, treatment-based model (Mann & Barnett, 2012; McGuire, 1995). Acknowledging this, participants stated that the old strategy of responding to offender denial with harsher sentences and sending individuals back to jail was not an effective means of changing offending behavior long-term. Specifically, participants argued that the punishment model often led offenders to be less willing to talk about their offense for fear of being returned to jail. According to participants, the current treatment-based focus helps to reduce incarceration rates and has been accompanied with shorter sentences for sex offenders. Previously, sex offenders were commonly being sentenced to extensive periods of incarceration and probation. Participants referred to these long sentences as wearing offenders down and being a factor in their lack of engagement in treatment. However, there was an overall agreement amongst practitioners that jail is a deterrent for many individuals due to the severe abuse from other inmates that many sex offenders endure while incarcerated. Participants claimed that there must be a “balance between punitive and rehabilitative” focused models within the criminal justice system to encourage treatment approaches while maintaining consequences for violators.

Another topic within the criminal justice system that practitioners discussed was how the structure of the system and limitations of sanctions groups sex offenders together. Because of the stigma of sexual offending, individuals often congregate together in prison as a means of protection from other inmates. Participants related this concept to the housing limitations for sex offenders on probation which prohibit them from living in certain areas and at some facilities which often leads to them being homeless or finding housing in a small section of the area. Sex offenders are grouped
together while in prison, during group treatment, and in housing communities while on probation. This, according to participants, can be dangerous because when offenders are clustered together, they are more likely to reoffend together. Several probation officers in this study explained that this is a common occurrence, and officers often find known sex offenders in contact with or reoffending with other offenders. Within the state of Connecticut under the Sex Offender Conditions of Probation, it is a violation to associate with any known sex offenders outside of the approved treatment programs. However, the systemic grouping together and the isolation that many convicted offenders experience fosters relationships with other offenders.

The way an individual was convicted of the sexual offense was also associated with denial. Although denial is common amongst all offenders, probation officers argued that some conviction types lead to offenders being more reluctant to accept full responsibility for their offense. According to participants, offenders who are convicted through no contest or Alford pleas are more likely to deny their offense and are more difficult to motivate to accept their offense. These pleas make it easier for the individual to deny accountability, especially Alford pleas, because of the lack of legal guilt. Some participants also noted that even when legal responsibility is taken, personal acceptance is not present right away. Participants stated that most offenders who take a plea of any kind tend to claim that the plea was only taken because they did not want lengthy jail time, however, they maintain that they are not responsible for the offense.

Another topic that was brought up by participants was the impact of being placed on the Sex Offender Registry. According to participants, being placed on the registry is not a guaranteed sanction for a sex offense and it is a common bargaining tool in plea
deals, so some offenders may not be placed on the registry but are still in sex offender treatment and being supervised on probation because of the sexual nature of their offense.

The stigma of being labeled as a sex offender was discussed in regards to denial, however, officers argued that when an offender is not placed on the registry it is often more difficult to motivate offenders to accept responsibility for their offense. One officer stressed that if an individual is not put on the registry, they will adamantly deny being a sex offender and, thus, they are reluctant to move through treatment and remain defiant of probation conditions. Despite the heavy stigma of sex offending that the registry often hardens, participants suggested that denial is supported by the lack of placement on the registry. When asked about the social impact of the registry, officers stated that there are some individuals who they believe should not necessarily be labeled as a dangerous sex offender – the example of an 18 year old being charged with statutory assault against his 15 year old girlfriend was frequently brought up in this scenario – however, most offenders who are in sex offender probation and on the registry have a long history of deviant sexual behavior. It was argued that, despite the serious implications of being placed on the sex offender registry, it can be a barrier to addressing denial and getting the individual to take responsibility if they are not placed on the registry.

**Sex Offender Characteristics**

A significant commonality amongst participants when discussing the sex offender population is the manipulative tendencies of these individuals. Participants asserted that this population is extremely manipulative, and many show some sociopathic behaviors in both their offending and towards authority. Many of the probation officers described these offenders as cunning and that they will often lie to get out of trouble under
probation. It was also revealed that individuals on probation will try to deceive the officers by going to others in the office or to the head of the division if their request was not accepted by their own probation officer. Based on this, many participants emphasized the importance of having a “tight-knit” office to respond effectively to any manipulation by offenders.

