

## Juvenile Sex Offense Specific Treatment Needs & Progress Scale

Name: \_\_\_\_\_ Period covered: From: \_\_\_\_\_ To: \_\_\_\_\_

Number of sessions:      Offered \_\_\_\_\_      Completed \_\_\_\_\_      Refused \_\_\_\_\_

Treatment Goals: \_\_\_\_\_

Treatment Objectives/Needs: # \_\_\_\_\_

Treatment Objectives/ Needs	No/Minimal Need or Significant Progress	Moderate Need/ Progress	Significant Need
1. Motivation to Change	0	1	2
2. Sexual Interests	0	1	2
3. Sexual Drive	0	1	2
4. Social Skills	0	1	2
5. Personal Maltreatment History	0	1	2
6. Victim Impact/Empathy	0	1	2
7. Attitudes/Beliefs	0	1	2
8. Emotion/Impulse Management	0	1	2
9. Positive/Stable Self-image	0	1	2
10. Responsible Behavior	0	1	2
11. Family Relationships/Supports	0	1	2
12. Peer Relationships/Supports	0	1	2
13. Community Supports	0	1	2
14. Risk Management	0	1	2
15. *	0	1	2

\*Other goals (optional)

Summary/Plan \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Therapist signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This Progress Scale is not a risk assessment instrument.***

*Sue Righthand, Ph.D., 2002 (Revised February 2004, November 2005)*

*Preparation of this document was supported in part by a joint grant from the Maine Departments of Corrections and Human Services and a Federal child abuse and neglect grant from the National Center on Child Abuse, U.S. Department of Health and Human Services.*

# **Juvenile Sex Offense Specific Treatment Needs & Progress Scale:**

## **Guide**

*Sue Righthand, Ph.D.*

### **Introduction**

The primary treatment goal of sex offense-specific treatment is to eliminate sexually abusive behaviors. This goal may be achieved by interventions that effectively eliminate, reduce, or manage factors that increase the risk of sexual offending. Because most recidivism by juveniles who sexually offend appears to be nonsexual, reducing the risk of nonsexual reoffending may be another important treatment goal and can be added.

This Sex Offense-Specific Progress Scale is designed to facilitate the clinical assessment of dynamic risk factors that have been identified in the empirical and clinical literature as associated with the risk of sexual and criminal offending among youths who have committed sexual offenses. Not every risk factor, or treatment needs and objectives as they are referred to here, will be relevant to a particular youth. Those risk factors that have been identified in the youth's treatment plan as treatment needs should be listed by number as Treatment Objectives on the Progress Scale Form. Newly identified treatment needs and objectives may be added at any time. Quarterly rating assessments will provide information about treatment progress relevant to identified treatment needs and objectives.

The treatment needs and objectives are in essence long-term treatment goals. Additional short-term treatment objectives and specific therapeutic interventions are more appropriately noted in the youth's treatment plan. The Sex Offense-Specific Progress Scale provides a way to summarize relevant treatment gains, or lack thereof, and communicate them to safety teams, referral sources and, importantly, the youth and his or her family.

As presented in the Rating Key, items are rated with a 0 to 2 format to reflect the degree to which a potential treatment objective does not require intervention or is a minimal need (No/Minimal Need or Significant Progress), is a moderate need or an area in which some progress has been made (Moderate Need/Progress), or is an area that requires significant intervention (Significant Need). Behavioral anchors are provided in the Rating Key to assist with item ratings. Additional relevant assessment measures (such as social skills rating scales) may be useful for measuring behavior change. Their reliability and validity should be appropriately assessed.

Finally, it is important to note that The Sex Offense-Specific Progress Scale is not a risk assessment instrument. It has not been validated for that purpose and, furthermore, research validating its utility as a measure of treatment progress is needed. The Sex Offense-Specific Progress Scale simply is a guide that may facilitate the clinical assessment of treatment progress for youths receiving sex offense-specific interventions.

For further information about the scale, please contact Dr. Righthand: [RtndS@aol.com](mailto:RtndS@aol.com).

## Rating Key

### 1. Motivation for Change

Description: This item addresses the extent to which the individual perceives he or she has a problem or problems, is concerned and distressed about the problem or problems, and takes action to change and maintain needed change.

