



SMART

Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking

SEX OFFENDER MANAGEMENT ASSESSMENT AND PLANNING INITIATIVE

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SOMAPI Report Highlights

Key Things to Know About Adults Who Sexually Offend

Sexual offending is underreported.

In 2014, there were 84,041 forcible rapes reported to law enforcement (FBI Uniform Crime Reports, 2015). The National Crime Victimization Survey, which surveys households about all crimes experienced, reports an estimated 284,350 rape/sexual assault victimizations in 2014.

Sexual abuse is a learned behavior.

Although our understanding of the causes and origins of sexually abusive behavior is rudimentary, research clearly shows that sexual abuse is a learned behavior. Negative or adverse conditions in early development may be contributing factors. In addition, many sex offenders engage in thinking errors to rationalize and maintain sexually abusive behavior, and many have problems with self-regulation and impulse control.

Different types of sex offenders have different propensities to reoffend.

The observed sexual recidivism rates for sex offenders overall range from 5 percent after 3 years of follow-up to 24 percent after 15 years of follow-up. Research that examines the recidivism of rapists and child molesters found the highest observed recidivism rates among child molesters who offend against boys. Comparatively lower recidivism rates were found for rapists, child molesters who victimize girls and incest offenders. Recidivism studies have consistently found that adult sex offenders have much higher rates of general reoffending than sexual reoffending.

Risk assessment improves the effectiveness of sex offender management policies.

Using science-based, actuarial methods to assess sex offender risk is advisable and several valid and reliable instruments are used in the field today. Risk assessment instruments that incorporate both static (e.g., historical or unchangeable) and dynamic (e.g., changeable) risk factors help identify sex offenders' criminogenic needs and thus have the potential added benefit of providing intervention targets.

Sex offenders vary in the reasons why they offend, who they offend against and their reoffense risk. Specialized supervision — in conjunction with assessment and treatment — can be effective in reducing sex offenders' recidivism risk.

Treatment can reduce recidivism.

Treatment can be effective, but its impact varies. Sex offender treatment programs following the principles of risk-needs-responsivity — that is, assessing risk, targeting criminogenic needs (dynamic risk factors) and tailoring to individual offenders — have been found to be more effective in reducing sexual recidivism than those that don't. Treatment has been shown to reduce recidivism by 10 percent and produce a net return on investment of more than \$1.30 in benefits per participant for every \$1 spent (Drake, E.K., Aos, S., & Miller, M.; 2009, "Evidence-based public policy options to reduce crime and criminal justice costs: Implications in Washington State," Victims and Offenders, 4, 170–196).

Research has shed light on what is and is not effective in community-based supervision.

Specialized supervision, in conjunction with treatment, is effective in reducing sexual offenders' recidivism. Circles of Support and Accountability, a supervision strategy that uses community volunteers to hold the offender accountable to a self-management plan and assists with community reentry resources, also appears to be effective. Residence restrictions are not effective, as they may increase offender risk by undermining offender stability and the ability of the offender to obtain housing, work and family support.

The opinions, findings and conclusions or recommendations expressed in this summary are those of the authors and contributors and do not necessarily represent the official position or policies of the SMART Office or the U.S. Department of Justice. For more information about SOMAPI and this topic, visit www.smart.gov/SOMAPI.