Despite the discussion on manipulation, many participants argued that sex offenders are typically a timid and compliant probation population. This behavior, according to professionals, is likely due to the fear of being returned to prison. As previously discussed, sex offenders are frequently preyed upon by others while incarcerated which acts as a deterrent for committing acts that would result in violation of probation. Participants claimed that offenders often go through probation and treatment with a determined mindset to follow instructions and satisfy their conditions in order to reduce the level of supervision and to avoid going back to prison. Because of this, it may be difficult to identify true denial if an offender is afraid to violate their probation and is faking their acceptance. According to participants, sex offenders are very good liars which makes it difficult to determine if they truly accept responsibility for their offense and feel remorseful.

An important aspect of this population that was described by many participants is that sex offenders come from a variety of backgrounds and life histories. There is no single type of sex offender. Although there are several shared characteristics amongst offenders, probation officers supported the notion that there is an array of offenders and it should not be assumed that all offenders are the same. Participants stressed that many offenders are victims themselves, however, few offenders use their past victimization as a
reason for their own offending. Understanding the differences between each offender is important for successful treatment, and participants agreed that acknowledging the individual differences of offenders is helpful in building rapport.

**Role of Denial**

Being the main focus of this study, denial and its role in probation and treatment were important areas discussed during participant interviews. Consistently among participants, denial was referred to as the lack of responsibility and accountability for one's actions. Denial presents itself in offenders in different forms and in various degrees, according to participants. Probation officers associated denial as a coping mechanism for many sex offenders that acts as a defense from taking responsibility for their behavior and offense. When an offender denies their offense in any degree, participants claimed that this could be an effort to save face and to defer blame for their actions. Denial can manifest itself in different ways. Although some individuals outright deny their offending altogether with no acceptance at all, most offenders use some form of defense against blame.

A common characteristic of denial that was discussed by officers was the use of minimization or justification to excuse the behavior of the offender. Even if the individual admits to part of the offense, there is often some form of deflection of blame that is intended to minimize or justify the actions. Participants described some offenders who use phrases that are meant to undermine the severity of their offending behavior. Officers recited common, graphic phrases that clients often use to defer the blame to the victim, like “I didn’t rape her because I didn’t stick it all the way in,” and comments from child offenders that claim that the minor “came onto” them or that the child made up the
abuse. Similarly, many participants highlighted the frequent victim blaming that is associated with denial. It is common for sex offenders to have little remorse for their actions and lack empathy for their victims, and they often justify their offense by deferring blame to the victim. In this apparent lack of empathy and accountability, participants argued that the victim is often then revictimized by the offender. All participants agreed that, although denial ranges in form and intensity, the majority of sex offenders deny their offense to some extent.

The underlying purpose of denial is difficult to fully understand. Participants asserted that the stigma of sex offending is an influential factor in offender denial. Labeling someone as a sex offender is “a heavy burden to carry” for individuals and has serious ramifications, as stated by participants. Probation officers defended this concept, and associate offender denial with the individual’s attempt to avoid this stigma. It is possible, according to participants, that offenders may believe that if they do not accept responsibility or admit to the offense then it is easier to reject the label of sex offender as well. Participants suggested that offenders may deny their offense because they are ashamed of their sexually deviant thoughts or actions, and use denial as a mechanism to avoid personal ownership. It is not easy for offenders to admit to their offending, participants claimed, so denial is the easier option to maintain some normalcy in their life.

Denial may also be rooted in an individual’s fear of admitting to the offense and facing punishment. Participants indicated that the former punishment-based system fostered denial in that it led to offenders being reluctant to disclose their sexually deviant behaviors for fear of being sent back to prison. In general, individuals are not likely to
confide in someone they do not trust, and this is likely for sex offenders. Offenders are
not willing to accept their offense and disclose this to someone who they believe may use
it against them, according to officers. As a result, without a trusting and honest
relationship, probation officers argued that offenders are more likely to deny
responsibility for their actions.