Scoring:

- 0 No or Minimal Need/Significant Progress.  
Client recognizes and is sincerely concerned about his or her problem(s). He or she is actively working to change. Youth attends treatment sessions routinely and actively participates. Homework compliance consistently is good.
- 1 Moderate Need/Progress.  
Client is able to consider the possibility that s/he needs to address problem(s) and make behavioral changes, but has not fully embarked on a plan of action. Some attempts at behavior change may be evident; but they are incomplete or are inconsistently applied. For example, youth's attendance may be improved. Unexcused absences are infrequent, if they occur at all. Participation may vary in quality, however. Homework compliance may be fair. Motivation for change may be driven more by external factors (e.g., to avoid the consequences of reoffending) than an internal desire for change.
- 2 Significant Need.  
Youth denies problem(s) or need for behavior change and evidences no internal motivation for change. Youth may refuse treatment or have many unexcused absences. Youth may be uninvolved or disruptive in sessions. Homework compliance is poor. Motivation for treatment is solely external.

### 2. Sexual Interests

Description: This item pertains to the extent that sexual interests are age appropriate, consensual, and nonviolent.

Scoring:

- 0 No or Minimal Need/Significant Progress. Client's behavior reflects age appropriate, consensual, and nonviolent sexual interests. Sexual thoughts, fantasies, and arousal involving children who are not age appropriate; nonconsenting sex activities; and/or sexual fantasies involving violence are not present or occur infrequently.
- 1 Moderate Need/Progress. Client's behavior reflects increased age appropriate, consensual, and nonviolent sexual interests. Sexual thoughts, fantasies, and arousal involving children who are not age appropriate; nonconsenting sex activities; and/or sexual fantasies involving violence are present to a moderate extent.

- 2 Significant Need. Client's behavior reflects limited age appropriate, consensual, and nonviolent sexual interests (e.g., client masturbates to pictures of young children, views child/violent pornography). Sexual thoughts, fantasies, and arousal involving children who are not age appropriate; nonconsenting sex activities; and/or sexual fantasies involving violence appear present to a significant degree. Alternatively, client denies sexual thoughts, fantasies, or arousal.

### 3. Sexual Drive

Description: This item concerns the extent to which the individual is excessively preoccupied with sexual thoughts, fantasies, and behavior. The focus of the sexual preoccupation may or may not reflect inappropriate sexual interests. Preoccupation may be evident by excessive masturbation, public masturbation, inappropriate sexual touching of self or others, exhibitionistic or voyeuristic activities, excessive sexualized language, phone sex, or frequent pornography viewing.

Scoring:

- 0 No or Minimal Need/Significant Progress. Youth does not appear excessively preoccupied with sexual thoughts, fantasies, and behavior.
- 1 Moderate Need/Progress. Preoccupation with sexual thoughts, fantasies, and behaviors appears moderately excessive.
- 2 Significant Need. Preoccupation with sexual thoughts, fantasies, and behaviors appears significantly excessive.

### 4. Social Skills

Description: This item addresses basic social skills such as appropriate eye contact, greeting skills, and physical boundaries, as well as assertive and respectful social behaviors. It includes social skills that are important for developing mutually satisfying interpersonal and intimate relationships.

Scoring:

- 0 No or Minimal Need/Significant Progress. Client demonstrates adequate social skills in most situations.
- 1 Moderate Need/Progress. Client evidences good basic social skills. Client has difficulty being appropriately assertive in social situations. Client tends to be excessively passive or aggressive.
- 2 Significant Need. Client lacks basic social skills such as appropriate eye contact, greeting skills, and physical boundaries

## 5. Personal Maltreatment History

Description: A personal history of child maltreatment (sexual, physical, and/or emotional abuse, neglect, and/or exposure to domestic violence) can be a risk factor for sexual offending and other forms of delinquent or criminal behaviors. This item addresses the extent to which the youth has been able to resolve negative psychosocial effects associated with abusive experiences (e.g., cognitive distortions about the maltreatment such as blaming oneself, an impaired ability to trust, post-traumatic stress disorder).

