

Crime Scene

Psychology Behind Bars and in Front of the Bench



THE OFFICIAL ORGAN OF THE CRIMINAL
JUSTICE SECTION OF THE CANADIAN
PSYCHOLOGICAL ASSOCIATION

Volume 18, Number 1

MAY 2011

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EDITOR'S NOTE

Recently, I had the good fortune to attend a one-day meeting of some of the leading researchers and clinicians in the assessment and treatment of sexual offenders at Carleton University. This meeting, organized by Kevin Nunes and Michael Seto, was a reminder to me of how much knowledge and expertise is present among the members of the Criminal Justice Section, and other related associations. While it would be wonderful to have frequent gatherings and professional meetings to exchange this kind of information, the practicalities of this prohibit such an occurrence. My hope is that we are able to use *Crime Scene* as another avenue to exchange ideas, update our colleagues about recent professional developments, and to stay in touch. As you review this issue, please consider how you can contribute to future issues.

- Ainslie

VIEW FROM THE TOP, by Mark Olver, Ph.D., Chair

This past year, we sadly lost a beloved and admired figure in criminal justice psychology when Dr. Donald Andrews passed away in October 2010. Don's legacy has since been described in several published obituaries and his monumental contributions to criminal justice psychology and corrections will be highlighted at this year's second North American Correctional and Criminal Justice Psychology Conference (NACCJPC) in Toronto.

As one means of honouring Don's memory at this year's NACCJPC, for 2011 we will be presenting the Criminal Justice Section's Career Contribution Award as the "Donald Andrews Career Contribution Award," to be awarded to Dr. Howard Barbaree for his outstanding contributions in sexual offender risk assessment, treatment, and theory, in research and practice.

I am also pleased to announce that Dr. Jane Barker will be this year's recipient of the Criminal Justice Section's Significant Contribution Award for her edited and co-authored book, *Women and the Criminal Justice System: A Canadian Perspective*. I would also like to congratulate Dr. Dorothy Cotton, who was recently elected to the Practitioner Seat of the CPA Board, as well as extend appreciation to Dr. Lorne Sexton for the strong leadership and service he provided in this capacity from 2008/09 through 2009/10. As you will notice from the conference agenda from the draft schedule inside, this year's NACCJPC promises to be very exciting indeed, with several plenaries from distinguished researchers and practitioners, a large and diverse collection of concurrent symposia, and several networking and festive events. We do have much to celebrate.

Kudos and Concerns

However, as a Canadian citizen, an applied researcher, and a clinical psychologist who works with offenders, I remain concerned about our current political climate and how it may stand to adversely impact the administration and treatment of offenders and the goals of preventing and reducing antisocial behaviour.

Those of us who are researchers, clinicians, administrators, and/or students in criminal justice or forensic psychology are well versed in the principles of "what works" (read: risk, need, and responsivity, or RNR). An accumulation of some 374 studies by Don Andrews and his colleagues has demonstrated that prison sanctions alone increase recidivism (by about 3%), while evidence informed, cognitive-behavioural programs are linked to larger reductions in recidivism, with programs showing greater RNR adherence demonstrating more substantive reductions, especially those that are community based. The possibilities are further compelling when we consider that these principles and practices also extend to adolescent offenders, given that adolescence is a developmentally ripe period to intervene and presents an opportunity to prevent our youths from graduating to the ranks of the adult correctional system.

International jurisdictions that have relied heavily on incarceration have demonstrated little or no change in the prevalence of antisocial conduct. Over-incarceration is not only fiscally costly, but has demonstrated little effect on reducing crime. Dr. Jim Bonta has presented extensively in several public forums on why punishment or deterrence does little to curb antisocial behaviour. In short, incarceration tends to violate the principles of effective punishment (i.e., swift and immediate) and involves individuals least likely to benefit from punishment (i.e., individuals who may possess impulsive or sensation seeking traits, with extensive punishment histories of their own). Punishment in itself also does not entail the teaching and practice of new skills (e.g., anti-criminal thinking, prosocial problem solving), such as the very ones that correctional programs tend to model and teach and that non-antisocial folks take for granted that enable us to thrive and survive and stay out of prison.

For more than a decade, Canada has witnessed a reduction in violent and nonviolent crime as documented through official police reported crime statistics, General Social Survey data, and crime severity data. These trends were articulated well in a recent (April 9, 2011) *Globe and Mail* column by Ian Brown ("What are Canadians really afraid of when it comes to crime?").

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VIEW FROM THE TOP Con't

While criminologists interviewed for Mr. Brown's column identified some plausible explanations for this trend, such as an aging Canadian population, I might also point out that some of these substantive changes occurred, perhaps not coincidentally, during the rise and implementation of evidence based correctional treatment programs in the 1990s.

So here we are fast approaching both a federal election and the second NACCJPC. The NACCJPC gives us much to celebrate. Here from around the world we have the convergence of high quality research, ideas, and correctional practices all of which can inform how we can do our collective jobs of administering, evaluating, treating, and managing people who break the law. It also has the potential to form the foundation for lucid, evidence based policy. It is in forums such as NACCJPC that reason and evidence prevail. Unfortunately, the facts and evidence do not appear to have garnered the attention and respect they deserve in the political arena, where ideology and rhetoric seem to frequently trump reason and evidence.

In the wake of a number of significant changes made to our federal correctional system, from the closing of prison farms to major proposed changes in its operations, program priorities, and release mechanisms, what we are celebrating and what we represent at NACCJPC seems to be lost on current government decision makers when it comes to setting policy and legislation on correctional and justice systems. I think we can only continue to do what we do best – to develop, implement, deliver, and evaluate evidence informed programs and to do our best to advocate effectively for this.

I hope to see you at the second NACCJPC in Toronto this June.

Best regards,

Mark

COLUMN: KNOWLEDGE DEVELOPMENT AND TRANSFER, By Joseph Camilleri, Ph.D., Director-at-Large, Web Coordinator

Aggression, Psychopathy, Eyewitness Psychology, and Rethinking Sexual Disorders

The greatest difficulty in writing this column is in choosing which articles to review because the pool of studies is large and varied. Even in the span of a few months, there are many publications that qualify as basic research that may be useful, or at least of interest, to applied forensic psychologists. From this point forward, rather than reviewing a select few of these studies, I will provide a brief summary of all relevant publications that I can muster to hopefully keep *Crime Scene* readers thoroughly abreast on the latest research and scholarship. You will therefore also see more theoretical review papers and chapters from edited books. Please contact me if you have a recent publication or recommendation for inclusion in this column (jcamilleri@wsc.ma.edu).