Participants asserted that denial can hinder an individual’s success in treatment.
Frequently, probation officers suspected that some offenders may fake acceptance in
order to satisfy the conditions of their probation and complete required treatment.
Genuine acceptance of responsibility, participants suggested, is necessary for treatment to
be truly effective in changing the individual’s offending behavior. Many officers agreed
that denial is associated with a lack of engagement during programs and acts as a barrier
for progress in treatment. Participants indicated that offenders who are adamantly
denying their offense are likely to reject any attempts in treatment to get to the underlying
causes of their behavior, but, in order to satisfy the conditions of their probation, may
fake their acceptance to appear compliant. Although participants stated that acceptance
makes the process of probation and treatment easier for all parties and helps to better
address the underlying factors of the offending behavior and prevent recidivism, genuine
acknowledgement and accountability are important for long-term progress.

Addressing Denial

Following the shift from a punitive-focused to a treatment-based community
corrections system, participants felt that the way denial is addressed has also changed.
Participants agreed that, similar to its lack of success in changing offending behavior
long-term, the blatant threat of punishment and prison is not an effective means of
addressing denial. In recent years, according to probation officers, there have been
adjustments to how denial is targeted. These changes include the increased levels of
supervision for deniers, the use of GPS tracking to deter denial and probation violation,
and the use of polygraph tests. Probation officers explained that there are three levels of
supervision within the CSSD Sex Offender Probation: high, medium, and
low/maintenance. Probation determines the level of supervision each offender will be
receiving and does periodic evaluations to reassess the assigned levels. Participants
suggested that individuals may be motivated to accept responsibility for their offense, or
at least present themselves as accepting, in order to reduce the level of supervision they
receive. Some officers also indicated that the use of GPS tracking on offenders acts as a
deterrent for denial of offending or behavior that violates the conditions of probation
because of the increased likelihood that the individual will be caught. Polygraphs were
consistently discussed by participants as being a significant factor in sex offender
probation and treatment. It was argued when offenders know that the polygraph test is
approaching they are more likely to open up about their offense and begin to take
responsibility. On the other hand, participants stated that some individuals continue to
deny responsibility up until the polygraph and even after they fail the test. According to
the probation officers, many offenders try to avoid taking the polygraph by using
excuses, such as having an underlying medical condition, however, many probation
offices now use the polygraph that uses various eye functions rather than the traditional
test that measures physiological stresses. Participants argued that using this modern eye
lie detector test helps to deflect offenders’ efforts to avoid the test. When discussing
strategies for addressing offender denial, many officers noted that the polygraph is a
Probation officers argued that the most critical step in addressing denial is to establish and build upon the individual’s personal acceptance and acknowledgement of wrongdoing. According to participants, identifying factors that encourage accountability by the offender is an important step to reach personal acceptance. One participant discussed the common stages of drug addiction treatment that begins with acknowledging there is a problem and reaching out for help. Similarly, officers claimed that motivating an individual to recognize their offending behavior, they are closer to accepting responsibility for their offense. Participants also suggested that using morals and values to encourage acceptance is an effective tool in targeting denial. Additionally, it was stated that working on establishing victim empathy can help to move an offender towards taking accountability for their offense. According to participants, building upon victim empathy is an important step when addressing denial. However, many officers claimed that individuals with hands-off offenses, typically child pornography offenders, are a difficult population to get to acknowledge the victim in their crime. Because the individual is not directly in contact with the victim in these offenses, probation officers argued that it is more challenging to help them understand that their actions were not victimless.

Group therapy is a common form of sex offender treatment; therefore, it was a frequently discussed topic during participant interviews. Many participants agreed that one of the benefits of group treatment in addressing denial is the peer challenge that arises in during group sessions. Peer challenge, according to probation officers, refers to offenders “calling each other out.” Officers argued that this is an important element in targeting offender denial during treatment because many individuals respond better to
criticism from a peer than someone in authority, such as the treatment staff or probation officer. Because treatment typically consists of individuals at varying stages of their probation and treatment process, offenders who accept their offense may persuade others in the group who are denying to take responsibility. However, some participants suggested that the acceptance of responsibility that is shown in group therapy may not be sustainable. Probation officers argued that some clients who accept responsibility while in group treatment sessions may, during the times without therapy, return to denying responsibility. Overall, most officers agreed that group treatment was useful in targeting denial.

