

15th International Conference  
of the International Association  
for the Treatment of Sexual Offenders IATSO

September, 7st - 10th 2016  
Copenhagen, Denmark

# An Italian experience of structured sexual offense

C. Rosso, M.F. Garombo, A. Contarino, F. Bordino, S. Gamalero, S. Brugn  
S.I.S.P.Se o.n.l.u.s (Italian Society of Sexual

## Background

Sexual violence against children, juvenile and women is a primary violation of Human Rights. It offends digr

with Sexual Offenders in order to prevent the reiteration of this kind of crime.

Although international studies have already shown the efficacy of the more recent treatment programs for the provide specific and structured interventions for the authors of sexual violence. In light of this SISPS has to sexual offenders, released at the Vercelli's prison from 2009. The focus of the study is to verify the efficacy of

The group treatment is based on CBT (Cognitive Behaviour Therapy), "Good Lives" Model (Ward & Browne Shapiro, 2009) for the elaboration of the traumatic experiences (Garombo, et Al., 2015). It is divided in 3 phases during 6 months.

## Method

Since our project starts are fifty-six the inmates for sexual crimes who have benefited of treatment. Forty-one of them have concluded the treatment yet and on this sample we conducted the analyses of the efficacy of treatment. The mean age was 48.9 years (SD = 12.4), ranging from 27 to 78 years. The nationality of 90.3% of the sample was Italian, instead the rest comes from different countries.

For the evaluation of the efficacy of treatment we used the Sex Offender Treatment Intervention and Progress Scale (SOTIPS; McGrath, Cumming, & Lasher, 2013). During the treatment his instrument is administered by our equipé 2 times: a the "T-zero" (T-0), beginning of treatment, and a the " T-one " (T-1) end of treatment.

We statistically analyze the data come from the different times. Primary results and conclusions are presented.

The Sexual Offender Treatment Intervention and Progress Scale (SOTIPS) is a risk, treatment and success scale. The SOTIPS

• SOTIPS total score

The

# Results

Using the SOTIPS it was possible to evaluate the efficacy of our treatment.

The first graphic (1) shows how the distribution of inmates in the categories of risk was before and after the treatment. At the T-0 the mode was High Risk (n=31; Moderate n=10) and no one subject was a Low Risk. At the T-1 the distribution is completely different, showing a mode of moderate risk (n=19) with n=11 subject a High risk and n=11 subject a low risk of recidivism.

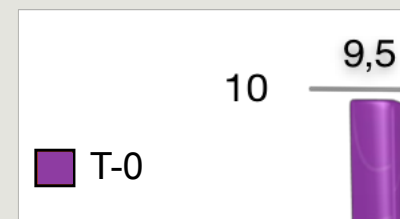
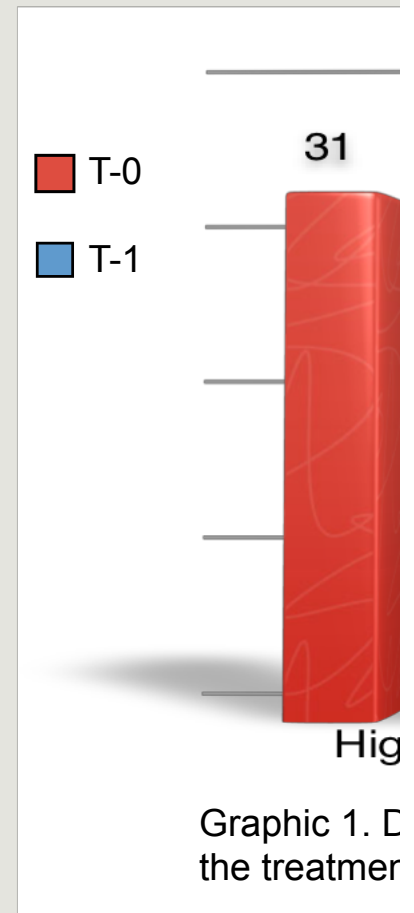
The five subscales of SOTIPS (graphic 2) show that our treatment is more efficacy on the personal areas of:

- Criminality (C): T-0:  $m=2,6$   $sd=2,3$ ; t-1  $m=0,8$   $sd=1,4$  ;
- Sexual deviance (SD): T-0:  $m=9,5$   $sd=3,9$ ; t-1  $m=4,3$   $sd=3,8$  ;

Moreover, on the personal areas of Treatment (T) and Self-Management (S-M) our treatment it is effective too. Only the Social Stability and Support have no changes between T-0 and T-1 but this is caused by the fact that in Italy it is not possible to follow up people after the period of detention if they don't want and for this reason our equipé it is not possible to evaluate the social support after the treatment.

## Conclusion

The SOTIPS highlighted how the treatment affects in a positive way cognitive



distortions, recognition and management of the emotional states and problem solving of all the subject that have done the treatment. Even more the distribution in categories of risk of recidivism shows how much it is important for the inmates to do a structured treatment to work on the crime they committed.

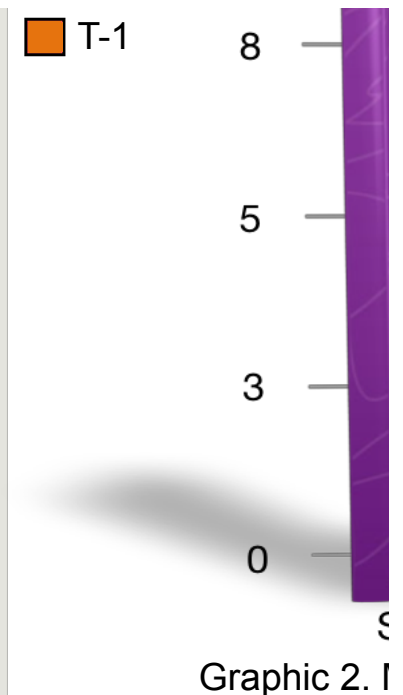
Our treatment results to be effective in reducing principal personal indicators of recidivism and it permits to inmates, when release, to have more awareness and more competences in manage the factors connected to recidivism.

The principal limit of our study is that the Italian Law don't contemplate the continuation of treatment when the detained has been released from prison. For this reason it is not possible for our equipé to evaluate the long-term stability and changes in sexual offenders. Moreover we don't administer the SOTIPS in a control group that haven't done the treatment. In light of this we can not discriminate the influences of the treatment and the influence of the penitentiary measure.

We would thank the Department of Justice of Turin and the team of Department Vercelli's prison.

## References:

- Garombo, M. F., Salvadori, S., Contarino, A., Castellino, N., Molinaro, S., Garofano, P., ... & Rosso, C. (2015). Factorial analysis of risk mat  
McGrath, R. J., Cumming, G. F., & Lasher, M. P. (2013). Sex Offender Treatment Intervention and Progress Scale (SOTIPS) Manual. *Middl*  
Shapiro, E. (2009). EMDR treatment of recent trauma. *Journal of EMDR Practice and Research*, 3(3), 141-151.  
Ward, T., & Brown, M. (2004). The good lives model and conceptual issues in offender rehabilitation. *Psychology, Crime & Law*, 10(3), 243-



**S.I.S.P.Se. O.n.l.u.s**

Società Italiana di Sessuologia Clinica e Psicopatologia Sessuale – Sezione Speciale SIP Sede: T

[www.sispse.it](http://www.sispse.it)