### Scoring:

- 0 No or Minimal Need/Significant Progress. Client is able to recognize and express how he or she has been affected by child maltreatment and, at least for the most part, has successfully resolved the negative psychosocial effects associated with the maltreatment. Client can identify how child maltreatment experiences may have contributed to his or her sexually abusive behavior, but accepts responsibility for being sexually abusive and does not blame personal behavior choices on the maltreatment history.
- 1 Moderate Need/Progress. Client experiences a moderate level of negative psychosocial effects associated with maltreatment experiences.
- 2 Significant Need. Client experiences severe negative psychosocial effects associated with maltreatment experiences.

## 6. Victim Impact/Empathy

Description: This item assesses empathy and its precursors as applied to the impact sexual abuse has and can have on victims.

### Scoring:

- 0 No or Minimal Need/Significant Progress. Client demonstrates an empathetic understanding of the impact sexual abuse has and can have on victims. Statements and behaviors suggestive of victim empathy appear to genuinely reflect an emotional understanding of the negative effects of sexual abuse as well as sincere regret for actual or potential harm done.
- 1 Moderate Need/Progress. Client demonstrates a cognitive understanding of the impact sexual abuse has and can have on victims. There may be some emotional appreciation of the actual or potential harm done, however this level of emotional understanding is limited or inconsistent.
- 2 Significant Need. Client evidences little or no awareness or appreciation of the impact or potential impact of sexual abuse.

## 7. Attitudes/Beliefs

Description: This item includes attitudes and beliefs supportive of sex offending and other delinquent or criminal behaviors. Examples include sex offense-specific thinking errors (cognitive distortions), misogynistic attitudes toward girls and women, delinquent and antisocial attitudes and beliefs, and negative attribution biases for others' behaviors (e.g., unwarranted expectations of hostile intent).

### Scoring:

- 0 No or Minimal Need/Significant Progress. Client expresses prosocial attitudes and beliefs that are inconsistent with sex offending, sexual misconduct, and other delinquent or criminal behaviors. Attitudes and beliefs that support or justify sex offending, sexual misconduct and other forms of delinquent and criminal behaviors are infrequent or absent.
- 1 Moderate Need/Progress. Client expresses occasional attitudes and beliefs that support or justify sex offending and sexual misconduct, and other delinquent or criminal behaviors. He or she is increasingly able to identify such attitudes and beliefs when they are expressed and, more and more, uses strategies to correct them (e.g., self-statements that challenge erroneous beliefs).
- 2 Significant Need. Client expresses frequent attitudes and beliefs that support or justify sex offending and misconduct, and other delinquent or criminal behaviors.

## 8. Emotion/Impulse Management

Description: This item involves adaptive and prosocial management of emotions and impulses that can be associated with sexual and other forms of delinquent and criminal offending. The emotions may include anger, depression, and/or boredom.

### Scoring:

- 0 No or Minimal Need/Significant Progress. Client is able to recognize emotions, physiological cues, and impulses associated with his or her offending. Client typically uses appropriate strategies to effectively manage these feelings and impulses when they arise.
- 1 Moderate Need/Progress. Client has some ability to recognize emotions, physiological cues, and impulses associated with his or her offending. He or she also is somewhat able to identify appropriate intervention strategies to manage these feelings and impulses effectively, and may successfully intervene on occasion. The client's ability to recognize these cues and appropriate intervention strategies may be more reflective of an intellectual understanding of the information rather than the ability to apply these skills in the heat of the moment.

- 2 Significant Need. The client's ability to recognize emotions, physiological cues, and impulses associated with his or her offending is very limited. He or she is unfamiliar with strategies that may enable him or her to manage these feelings and impulses appropriately and effectively or does not employ them.

## 9. Positive/Stable Self-image

Description: This item involves the client's ability to maintain mostly positive and stable self-image and self-esteem.

Scoring:

- 0 No or Minimal Need/Significant Progress. Client maintains a mostly positive and stable self-image and self-esteem.
- 1 Moderate Need/Progress. Client's self-image is characterized by moderately low self-esteem or occasional periods of excessively, unstable, high self-esteem.
- 2 Significant Need. Client's self-image is characterized by extremely low self-esteem which increases the youth's risk of sexually abusive behavior, or interferes with the youth's ability to effectively engage in treatment. Alternatively, client's self-image is characterized by unstable, unrealistically high esteem which is fragile and plummets when threatened by interpersonal threats, such as real or perceived rejection, criticism, and so forth.