**Treatment and Probation**

Sex offender probation and treatment is an intensive and drawn out process with exhaustive conditions that limit offenders’ freedoms. Participants acknowledged the limitations these conditions put on an individual’s life and asserted that the invasion into their lives is often necessary to serve the ultimate purpose of preventing reoffending. Officers claimed the goals of probation and treatment are fundamentally the same, however, they address the offender and their behavior in different ways while working together. Although rehabilitation is the main goal of both areas, participants suggest that probation is centered around getting the offender to successfully complete the conditions of their probation, whereas treatment attempts to address the underlying reasons for the offending behavior. Some participants indicated that probation serves to prepare offenders for treatment and to get individuals “to the point where [they] can live in society without reoffending.” Officers also noted that probation is mandated by the court order that is decided by the judge during the sentencing stage, and the conditions are set
by the court aside from the sporadic evaluations done by probation to assess supervision level, as previously discussed. When discussing the role of probation when addressing offender denial, participants argued that officers cannot take an individual’s denial or behavior personally, and should be cautious of an offender’s attempts to deceive their officer and others. Participants expressed concerns for being manipulated by clients, and asserted that it is important to fact-check the information given by an individual, especially regarding their offending behavior. One officer stated that a key element of probation is catching offenders “in their lies” and calling them out for manipulative behavior.

The relationship between the probation officers and their clients has a significant impact on the individual’s success in treatment, according to participants. Officers asserted that building and maintaining a caring and honest working relationship with clients is key to addressing denial and fostering change. Relating to a previously discussed point, most individuals are hesitant to be open and honest about their offending to someone they are not familiar with and do not trust. Participants, continuing on this idea, agreed that establishing rapport early on with a client helps to provide them with an initial support system through the probation officer, and allow them the opportunity to accept responsibility and move forward. Probation officers also stressed the importance of an offender’s engagement in prosocial activities, and argued that isolation is very dangerous and a common link to reoffending. Consistently throughout participant interviews, officers stated that probation wants clients to have an outside life and relationships because loneliness makes progress and change more difficult for most offenders. Providing support in improving the individual’s life through programs and
other life assistance is an important step in successful probation, and participants highlighted the idea that it is often harder for a client to reoffend when they have things they could lose, such as a job or significant other. Also, success in the community and establishing an offense-free lifestyle upon re-entry is a powerful positive reinforcement and deterrent for reoffending, according to practitioners. Participants explained that, although the primary goal of probation is to get a client to satisfy the conditions of their probation, giving the individual hope and providing them with the opportunity for growth is essential for long-term change.

When discussing essential characteristics of treatment, participants asserted that support and assistance are key in getting an individual through treatment successfully. According to officers, success acts as a positive reinforcement for most individuals, and showing offenders the benefits of being successful in treatment and probation can be a motivating factor in addressing their denial and offending. Officers agreed that genuinely caring about a client’s success and providing them with opportunities and recognition for improvement is critical in fostering long-term change.

Recognizing the importance of motivation in desistance from sexual offenders, probation officers noted that small motivators can have a lasting impact on an individual’s success in treatment and probation. Participants discussed the usefulness of MI when working with the sex offender population. It was indicated that MI helps to bring personal change from within the individual rather than being forced onto them by the practitioner. Even relatively small progress, according to participants, should not be overlooked, and should be gradually worked on to reach the eventual goal of preventing deviant behaviors and offending. Participants stressed the importance of individualized
care; one officer argued that you must treat the clients the same but address them differently. This idea stems from the claim that each offender is different in their background history and what influences their sexual offending. Treatment and probation should seek to dive deeper into the background and life history of each client to understand the roots of their behavior, according to participants. Although there are often commonalities among offenders, such as past victimization, effective treatment and probation must address each client personally and with dignity to bring about change. Individualized care helps probation officers better understand each client, and productively work to prevent reoffending. A participant stated that reoffending is “a cocktail of everything,” and it was stressed that all issues in an individual’s life must be discussed and targeted for treatment to be successful. Probation officers emphasized that a sex offender who is enrolled in treatment and working through the conditions of their probation is often also facing other issues in their life than only their offending. It was argued that many individuals are facing socioeconomic, mental, and other personal issues that are likely to have an impact on their reoffending if these issues are not addressed.