Aggression

Desensitization to media violence: Links with habitual media violence exposure, aggressive cognitions, and aggressive behavior (Krahé et al., 2011). Though a number of researchers have demonstrated a consistent relationship between viewing media violence and engaging in violent behavior, this study found interesting effects of *habitual* exposure to media violence, such as desensitizing people's physiological response to viewing violence.

Elaboration on the association between IQ and parental SES with subsequent crime (Levine, 2011). Considering SES and IQ are established correlates of crime, the finding that these variables interact in producing crime (low SES, low IQ have highest crime) is not all that surprising, especially considering the large sample ($N = 11,437$).

Attributions

A thin slice of violence: Distinguishing violent from nonviolent sex offenders at a glance (Stillman, Maner, & Baumeister, 2010). Consistent with research on physical characteristics of aggressive men (e.g., Carré and McCormick, 2008), this study found that people are capable of judging a person's history of violence from a brief (i.e., 2 seconds) exposure to the person's image. This research suggests participants are attending to characteristics associated with masculinity and age.

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Eyewitness Psychology

Gender related differences in eyewitness testimony (Areh, 2011). This study is one of the first to address and find sex differences in eyewitness memory—women were more accurate than men in describing people, particularly victims, though men were better at describing the incident that took place.

Individual Differences

Individual differences in risk-propensity: Associations between personality and behavioral measures of risk (Mishra & Lalumiere, 2011). The authors found that risk taking, a characteristic associated with antisociality, falls into one of three factors: future discounting, risky personality, and variance preference, suggesting that not all assessments of risk are measuring the same construct.

The relationship between shame and different types of anger: A theory-based investigation (Hejdenberg & Andrews, 2011). The authors conducted some interesting work on treating shame as an individual difference characteristic and on linking it to aggression.

Intimate Partner Violence

The sex ratio and male-on-female intimate partner violence (D'Alessio & Stolzenberg, 2010). The authors found that a higher sex ratio (i.e., more men to women) is related to higher rates of intimate partner violence across US cities. The article would have benefitted from a discussion on why their results conflicted with research that showed a negative relationship between sex ratio and more general violent behavior (e.g., Barber, 2000).

Psychopathy

Psychopathic traits predict startle habituation but not modulation in an emotional faces task (Anderson, Wan, Young, & Stanford, 2011). Adding another small piece to the psychopathy puzzle, the authors found that antisocial aspects of psychopathy were related to slower habituation to a startle response.

Remembering helpers and hinderers depends on behavioral intentions of the agent and psychopathic characteristics of the observer (Camilleri, Kuhlmeier, & Chu, 2010). Similar to other work (Barclay and Lalumière, 2006), researchers found that participants with psychopathic characteristics had better memory for objects that “helped” than objects that “hindered” other objects, suggesting psychopaths attend to people who are exploitable.

Psychopathy and ability emotional intelligence: Widespread or limited association among facets? (Lishner, Swim, Hong, & Vitacco, 2011). The authors suggest that relationships between facets of psychopathy and ability emotional intelligence are spurious because they disappear after controlling for age and gender. However, they also found a consistent relationship between psychopathy and ability emotional intelligence among men, not among women, which suggests psychopathy's relationship with ability emotional intelligence is not spurious but depends on the person's gender.

Theory Papers

Coercive paraphilic disorder (Quinsey, 2010). Here Quinsey argues that coercive paraphilic disorder, based on Wakefield's (1992) definition of a disorder, should not be considered a pathology.

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COLUMN: KNOWLEDGE DEVELOPMENT AND TRANSFER Con't

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COLUMN: Canadian Committee of Police Psychologists (CCOPP) STORIES, by Dorothy Cotton, Ph.D., Director-At-Large, Police Psychology

Every now and then I stop dead in my tracks and think, "Why am I doing whatever I am doing the way I am doing it?" I have had this thought quite a number of times over the years that I have been doing pre-employment psychological assessments of police officers. As a result of these profound thoughts, my methodology has changed a lot over the years. I started out with a fairly narrow approach which involved... well, I am not going to tell you because I am kind of embarrassed by it. Let us just say it was insufficient and would never have gotten past a jury of my peers.

It is hard to know what the ideal pre-employment assessment ought to look like. Is there a definitive test or set of tests? How many tests? What kinds of questions should I ask in an interview? Come to think of it, should I be doing an interview at all? But if I do, is it legit to ask about past mental health problems? Isn't that a violation of the human rights legislation? And what is all this pre-offer/post-offer stuff you hear about? And what exactly does "suitability" mean? Does it refer to an officer's ability to dress himself without assistance?

Fortunately, we have guidelines to inform our work. Sort of. There are the Ontario Constable Selection System Guidelines. These are pretty minimalist and were apparently written by a team of post-modernist psychologists (I assume they were all dressed in black at the time). Or you can use the Alberta standards. These are kind of like an orchestra audition that takes place behind a screen so you don't see the candidate and therefore cannot be biased. Or how about the IACP Guidelines? They are particularly useful if you live in a jurisdiction where the law stipulates that no one who has ever had an Axis 1 or Axis 2 disorder can be a police officer (as is the case in some US states—but certainly not in Canada!!). I actually have no fundamental objections to most of what these three different sets of guidelines suggest. It's just that they are really not as complete as one would like and not entirely consistent with one another.

The result is that psychologists who do pre-employment assessments in Canada are to some extent left on their own to figure out what to do. And police services are at the mercy of the psychologists. A police service has no way of knowing whether or not they are getting what they need when it comes to pre-employment assessments. That's where a proposed national guideline comes in.

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COLUMN: CCOPP STORIES Con't

A couple of years back, the Police Sector Council of Canada convened a group to look at this issue. (If you are not familiar with the Police Sector Council (PSC), check it out at <http://www.policouncil.ca>). From the PSC's standpoint, they wanted to be able to provide guidance to police services about what to expect from a psychologist, and how to know whether they are getting an appropriate assessment. We'd like to think that we all do good work—but we also know that sometimes that is not the case. Is an interview with no testing at all OK? How about administering one test blind (without seeing the applicant) and making definitive and potentially devastating decisions based on that? What about unregistered people doing the assessments? All of these things have happened to police services in Canada, so it fell to a group of psychologists to try to set a standard that police services could comfortably live with.

And indeed, this group generated many good ideas and thoughtful contributions. It's a complex area and there are differing opinions, but in the end the group was successful in providing the PSC with what it needed to provide some guidance to police services (thanks to Dr. Carol Vipari, Psychologist with the Toronto Police, and her working group). However, the story did not end there. Giving direction to police services is great—but how about some guidelines for those of us who actually DO the assessments? Enter another group of psychologists who were able to extend the comprehensive work done under the auspices of the PSC and fine tune it into something to provide direction to psychologists rather than police services.