## 10. Responsible behavior

Description: This item involves recognizing and holding oneself accountable for socially appropriate behavior. It includes, but is not limited to, admitting and accepting responsibility for sexual and other forms of criminal offending, as well as other forms of sexually inappropriate or irresponsible behaviors (e.g., sexual harassment).

Scoring:

- 0 No or Minimal Need/Significant Progress.  
Youth typically accepts responsibility for his or her behavior in most aspects of life.  
Youth admits sexual offense(s) and accepts full responsibility.
- 1 Moderate Need/Progress. Youth accepts some responsibility for his or her behavior in many aspects of life.
- 2 Significant Need. Youth accepts minimal responsibility for his or her behavior in most aspects of life.

## 11. Family Relationships/Supports

Description: This item addresses the quality of family relationships and the extent to which the client's immediate family provides the youth with consistent and positive emotional support, stable and nonabusive relationships, and appropriate supervision.

Scoring:

- 0 No or Minimal Need/Significant Progress. Family is a source of consistent and positive emotional support. They provide or are willing and able to provide appropriate supervision. The family is currently, or would like to be, involved in the youth's treatment.
- 1 Moderate Need/Progress. Family relationships may be strained due to situational factors, such as when a youth has abused a family member. The family or some family members may be inconsistent in providing positive emotional support and/or appropriate supervision. In spite of acknowledging the sexual abuse, the family may be ambivalent or reluctant to be involved in the youth's treatment.
- 2 Significant Need. Family relationships are strained, coercive, and/or abusive. Client is poorly supervised by family. Family may deny the client has engaged in sexual and/or other forms of delinquent and criminal behavior, and may refuse to be involved or even actively interfere with the youth's treatment.

## 12. Positive peer relationships

Description: This item concerns the presence and quality of prosocial, respectful, and mutual peer relationships.

Scoring:

- 0 No or Minimal Need/Significant Progress. Client has developmentally appropriate positive peer relationships and a support network that involves some close friendships.
- 1 Moderate Need/Progress. Client has a couple of positive age appropriate peer friendships, however these relationships are causal. The client has difficulty establishing close friendships due to anxiety, trust difficulties, or other factors. Alternatively, although the client has a couple of positive peer relationships, he or she also associates with delinquent peers.
- 2 Significant Need. Client tends to be socially anxious or fearful and/or is rejected by appropriate peer groups. Client is social isolated from appropriate aged peers and may associate with significantly younger children. Alternatively, client associates primarily with a delinquent peer group.

### 13. Community Supports/Supervision

Description: This item addresses the availability and appropriate use of positive support systems and supervision in the community. Supports and supervision may be provided by individuals, organized activities, or employment; and may include school personnel and extra-curricular activities, community activities and support staff, religious activities, extended family members, employers, mentors, and so forth.

Scoring:

- 0 No or Minimal Need/Significant Progress. Client has sufficient community support and supervision.
- 1 Moderate Need/Progress. Client has some positive community supports, but supervision is limited or inconsistent.
- 2 Significant Need. Client has no or few known positive supports in the community and/or supervision is lacking.

### 14. Risk Management strategies (Relapse Prevention)

Description: This item addresses the individual's knowledge and use of risk management techniques and strategies (relapse prevention). It involves the ability to correctly identify cognitive, emotional, interpersonal, and situational triggers and risk factors for offending and to implement appropriate and effective risk management strategies.

Scoring:

- 0 No or Minimal Need/Significant Progress. Client typically monitors himself or herself accurately, identifies triggers and risk factors, and uses risk management strategies effectively.
- 1 Moderate Need/Progress. Client can identify risk factors and risk management possibilities; however this knowledge appears rote, limited, and/or is used inconsistently.
- 2 Significant Need. Client is unable or limited in his or her ability to identify risk factors and risk management possibilities.

### 15. Other (optional)

**Summary:** Provide a brief summary of the youth's areas of strengths, learning style, and intervention strategies that appear most successful. Summarize areas that require additional intervention. Provide additional treatment recommendations (e.g., family therapy, substance abuse treatment, referral for psychopharmacological evaluation), if indicated.

*December 2002 (Revised November 2005)*