In response to the discussion of current treatment practices and how denial and individual offenders are treated, some participants stressed the dangers of insufficient treatment. Although there are benefits of group therapy, as mentioned previously, the lack of sufficient, in-depth attention in treatment of the individual can be problematic. Officers claimed that they often see a lack of individualization in the current treatment system due to the use of group sessions. Many participants stated that important issues are frequently overlooked in the 75 minute-weekly sessions, including any behaviors that could lead to violation. It was asserted that offenders are frequently not getting the full
benefit of treatment as a result of the current practices and systemic limitations. Officers argued that failures of the system to address all issues of an individual’s life and offending behavior is a disservice to both the community and the client themselves. Treatment must aim to understand and confront the underlying influences of the individual’s offending behavior, as indicated by participants, in order to be effective in bring about long-term change. Participants claimed that treatment works best when the offender takes accountability for their actions, so it is important for denial to be targeted. However, participants suggested that there are other key points of treatment that should not be overlooked in the pursuit of acceptance of responsibility, and successful treatment must address all of the issues within the individual’s life and provide support for their progress.

**Discussion**

The practitioner perceptions of sex offender denial that were highlighted in this study present important insights useful for understanding how denial manifests in an offender, and how treatment should effectively respond to denial. Participants stressed the need for supportive and involved treatment strategies that focus on understanding all aspects of the individual’s life opposed to only their offense. The various themes that arose from the participant interviews, although focused on specific areas of sexual offending and denial, were interconnected. Each of the extracted domains fold into the concept of effective treatment stemming from an understanding of the individual.

Having adequate methods and tools to address and treat sex offenders are essential components of the criminal justice system. These tools should be frequently reassessed based on new research discoveries and evolving practices. Maintaining a
rehabilitative purpose within the system is critical to achieving long-term success in preventing reoffending. However, probation officers claimed that the system should not completely abandon the use of punishment as a tool for deterring offending. Although it was argued that a strict, punishment-based system is not a feasible or effective way to address denial or prevent reoffending, many participants suggested that consequences are necessary even in a treatment model. Shaping a system that strikes fear in offenders creates a barrier and hardens the individual’s denial by making it more difficult for them to be honest about their offending behavior. Long sentences of incarceration are likely to wear individuals down and make them less likely to engage in treatment while in prison and when they are released. However, implementing consequences for violations of probation conditions, which includes lack of engagement in treatment, are important for deterring denial and reoffending, as suggested by participants.

Adequate treatment is essential to successfully work with sex offenders and prevent reoffending long-term. Integrating evidence-based approaches and establishing a balance between punishment and rehabilitation would broaden and strengthen the impact of offender treatment. There is research that supports probation officers’ approval of implementing Klockars’ hybrid model of supervision by blending a therapeutic but controlling officer role as the most effective method of supervision (Skeem & Manchak, 2008). Further, the system must also limit an individual’s opportunity for denial and not foster an offender’s lack of accountability through its practices. Although plea deals are often viewed as a key element of the United States’ criminal justice system, arguments against plea deals are not lacking in research. Practitioners asserted that Alford and no contest pleas present considerable issues for treatment in addressing offender behavior
and denial. Participants agreed that, although plea deals require the individual to take legal responsibility, pleas enable offenders to deny personal responsibility. By allowing individuals to maintain their innocence, these convictions foster offender denial and make it more difficult to motivate the individual to accept responsibility in treatment. Similarly, using the sex offender registry as a bargaining tool also may hinder offender engagement in treatment. There is significant research on the harm the registry may have on the offender by solidifying social stigmatization and isolating individuals on the list, and the shortcomings of the structure of the list (Tewksbury, 2005; Tewksbury & Lees, 2007). However, removing the condition of sex offender registration from an individual’s sanctions can allow the offender to reject the label of “sex offender” and encourage the argument that their offense was not a sexual crime, according to participant perceptions. Furthermore, research has found that even registered sex offenders often view themselves as less dangerous than other offender (Tewksbury & Lees, 2007), so it can be assumed that un-registered offenders would be motivated to completely deny the label. This can be harmful due to the likelihood that they will be defiant and detached in treatment and probation. Reevaluation of the implications of the Sex Offender Registry should be conducted to assess the actual purpose and the effects of registry.