The result is a proposed set of Guidelines which will be presented at this year's CPA/NACCCJPC conference in Toronto. These guidelines address a number of tricky issues—not only whether there is a definitive test or right set of interview questions, but also about who should be doing these assessments, in what context and when.

Guidelines are of course, in the end, just guidelines. But the identification of a common standard that one can aspire to is always advantageous—not only to us as service providers, but also to those who utilize our services. They provide an oversight function by suggesting what we need to know before we get into this kind of work, what measures are commonly used and might be used as a benchmark, how to ensure we meet professional standards, what we should report.

Come to the presentation and discussion at NACCPJC and see what you think. Like any set of guidelines, these are a work always in progress.

COLUMN: TRAINING IN CRIMINAL JUSTICE PSYCHOLOGY, by David Simourd, Ph.D., Director-at-Large, Clinical & Training

In my October 2010 column in *Crime Scene* as the Director of Training, I pontificated about how base knowledge and skill application are important ingredients to being a good field psychologist in criminal justice. My appreciation for these two issues was reinforced recently in the most humbling of manners: court testimony concerning a psychological assessment I had conducted on an offender. As psychologists, the products of our work are reflected in the psychological assessments or psychological treatment reports that we prepare. Feedback on our products is educational because it allows us opportunities to consider whether or not we are on the right track. The majority of the time, we share our professional opinions via reports to stakeholders in informal contexts such as private conversations with clients or other interested third parties. Occasionally we must explain and defend our work in a public forum such as court, which in my personal experience occurs for approximately 1% of clinical cases. Testifying in court as an expert witness is similar to defending a thesis in which we present our information and then answer questions, usually to an audience of colleagues or quasi-colleagues. Court testimony, however, is different because it occurs in an adversarial context where there are parties that like our products and parties that are opposed to our opinions. Unlike the comforts of academe, the opponents of our work in court will challenge us and our products in many different ways – some in an inquisitive, fair and reasonable manner, and others not so. As psychologists, we must be prepared to defend our work to both psychologically informed and psychologically uninformed audiences. How can training and education assist us to do the best job possible? There is no stock answer to this question, and the limited space in this column will not do justice to the task. However, I offer a few training tips that may make clinical work as satisfying, helpful, and as defensible as possible.

My belief is that all criminal justice psychologists can adequately explain and defend their work in both informal and formal settings. The key is to attend to the two main issues of base knowledge and skill application.

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COLUMN: TRAINING IN CRIMINAL JUSTICE PSYCHOLOGY Con't

From a base knowledge perspective, psychologists must have a strong understanding of the nuances of the methodology by which we form our opinions of clients, which typically occurs by way of the composite of file data, interview data, and psychometric test data. We must understand the technical aspects of these three sets of data and make decisions on what tools and techniques will be most effective for the clinical question at hand. The task to develop a solid base knowledge is to recognize the strengths and limitations of these techniques and appropriately weigh decision making aids (i.e., file, interview, and test data) that are germane to the clinical question at hand. From a training perspective, information is available by way of the published literature, workshops and seminars for both newbies and geezers to become sufficiently knowledgeable to explain and defend their work in all venues.

The presentation of our psychological products to consumers by way of written reports or narrative comments is a reflection of both the discipline of psychology and us as professionals. Moreover, clinical work is predominantly a practical endeavour in which, to be value added, psychologists must present clinical information that is understandable to both professional and non-professional audiences. Skill application is key in this regard, particularly the balance between experience and personal style. The complexity of human behaviour tells us that there are shades of grey in all our clinical work. The lack of clarity should not prevent clinicians from forming definitive opinions and sticking to those opinions when questioned. Statements in psychological reports such as; "this person has clinical problems in the domains of... and has an X probability of reoffending based on all the clinical evidence" are good because they are about the individual in question and they reflect a definitive clinical position. Statements such as: "this person may or may not have conflict with the law and compares to a normative group that may or may not be at X probability of risk" are poor because they are not unique to the individual and are contradictory (i.e., may or may not). Good luck explaining that in court. From a skill application perspective, what training opportunities are available to improve the products we produce? Like all behavioural improvement it begins with an open mind. Be honest about your strengths and limitations in your current clinical work. Whether you have extensive experience or not it can be helpful to seek collegial contact to review your clinical methodology and report writing. Review the psychological assessment reports from other clinicians to determine how concepts are phrased and positions supported. Finally, spend some time observing court proceedings and in particular how psychological evidence is examined and cross-examined by lawyers. You too may be amused how a lawyer will extensively question a psychologist about his criticism of the title of a peer-reviewed journal article instead of asking about his clinical opinion about a client (true story). Together you may gain valuable experience for those rare times that you may find yourself in those cramped witness boxes explaining a client you vaguely remember assessing several years ago.

RECENTLY DEFENDED DISSERTATIONS AND THESES

How Does Programming Effect Recidivism Rates of Sexual Offenders?

By: N. Bolduc, F. Kane¹ Ph. D., G. Maillet², & J. Looman², Ph. D

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St. Lawrence College

The Regional Treatment Centre Ontario (RTC Ont) is a therapeutic community environment for men who are federally convicted of a sexual offence. The RTC (Ont) operates a residential sexual offender treatment program (SOTP) that is delivered in a group and individual therapy format. Cognitive-behavioural therapy (CBT) is employed in a group setting using techniques such as cognitive restructuring, challenging cognitive distortions, role playing, supportive psychotherapy, and empathy enhancement (Looman, Abracen, & Nicholaichuk, 2000). In recent literature, CBT has been shown to lower recidivism rates of sexual offenders upon their release into the community. The Correctional Services of Canada provides three levels of treatment to sexual offenders while in prison: high intensity (RTC Ont), moderate intensity, and maintenance programming. After an intensive literature review, this researcher found no other study that has examined the effectiveness of receiving multiple sexual offender treatment programs on lowering recidivism rates upon release. By examining this void in the literature, it is hypothesized that sexual offenders, who receive multiple interventions/treatments targeting sexual offender issues, will have lower recidivism rates than sexual offenders who only receive one sexual offender program. The results from this study demonstrate that participation in a high and moderate intensity sexual offender treatment program produces significant decreases in the rates of sexual/violent reoffending. The outcome of this study is to provide more information to support future alignment of resources that could maximize treatment outcomes for sexual offenders prior to their release into the community.

RECENTLY DEFENDED DISSERTATIONS AND THESES Con't

The Development of the Positive Self Change Framework of Crime Desistance

By: Karen K. Parhar

University of Saskatchewan

The utility of crime desistance research for community management and rehabilitation of offenders is evident; however this field of research is relatively recent. Theoretical research on crime desistance has varied over the years, although generally the field has been divided between perspectives focusing on either social or psychological causes. In addition, much of the research is plagued with methodological problems, such as an abundance of retrospective studies and unrepresentative offender samples. The present study proposes a framework of crime desistance that integrates the social and psychological perspectives and is compatible with current views on offender rehabilitation. This framework entitled, the Positive Self Change (PSC) framework, generally states that crime occurs and is maintained when basic psychological needs are not being satisfied. When deprived needs causing crime are satisfied in an optimal manner, autonomous motivation to desist and reductions in crime-related factors will follow, resulting in crime desistance. The goal of the study is to develop and provide some support for this framework of crime desistance and compare it to the currently dominating theory of crime desistance, the revised age-graded informal social control (AGISC) theory. Two studies were conducted utilizing a multimethod approach. The first quantitative study prospectively tested whether aspects of the PSC framework are supported by determining whether the framework can predict crime desistance in 60 released offenders after a 7-year follow-up and compare it to the currently dominating explanation of crime desistance. The second study is a prospective case study of 3 federal offenders during their first few months of release from federal incarceration. Results provide support for the development of the PSC framework. Protective strategies, motivation and criminogenic risk factors significantly predicted crime desistance after 7 years. In addition, the PSC framework significantly added to the prediction of the AGISC theory for 2 of the 4 crime desistance outcome measures. Study 2 also provided some support and explanation to the findings of study 1. The final section presents a discussion of the overall conclusions, implications of the results, limitations and future directions.

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Non-Suicidal Self-Injury in Federally Sentenced Women: Prevalence, Nature, Motivations, and Pathways

By: Jenelle Power

Carleton University

Non-suicidal self-injury (NSSI) is defined as deliberate bodily harm or disfigurement without suicidal intent and for purposes not socially sanctioned, such as cutting, ligature use, burning, and head banging. Self-injurious behaviour (SIB) encompasses self-injury in which suicidal intent is unknown. Two studies were conducted to explore NSSI among women who are in-custody in Canadian federal correctional institutions: 1) a field study ($n = 150$) which included a quantitative, questionnaire-based component that assessed factors hypothesized to be correlated with NSSI and a qualitative component that used in-person, semi-structured interviews to explore the history of NSSI and suicide attempts in-depth; and 2) an archival study with a randomized, representative sample ($n = 400$) that examined NSSI and suicide attempts within the Correctional Service of Canada's (CSC's) women's institutions. Twenty-four percent of women in the field study had a history of NSSI and 38% of women in the archival study had a history of SIB. Among the women who had a history of self-injury, 80%-93% of the women first engaged in NSSI prior to being admitted to a CSC institution and approximately two-thirds of these women did not self-injure after being admitted. During a one-year study period, 15 of the 400 women in the archival study engaged in a total of 29 SIB incidents. Women with a history of NSSI had increased risk for suicide attempts, although this behaviour is distinct from NSSI. Women who had a history of NSSI scored significantly higher on a number of variables, including depression, childhood abuse, impulsivity, aggression, and suicide attempts. The most common reason women engaged in NSSI was to cope with negative emotions, and the most common type of NSSI that women engaged in was cutting, although many motivations and methods were reported. Incarceration was not found to have a significant impact on NSSI. Federally sentenced women are at a high risk for NSSI and effective treatment should consider their unique motivations for engaging in this behaviour.

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RECENTLY COMPLETED DISSERTATIONS AND THESES Con't

The use of Stimulus Control, Sleep Restriction Therapy, and Sleep Hygiene Education to Increase Perceived Quality of Life in Inmates with Schizophrenia

By: Jennifer Smith

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According to King (2001), as many as 90% of people with schizophrenia experience insomnia at some point in their lives. Studies have shown numerous debilitating results of poor sleep, in particular poor memory, shorter attention span, and reduced daytime alertness (Forest et al., 2007). The consensus of front-line staff at the correctional treatment centre where the current study took place is that inmates with schizophrenia would benefit both mentally and physically from quality sleep throughout the night. If inmates improve overall sleep hygiene and become more attentive and alert, perhaps they will attain an increased benefit from other treatment programs, both while in treatment and over time. Current research has shown that sleep hygiene education (King et al., 2001), stimulus control therapy (Yang & Spielman, 1999), as well as sleep restriction therapy (Bliwise, 1995) have shown to be effective with poor sleepers. The present eight-week study was conducted at this institution in 2010 in order to ascertain whether these therapies in group counseling sessions will decrease the six participants' sleep latency (SL); frequency of awakenings (FA); and duration of awakenings (DA), and increase total sleep time (TST) and sleep efficiency (SE). It is also hypothesized that an improvement in sleep quality will produce an improvement in perceived quality of life. At week six of the current study, statistically significant results were attained for the global score of the Pittsburgh Sleep Quality Index (Buysse, 1989) at post testing ($t(5) = 3.32, p < 0.02$). Additionally, four out of five subscales of an abbreviated Quality of Life Enjoyment and Satisfaction Questionnaire (Ristner et al., 2005) improved at post testing, with statistical significance on the physical health subscale ($t(5) = 3.35, p < 0.02$). Perhaps the most interesting finding from pre to post testing was the decrease in use of sleep medication. Three of the six participants took decreased amounts, or completely stopped taking sleep medication, yet sleep parameters continued to improve across these group members. Further research may determine if higher quality of sleep correlates with higher post-test scores in other treatment programs compared to those with poor sleep quality.

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SPECIAL FEATURE

The Principles of Effective Correctional Treatment also Apply to Community Supervision: A Re-Examination of Bonta et al.'s 2008 Meta-Analysis.

By: Guy Bourgon

Public Safety Canada

Many correctional jurisdictions are grappling with the challenges of managing large criminal offender populations. These challenges are particularly evident in the United States where America has the highest incarceration rate in the world (756 per 100,000; Walmsley, 2009) and a probation and parole population exceeding five million (Glaze & Palla, 2005). Faced with burgeoning prison populations that strain the financial resources of many states, resources are being redirected to community re-entry and supervision programs. Such pressures have resulted in many jurisdictions re-thinking the balance between custody and community supervision.