The restrictions that the system often imposes on offenders, although meant as a safety measure to better monitor dangerous individuals, can create difficulties for this population and impede their rehabilitation. Restrictions on parts of an individual’s life, including housing, employment, and relationships, puts a significant burden on many offenders who do not have a support system to turn to when they are released from prison. This corresponds with the findings of Levenson (2008), which concluded that
these restrictions cause substantial psychosocial stress on offenders. Most homeless shelters do not allow sex offenders as residents so, if an individual cannot find housing in their restricted area, they are frequently left to living on the streets which adds to the stress in their life and hinders treatment. Housing limitations can force individuals to search for housing that is further away from treatment resources, and often leads to them becoming transient (Levenson, 2008). These limitations also drive offenders together as a form of support group for one another, despite association with other sex offenders being a violation of probation conditions, and increases the likelihood of them offending together. Probation officers discussed frequent cases that included known sex offenders associating and reoffending together, which was linked to the social rejection that many offenders face and the common grouping together of offenders. Enforcing more reasonable residence restrictions for offenders, and providing housing and resource assistance would be more strategic and effective methods to protect the community and the offenders, themselves.

Participants shared the assumption that the sex offender population can be manipulative. Awareness of this behavior characteristic is important for practitioners in order to curb any attempts by their clients to manipulate. Probation offices and professionals who work with this population must work cohesively to avoid any miscommunication and tension caused by offender deception. Maintaining a trusting and cooperative work relationship between treatment and probation, and within probation itself, is important to prevent an offender from attempting to manipulate the system, according to participants. Some participants described sex offenders were briefly described as a timid and compliant population, however, probation officers and treatment
staff should be conscious of the potential for cunning behavior. Research has defined various types of and reasons for manipulation by clients during treatment processes, and stress the effectiveness of offering a warm but stern control on the relationship to not allow manipulation of the treatment (Hepworth, 1993). Furthermore, based on participant perceptions, practitioners should be firm but honest with clients to try to limit the offender’s opportunity for manipulation and to maintain control of the treatment process.

Treating the individual in order to effectively address the underlying issues and offending behavior was frequently discussed as a critical piece of successful treatment. Sex offenders are often lumped into a “single polyglot category” (Quinn, Forsyth, & Mullen-Quinn, 2004, p. 224) and regarded as an unredeemable population; however, practitioners argued that sex offenders are a unique population with an array of personalities. Various types of sex offenders (i.e. internet sex offenders and general sex offenders) have been found to have different personality traits between one another and within each category of sexual offending, such as internet offender and child offenders (Tomak et al., 2009). Findings such as this emphasize the need for offender treatment to focus on the individual and identifying the root causes of their deviant behavior, as opposed to grouping each offender in a single category. Treatment and probation must seek to understand the individual’s life history and the various problems that they may be facing in their life that influence the offending behavior. Addressing the client individually helps to bring about personal development and encourage lasting changes in behavior (Ward & Gannon, 2006). Building rapport and maintaining an honest, caring relationship with the individual is critical for practitioners in order to provide support for the offender and their treatment progress. Such an empathic approach is outlined by
Miller and Rollnick (2013) through the use of MI that encourages personal acceptance by the client and fosters a positive relationship between the individual and the practitioner. The transition from denial to acceptance often leaves offenders vulnerable, therefore, probation and treatment should provide a stable support system to help the individual through the process. Each client is likely to have personal reasons for their denial that must be individually addressed, so laying the foundation for acceptance and encouragement can promote change. Ward and Gannon (2006) suggested the treatment use of the Good Lives Model that emphasizes a rehabilitative focus on the well-being of the client and building on their strengths. Strategies such as these help practitioners to treat the individual as a human being and help foster their personal growth, as opposed to only focusing on their offense and sexually deviant behavior. Addressing denial and motivating the offender to take accountability for their offense may ease potential tension in treatment. Once responsibility is accepted, treatment can begin to concentrate on the underlying cause of the deviant behavior and thoughts to prevent reoffending.