Community supervision is viewed as having positive benefits by minimizing the criminogenic effects of imprisonment and facilitating the community integration of offenders (Gibbons & Rosecrance, 2005). However, the evidence on the effectiveness of community supervision questions the association of supervision with reduced offender recidivism. In a review of 15 studies, Bonta, Rugge, Scott, Bourgon and Yessine (2008) extracted 26 effect sizes comparing some form of community supervision with an alternative criminal sanction (e.g., prison sentence, fine) on over 53,000 offenders. They found an average effect size (Φ) to be .022 (95% CI, .014 to .030) for offenders under community supervision, translating into approximately a 2% difference in recidivism. With respect to violent recidivism, there was no decrease in recidivism associated with community supervision, ($\Phi = .004$; 95%CI, -.008 to .016). These findings are in sharp contrast to the more positive results found in reviews of the offender rehabilitation literature.

Over the past 30 years, research on offender treatment has shown that rehabilitative efforts can reduce re-offending (Andrews & Bonta, 2010; Hanson, Bourgon, Helmus, & Hodgson., 2009; Lipsey, 1995; Lösel, 1995). This "What Works" body of evidence has demonstrated that rehabilitative efforts are not all equal: interventions can maximize their effectiveness via adherence to the principles of effective interventions (the Risk-Need-Responsivity (RNR) model of correctional treatment; Andrews & Bonta, 2010).

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There are currently 17 principles represented in the model, however, three of these principles have been at the core since 1990 (Andrews et al., 1990). They are the *Risk principle* (match the level of service to the offender's level of risk; provide intensive services to higher risk clients and minimal services to lower risk clients), the *Need principle* (target criminogenic needs or the dynamic risk factors functionally related to criminal behavior such as procriminal attitudes and substance abuse), and the *Responsivity principle* (match the style and mode of intervention to the abilities, motivation and learning style of the offender; cognitive-behavioural interventions are generally the most effective with offenders).

In their most recent review, Andrews and Bonta (2010), demonstrated that adherence to these three principles mediate the effectiveness of rehabilitative efforts with a step-wise reduction in recidivism with increases in adherence. Specifically, non-adherence to the three principles was actually associated with a small increase in recidivism ($r = -0.02$, $k = 124$). When treatment adhered to at least one of the principles, there was a small decrease in recidivism ($r = 0.03$, $k = 106$). Larger decreases were observed with increased adherence to the RNR principles with adherence to two principles, ($r = 0.17$, $k = 84$) and three principles ($r = 0.25$, $k = 60$).

Although the vast majority of this evidence has been gleaned from studies examining formal treatment programs that are typically group-based, it is reasonable to expect that these principles are also relevant in the case of the supervision of offenders in the community. In order to examine this question, the present study re-examined the data from Bonta et al.'s (2008) meta-analysis considering the degree to which the community supervision process adhered to the RNR principles.

Method

Studies reviewed

Only studies included in the meta-analysis by Bonta and colleagues (2008) were examined. Although not an exhaustive search, Bonta et al. (2008) identified the studies that met these specific requirements: 1) parolees needed to be compared with non-parolees; 2) probation supervision could be compared along a less-more continuum, where short periods of probation were compared to longer ones or intensive probation supervision was compared to routine supervision; 3) recidivism information needed to be reported in a way that would allow the authors to calculate an effect size; and 4) the study had to be published post-1978. A total of 26 effect sizes (Φ) were extracted and used in the present analysis.

Adherence to each of the three principles was coded based on the study's description of the policies, service, and/or rationale of the community supervision group. It is recognized that rating adherence in this manner is an 'educated guess' and is limited to the overall general design of the community supervision group under investigation. As such, adherence ratings are considered to be reflective of the congruence of the principles with the policies surrounding community supervision. It is recognized that there can be a substantial disconnect between the correctional policy and the actual implementation and delivery of service "behind closed doors" (see Bonta, Rugge, Scott, Bourgon, & Yessine, 2008; Bourgon, Bonta, Rugge, & Gutierrez, 2010).

Results & Discussion

Mean effects sizes and their respective confidence intervals were calculated based on the number of RNR principles that the community supervision group adhered to. The results are presented in Table 1. In general, the results indicate that the effectiveness of community supervision to reduce recidivism improved as the adherence to RNR principles increased. Adherence to none or one of the principles was associated with minimal to no effect ($\Phi = .017$ and $\Phi = -.009$ respectively) whereas adherence to two or all three principles were associated with reductions in re-offending ($\Phi = .078$ and $\Phi = .092$ respectively). It is worthy to note that 73% of the comparisons (i.e., 19 of the 26 effect sizes) were rated as adhering to none or only one RNR principle.

<i>Policy adherence to RNR principles</i>	Φ	95% CI		<i>k</i>	<i>N</i>
Overall	.022	.014	.030	26	53,930
0 principles	.017	.008	.026	7	47,885
1 principle	-.009	-.047	.029	12	2,716
2 principles	.078	.039	.118	5	2,415
3 principles	.092	.065	.158	2	914

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These results parallel other meta-analytic studies (French & Gendreau, 2006; Hanson et al., 2009; Landenberger & Lipsey, 2005; Lowenkamp, Latessa, & Smith, 2006; Wilson, Bouffard, & Mackenzie, 2005) examining the effectiveness of correctional interventions and the importance of adherence to the RNR principles. The evidence accumulated to date has illustrated the critical importance of these principles across different types or modes of interventions/services and for all types of offenders. With such a foundation of empirical evidence, it is suggested that any future evaluations of correctional interventions should include clear and concrete information detailing how the intervention adheres to each of the principles. It is in this fashion that we can then begin to further our understanding of how to design, implement, and deliver effective correctional services.

However, it is recognized that rating adherence to RNR principles based strictly on what is written in the article is a rather crude process. In spite of this "best guess" as to whether or not the community supervision process under investigation adhered to each of the principles, this process can yield useful cumulative knowledge regarding the generalizability of the principles. Nonetheless, the challenge now is the practical translation of this empirical general knowledge to policy and practices of large criminal justice agencies and the everyday work of criminal justice professionals. The recent work of Taxman and Sachwald (2010) examining organizational factors mediating effective implementation of evidence-based practices, illustrates how much more we need to know to aid criminal justice agencies in adopting evidence-based practices. In addition, researchers in Canada (Bourgon, et al., 2010) as well as a group in the UK (Raynor, Ugwudike, & Vanstone, 2010) have focussed their attention on specific RNR-based staff skills and behaviours "behind closed doors" to improve the effectiveness of community supervision.

Today, some 20 years after the introduction of the RNR principles of effective correctional treatment, the accumulated empirical evidence cannot be ignored. This re-examination of the meta-analysis conducted by Bonta et al. (2008) on the effectiveness of community supervision illustrates the importance of evaluating the adherence of correctional services to the principles of risk, need and responsivity in order to better understand and identify what works and what does not.

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SPECIAL FEATURE

Correctional Psychology in Bermuda: A Snapshot

By: Jean Folsom

How do you adapt from working in one country's correctional system to that of another's? In what ways can you transplant what you already know? What do you have to set aside, give up or learn anew? After working for many years as a psychologist in the Canadian federal correctional system, I am now working in the Bermuda Department of Corrections. I found that I needed to answer these questions very quickly.

The first and readily apparent difference is that the Bermuda Department of Corrections is small. On any given day there are about 270 offenders, including those who are waiting to go to trial or for sentencing. They are housed in three facilities – one of which houses medium and maximum security male offenders, a second for the minimum security men and a third that houses the women offenders and young offenders.

Having such a small correctional system affects many aspects of its functioning. It is hard to develop a wide range of programs to address the criminogenic needs of the offender population. Therefore, programs must be acquired from other countries and adapted to the Bermudian offender population. Not surprisingly, the selection and implementation of such programs has met with varying success. The small offender population also creates difficulties in obtaining a critical mass to run any particular program.

A smaller correctional services means that some things that we take for granted in larger organizations may not exist. For example, there is no offender electronic database, no research department and no IT department. It also means that, because of the small numbers, all offenders on the island are encompassed within the same system – men, women and young offenders, as well as those awaiting trial or sentencing. This leads to a great amount of diversity among the clients served by psychologists.

The women offender population is so small that there is no special women-centred staff training or programs. As well, unlike Canada, no male staff work in the women's living unit. Also, it is written into the Bermuda's Prison Act, 1979, that women offenders may keep their babies with them until the child turns one. It is generally taken for granted that a mother will keep her child with her and there is no big fuss about it. She lives on the regular range in a slightly larger cell. The baby's necessities are provided by the Department of Corrections. Few problems have arisen in my experience, with the one baby that has been born since I've been here.

Another issue related to a small country and a small correctional population is the close inter-relationship between the offender population, the staff and the community. Among Bermudians, everyone knows who is incarcerated or is related to them or has community ties with them. As you can imagine, this can be either positive or not-so-positive, particularly as it relates to gang activity and gang exit strategies. Additionally, the incarceration of Bermudian and Canadian women who have been caught trying to smuggle drugs into Bermuda is a growing and troubling concern.

The provision of psychological services in Bermuda's Department of Corrections has been unstable in recent years. While there are three funded positions, they have typically not all been filled at the same time. Due to the lack of Bermudian psychologists interested in working within corrections, psychologists have always been recruited from off the island, with various expertise and approaches and have usually stayed for terms of 2-3 years. This has led to limited continuity in the provision of services. Searching through old file cabinets alone provides glimpses of some of the past psychological services – a Rorschach Test; a Level of Service Inventory, Revised; WAIS-IV, HCR-20, PCL-R as well as manuals for a wide variety of programs such as cognitive skills, substance abuse and anger management. While there are challenges to face, there are many opportunities for innovation.

One advantage of working within a small correctional system is that it is much easier for psychologists to access senior managers, including the Commissioner. The psychologists are known to all of the managers as well as the Minister of Justice. This allows for correctional psychologists to more readily meet with senior managers, including the Commissioner, and therefore to have a bigger impact on the organization than they might have in a larger correctional system.

In spite of the differences, there are many similarities between the Canadian and Bermudian Department of Corrections. Offenders are serving sentences for a wide range of crimes that would be familiar to any Canadian correctional worker – theft, assault, robbery, murder, sexual offenses, etc.

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Although there is no system of day parole or half-way houses, offenders reach their full parole date at one-third of their sentence and can typically leave without parole after completing two-thirds of their sentences. This date, however, can be delayed as a punishment for institutional infractions. Psychologists are called upon to deal with issues that are typical of any correctional environment such as completing risk and needs assessments; supervising or facilitating group programs; responding to crisis and to dealing with long-term mental health problems among offenders.

It is now six months since I have left Canada and started working in Bermuda. Living and working in a new country has been a rewarding and worthwhile experience for me. I would highly recommend it to those who may be considering expanding their life and work knowledge and experience. The exposure to new experiences provides an opportunity to rethink the practice of correctional psychology. You will return to Canada with a new appreciation of your home country as well as a wealth of new ideas from your temporarily adopted one. I am looking forward to NACCJPC and to seeing many of my colleagues there to share more than just this short snapshot of the practice of correctional psychology in Bermuda.

SPECIAL FEATURE

Measuring Socially Desirable Responding within a Forensic Context: Response Style or Criminal Proclivity

Andrew L. Gray¹, B.A.H., B.S.T., & Jeremy F. Mills, Ph.D., C. Psych., Carleton University

Introduction

Socially desirable responding (SDR) has been defined as “the tendency to give overly positive self-descriptions” (Paulhus, 2002, p. 50). It consists of two underlying constructs or factors: Impression Management (IM) and Self-Deception Enhancement (SDE). A two-factor model of SDR was first proposed by Wiggins (1964) in which two distinct factors, *Alpha* and *Gamma*, represented a “non-endorsement of pathology,” and the “endorsement of desirable but infrequently possessed traits” (p. 559), respectively. These scales would later be regarded as representing self-deception and impression management (Paulhus, 1984).

Stand-alone measures of SDR have become prominent within forensic settings as they serve as an adjunct for clinicians administering self-report questionnaires that may target specific content yet do not incorporate their own validity indices. Notwithstanding earlier support for measuring SDR in forensic settings (Kroner & Weekes, 1996), an intriguing finding began to emerge within the research literature. A significant inverse relationship, as evidenced by both correlational and group comparison analyses, between measures of SDR and crime related risk/outcome became the prominent finding within the literature, which generally speaking, did not appear to be exclusive to any single measure of SDR (Kroner, Mills, Gray, & Talbert, 2011; Mills & Kroner, 2005). Although somewhat counter-intuitive, these results taken as a whole suggested that offenders scoring lower on measures of SDR, particularly IM, were significantly more criminally oriented in comparison to offenders who scored higher on measures of SDR.

Therefore, the purpose of the current research synthesis was to address whether the common measures of SDR administered within forensic assessments are significantly confounded by risk related content.

Procedure

Electronic databases such as PsycINFO, PsycARTICLES, ProQuest, Social Sciences Citation Index, Scholars Portal, and relevant journals (e.g., *Criminal Justice and Behavior*, *Law and Human Behavior*) were searched using combinations of key terms reflective of social desirability, measures of social desirability, and standardized risk assessment measures. Studies included were those that utilized a forensic sample (e.g., federal offenders, mentally disordered offenders, etc.) and assessed risk by way of validated risk assessment measures (e.g., the Statistical Information on Recidivism Scale [SIR; Nuffield, 1982]). Moreover, the measurement of psychopathy (i.e., PCL-R; Hare, 2003) was included as a proxy measure of criminal risk.