A key element in working toward acceptance is establishing the offender’s victim empathy, and to eliminate traces of victim blaming and minimizations that foster denial. Victim empathy may be more difficult to develop for certain offenders, however, this is an important step in sex offender treatment and should not be overlooked. Although there is controversy regarding the attention to victim empathy in sex offender treatment, it is still found to be a useful component in inhibiting and controlling offender arousal, and helps to promote an individual’s emotional empathy for others (Carich et al., 2003).

Sex offender treatment, according to participants, is lacking in treatment providers and support, thus, group therapy sessions held once a week are the common forms of
court-mandated treatment. Building on treatment and increasing the number of providers is needed to give offenders a more individualized treatment. Although there are benefits to group treatment, such as peer challenge, the concerns of practitioners should not be overlooked. The lack of sufficient individual attention in group settings is problematic, and it is suspected that progress made in a weekly session is not likely to last long-term. Intensive treatment and services for high-risk individuals is more effective in reducing reoffending, and therefore, is needed for this population of offenders (Lovins et al., 2009). Small changes made by an offender need to be built upon and supported through individualized care. However, group treatment often does not appear to provide enough personal attention to each individual. Probation violations are frequently not disclosed by offenders during weekly group therapy, and overloaded treatment staff may not have the capacity to give each client the individual care. Although providing each offender with individual treatment is not always feasible for the justice system and its resources, adjustments to promote more personal attention should be implemented. Increasing and bettering training for probation officers can help to improve their involvement and support in the treatment process. Furthermore, having a system that works together efficiently, which includes probation officers, treatment staff, victim advocates, members of the courtroom working group, and the offender’s support system, can help to gain a deeper understanding of the individual’s life and offending to better respond to and treat their behaviors. Treatment and probation must work closely to address the client’s offending and denial and to confront underlying issues that may influence their offending. This working relationship can act as a stable support system that holds the individual responsible for their actions while promoting progress and change.
Practitioners frequently raised the concern of offenders faking their acceptance and victim empathy in order to satisfy the conditions of their probation and complete treatment. Efforts by treatment and probation can be made to address denial and encourage acceptance, however, actual accountability must be a personal decision made and maintained by the individual. Although the use of polygraphs to detect deception and increase acceptance is a common technique in many areas of the criminal justice system, this is not a reliable method. Research has concluded that polygraph exams simply measure physiological responses rather than detect lies (Dons & Lars, 2005). This is an important note to be discussed and additional research should aim to determine how deception of polygraph exams can be detected and addressed.

**Limitations**

This study did come with some limitations. Being an undergraduate research thesis, this study was conducted within the short period of less than one year which limited the capacity of the research. Initially, the researchers hoped to perform a mixed-methods study on this topic; there was to be the qualitative analysis of the practitioner interviews and a quantitative analysis using sex offender case files to determine if offenders who deny their offense are more likely to receive longer and harsher sentences. However, during the process of approval from the CSSD’s IRRC, the request for access to the offender case files was denied and retracted from the study. The stage of requesting and receiving approval from the CSSD was a long and extensive process within this time-constrained study. In total, it took over five months to receive the MOU and approval from the CSSD to begin the data collection, which took a large portion of time out of the one-year study. Another significant limitation of this study and its analysis is related to
the effects of the COVID-19 virus outbreak during the course of the research. Due to time restrictions encountered during this study, 10 interviews (five from the Connections treatment center and five from the Hartford Probation Sex Offender Division) were unable to be included in the analysis. These interviews are intended to be used in a later study as a follow-up to this initial research thesis. Furthermore, the coding and analysis of the collected data was performed by a single researcher which limited the collaboration of interpretation of the practitioner interviews. This was also mainly due to the social distancing conditions of the COVID-19 outbreak and state mandates during the course of the research.