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As outlined by Rosenthal (1991), an effect size statistic (Pearson r) was calculated for each study based on reported test statistics such as F , t , χ^2 , and Pearson's r s. All calculated correlations were then converted into a Fisher Z_r value. The calculated Fisher Z_r values were then combined and weighted by their respective sample sizes to produce a mean weighted Z^+ value for each risk assessment measure. To test the homogeneity of the combined studies, a Q statistic (Hedges & Olkin, 1985) was calculated. Significance was determined for each variable by calculating both a z statistic and the 95% confidence intervals using their respective mean weighted Z^+ value. To address the risk of sampling bias, the *fail-safe N* (Lipsey & Wilson, 2001) was calculated for each significant mean weighted effect size. This calculation served as an estimate of the number of samples or null effect sizes required to reduce the observed mean weighted effect size to that of a specified criterion level; in this case $-.01$.

Results

A total of 17 mean weighted effect sizes were calculated based on 31 independent samples and are presented in Table 1. Not surprisingly, a moderate and significant ($p < .001$) inverse association was found between the IM scale of the BIDR and both the SIR ($Z^+ = -.34$, $CI_{Z^+} = -.40$ to $-.27$) and Factor 2 of the PCL/PCL-R/PCL-YV ($Z^+ = -.36$, $CI_{Z^+} = -.45$ to $-.28$). Fail-safe analyses indicated that an additional 264 and 140 null effect sizes would be required to reduce the association between the IM scale and the SIR, and the IM scale and Factor 2 of the PCL/PCL-R to $-.01$. The SDE scale failed to produce any meaningful association with the SIR ($Z^+ = -.06$, $CI_{Z^+} = -.13$ to $.02$); however, there was a significant association ($p < .05$) found between the SDE scale and the PCL/PCL-R total score ($Z^+ = -.08$, $CI_{Z^+} = -.15$ to $.00$) and Factor 2 score ($Z^+ = -.22$, $CI_{Z^+} = -.32$ to $-.13$).

Further, as displayed within Table 1, Factor 1 of the Psychopathy Checklists was found to be unrelated to SDR across all of the self-report questionnaires (with the exception of the EPQ/EPQ-R Lie scale), whereas Factor 2 was found to be significantly negatively related to all of the self-report SDR measures. Of these remaining associations, the EPQ/EPQ-R lie scale produced the largest significant inverse association with Factor 2 of the PCL/PCL-R ($Z^+ = -.25$, $CI_{Z^+} = -.32$ to $-.17$) in contrast to the L and K scales of the MMPI ($Z^+ = -.07$, $CI_{Z^+} = -.14$ to $-.01$ and $Z^+ = -.16$, $CI_{Z^+} = -.23$ to $-.09$, respectively). Overall, studies that employed the PCL instruments displayed a very similar pattern to the significant inverse associations found for the SIR scale; this was particularly evident when the Factor 2 scores were analyzed.

While the lack of association between Factor 1 and SDR may appear counter-intuitive given the assertion that items within it (i.e., Item 4, Pathological Lying; Item 5, Conning/Manipulative) are reflective of impression management (Hare, 2003, p. 31), in keeping with the current results, however, this finding was not surprising. Recent meta-analytic research has found that the psychopathic personality features encompassed within Factor 1 of the PCL/PCL-R tend to be poor predictors of recidivism, particularly violent recidivism, in comparison to items within Factor 2 (Yang, Wong, & Coid, 2010). Hence, this lack of association between SDR and Factor 1 may be in relation to the psychopathic personality features not being efficacious as a proxy measure of criminal risk.

Discussion

Mills and Kroner (2005) outlined three major concerns when incorporating SDR (as measured by the BIDR/PDS) within forensic assessment. First, caution is warranted when interpreting the results of SDR within forensic settings, particularly if clinicians are relying on IM as a validity index. In doing so, the clinician may disregard self-report from offenders scoring high on IM when in fact the offender may be answering honestly. Second, relying on high IM scores to remove offenders perceived as providing inaccurate responses may result in systematically removing low or high risk offenders from the analysis depending which cut-off scores are used (i.e., > 12 for "faking good" or < 1 for "faking bad"; Paulhus, 1998). Assessing change in pre-post treatment performance is one situation where this may be particularly evident as risk could be systematically removed from the analyses. Third, those researchers who use the IM scale for selection criteria when developing self-report inventories for use within forensic settings may exclude items with risk-related content in light of their relationship with SDR or IM.

In conclusion, these empirical results of the negative relationship between SDR, particularly IM, and assessed criminal risk indicates that the measurement of SDR within forensic assessment is confounded by risk related content and may therefore lead to a potential systematic bias.

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While further study is required concerning this relationship, clinicians working with forensic populations should be aware of this possible confound when interpreting psychometric instruments designed to measure SDR.

Table 1
Mean Weighted Effect Sizes between Socially Desirable Responding (SDR) and Assessed Risk for General Recidivism (SIR) and Psychopathy

Risk Measure	k	N	Z*	95% CI	z	Q	Fail-safe N
Balanced Inventory of Desirable Responding/Paulhus Deception Scales							
Impression management							
SIR	8	959	-.34	-.40, -.27	10.27**	11.22	264
PCL/PCL-R/PCL-YV	8	1,062	-.21	-.27, -.15	6.86**	7.08	160
Factor 1	4	487	-.04	-.13, .05	0.93	1.72	-
Factor 2	4	487	-.36	-.45, -.28	7.94**	2.72	140
Self-deception enhancement							
SIR	5	686	-.06	-.13, .02	1.50	2.89	-
PCL/PCL-R	4	687	-.08	-.15, .00	2.07*	5.51	28
Factor 1	3	436	.00	-.10, .09	0.02	0.04	-
Factor 2	3	436	-.22	-.32, -.13	4.61**	3.17	63
Eysenck Personality Questionnaire/Eysenck Personality Questionnaire-Revised							
Lie scale							
PCL/PCL-R	8	1,035	-.19	-.25, -.13	6.04**	8.00	144
Factor 1	5	701	-.10	-.17, -.02	2.49*	4.29	45
Factor 2	5	701	-.25	-.32, -.17	6.46**	5.87	120
Minnesota Multiphasic Personality Inventory							
L scale							
PCL/PCL-R	8	885	.02	-.05, .09	0.58	11.01	-
Factor 1	6	809	.06	-.01, .13	1.75	2.87	-
Factor 2	6	809	-.07	-.14, -.01	2.10*	6.21	36
K Scale							
PCL/PCL-R	8	885	-.06	-.12, .01	1.63	7.48	-
Factor 1	6	809	.07	.00, .13	1.83	2.67	-
Factor 2	6	809	-.16	-.23, -.09	4.58**	1.53	90

Note. k = number of effect sizes; N = total sample size; Z* = mean weighted effect size; CI = 95% confidence interval; z = significance of Z*; Q = test of homogeneity. Fail-safe N criterion effect size level = .01. SIR = Statistical Information on Recidivism (Nuffield, 1982); PCL = Psychopathy Checklist (Hare, 1980); PCL-R = Psychopathy Checklist-Revised (Hare, 2003); PCL-YV = Psychopathy Checklist-Youth Version (Forth, Kosson, & Hare, 2003).
* p < .05, ** p < .001.