An additional drawback to this study was the convenience sample of participants that was used for the interviews. Participants were requested via head probation officers in the Sex Offender Division, as opposed to a more generalizable sampling method. Other than the two former probation officers who were interviewed at the University of New Haven, the research sample was mainly consisted of probation officers in the CSSD, Adult Probation Unit. These disadvantages in the participant sample potentially restricted the overall perceptions of the interviewees and limited the generalizability of the results.

Despite these limitations, this study had many strengths that should be recognized. The varying experience levels of the participants in this study provided a wider range of responses and knowledge of offender denial and how it has been and is being addressed. Conducting in-person interviews allowed for an individualized, conversation-style interview in which participants were able to expand upon interview topics and researchers were able to identify a wider variety of concepts within the topic of sex offender denial. Including interviews with two former probation officers from
different regions also strengthened the results. The two participants who were interviewed at the University of New Haven were former officers from New York and England and Wales, which provided a varying perspective on the topic of sex offender denial. Also, the rigorous coding method used in the analysis of this study helped to maintain participants’ voices and promote the authenticity of the results.

**Conclusions and Directions for Future Research**

This study aimed to add to the topic of sex offender denial, and sought to expand on the literature surrounding treatment strategies for addressing denial. Interviews with former and current probation officers with varying experience levels provided a broad insight into practitioners’ understanding of sex offender denial and the strategies probation and treatment use to address this population. The present analysis suggests that there are ways to strategically address offender denial, however, it is difficult to gauge the true success of treatment due to the manipulative behavior associated with this population of offenders and the long-term reoffending patterns of sexual offending. Further research should examine the success of denial-focused treatment for sex offenders to determine if current practices are effective in preventing reoffending, and to establish best practices for working with this population. As the researchers had intended for the present study, further quantitative research should be conducted to identify the influence of denial on the early conviction and sentencing processes to determine how the courts view sex offender denial. Additionally, the topic of the impact of the Sex Offender Registry should be examined to identify and understand the impact of being placed on the registry may have on an individual’s own perceptions of their offense and their behavior in treatment.
Overall, the findings of this study suggest that addressing offender denial is an important element of sex offender treatment and probation. Although previous research argued that denial is not a sufficient indicator of future reoffending (Harkins et al., 2010), the results are consistent with the notion that practitioners view denial as a factor indicative of higher risk of reoffending (Hood et al., 2004). However, this belief appears to be based on the association of denial with a lack of engagement in treatment and probation. The strategies used by the criminal justice system to address sex offender denial through treatment appear to have improved in recent years, yet there are still adjustments that can and should be made to better impact offender denial.
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Appendix A

Interview Protocol

Introduction: Hello. First, I would like to thank you for taking the time out of your day to sit down with us today. We are talking to you today because we are hoping to examine how sex offender denial is perceived, understood, and addressed by probation and treatment. I would like to learn about your experiences of sexual offenders who deny their offenses.

1. To start, what does denial mean to you? What forms does denial take, what does denial look like?

2. What are your experiences working with offenders who deny?

3. How common is it for you to encounter a sex offender who denies their offense? Can you give me an estimate of the percentage of offenders who deny their sexual offending?

4. Can you tell me about someone who denied their offense?
   a. What were the allegations?
   b. How did they deny their offense?
   c. Why do you think they denied their offense?
   d. Is this a typical case of denial?

5. I am interested in learning about how you respond to and work with offender denial. What strategies and techniques do you use?

6. How should probation, parole, practitioners respond to denial?
   a. Should there be separate programs for deniers?
7. Do you think sex offender denial increases risk? Why or why not?

8. Is there anything else that we have not talked about that you feel is important to know when looking into the topic of sex offender denial?

Well, that about wraps things up. I really appreciate the time you have given me today. Your thoughts and opinions will be help us to understand how criminal justice professionals experience and understand sex offender denial. Thank you!