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*For a list of the studies included in the meta-analysis please contact the first author.

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SPECIAL FEATURE

Perspectives on the Collaboration between the Criminal Justice System and Forensic Acute Assessment and Treatment Service Providers at Alberta Hospital Edmonton

Richard Soon-Nann Wong, University of Alberta

The field of forensic psychiatry depends on an effective, efficient, and collaborative relationship between health care providers and the Criminal Justice System (Wettstein, 2005). Forensic psychiatry consists of an interdisciplinary team working together to serve the requirements of the Criminal Justice System to ensure that mentally ill individuals who have come into conflict with the law are treated fairly, with dignity, and with respect (Keilitz & Roesch, 1992). It is the responsibility of forensic services and the Criminal Justice System (CJS) to collectively ensure mentally ill individuals are not a potential harm to themselves or society (Canadian Mental Health Association, 2011). Rapoport (2005) found that different professions and professionals within the forensic system bring diverse opinions and interpretations to produce enhanced, better grounded, and scientifically significant end results in achieving optimal collaborative performance.

According to British Columbia Mental Health and Addiction Services (2006) there are 25 forensic psychiatric centers across Canada; one being the Helen Henley Forensic Pavilion at Alberta Hospital Edmonton (AHE). This facility provides in-patient services to the Northern Alberta Psychiatric Services in Edmonton, AB. AHE provides assessment and treatment services for those who are found Unfit to Stand Trial and those deemed Not Criminally Responsible due to a mental disorder (NCR-MD) under the Criminal Code of Canada. In addition, AHE provides services to young offenders under the Youth Criminal Justice Act, sex offenders serving provincial or federal sentences, patients on pre-trial assessments, and occasional Dangerous Offender assessments (Alberta Health Services, 2009). Forensic Annual Reports from April 2005 to March 2010 (Forensic Psychiatry Services, 2005; 2006; 2007; 2008; 2009) indicate a total of 1,229 admissions into AHE with an average of 245.8 per year. A constant flow of clients being admitted through the system brings more assessments and numerous interactions between the hospital and the CJS systems (Keilitz & Roesch, 1992).

Wettstein (2005) has acknowledged that undertaking in the forensic setting is complicated with challenges that must be continuously overcome to serve the needs of all stake holders. Quality improvement (QI) in the field of forensic psychiatry can aid in providing innovative ideas to the needs of disparate systems (Wettstein, 2005). To this end, a sample of 21 forensic mental health professionals from AHE (13, 62%) and CJS professionals (8, 38%) participated voluntarily in a survey study to examine and improve the quality of their collaborative relationship (Wong, 2011). Registered nurses, social workers, psychologists, psychiatrists, a unit supervisor, and the clinical director from AHE's Forensic Psychiatry Acute Assessment and Treatment teams were selected to participate. From the time of a patient's admission to AHE, the interdisciplinary team interacts directly and indirectly with the CJS by providing court-ordered specialized psychiatric assessments and/or intensive treatment for the acutely ill (Alberta Health Services, 2009).

Defence lawyers, crown prosecutors, Judges, and the Alberta Board of Review (ABR) represent stakeholders and were invited to represent their respective areas in this study (Wong, 2011). Defence counsel ensure their clients are treated fairly by the CJS and appropriately by AHE during the assessment and treatment processes. Crown prosecutors represent the interests of the public under the Attorney General's Criminal Justice Division. They consider the assessment findings from AHE in order to exercise fair and just consequences for the accused (Government of Alberta, 2006). Judges and the ABR ultimately decide the outcomes of patients' cases and do so balancing the patients and the safety of society (Government of Alberta, 2011). After trial and assessment results have been obtained and presented to the ABR, case specific decisions can be made. These can range from further detention in hospital, conditional sentences, or absolute discharges (Criminal Code, 2010).

Face to face interviews and email surveys asked participants open-ended questions that queried if the information provided by the other party is clear and understandable to perform designated duties; if the information provided is sufficient to conduct these duties; if the timing of the provided information is appropriate; and what specifically could be improved to help forensic services become more efficient and effective in their current working system. Open ended questions were used for participants to specifically and subjectively comment upon their perspectives. Participants were asked to answer questions to the best extent of their abilities. Results were provided anonymously and the detailed responses are reported in Wong's (2011) unpublished manuscript.

Survey results reported by Wong (2011) provide a snapshot of how two diverse but interdependent systems view each other's contribution to their collective goal. Fundamentally, both systems consider the relationship to be effective and efficient. The information provided to each party is collectively clear and understandable with sufficient amounts of accompanying information. The information is provided in an appropriate and timely manner in order to prepare for legal proceedings.

SPECIAL FEATURE Cont'd

Perspectives on Collaboration Con't

Both sides acknowledge that there are external factors and limited resources that play a part in system weaknesses. With that said, there are some minor improvements that could be undertaken to further improve the effectiveness and efficiency of collaborative practices. It has been suggested that identified areas of concern could be improved with enhanced communication and a deeper appreciation for the accountability of individual professional roles.

Effectively communicating and coordinating information between parties are essential factors in client focused collaborative practices (Suter, Arndt, Arthur, Parboosingh, Taylor, & Deutschlander, 2009). Early studies by Casey and colleagues (1992), found that ineffective communication between different organizations is a common problem in interprofessional working systems. A better understanding of the system from both sides would provide further insight and understanding when conflict arises or protocols about assessment processes are misunderstood (Thomson, Reuland, & Souweine, 2003).

Improved communication would allow both mental health and criminal justice professionals the opportunity to work together to develop a formal policy outlining the process of interaction between parties (Casey et al., 1992). Participants from this study have suggested policies would be beneficial if they were easily accessible to all parties involved; have working checklists about assessment progress; provided a guideline of the assessment process; indicated which forms must be completed (included the forms); included an outline of which information is necessary; and was easily interpreted with references to any past contact in the mental health and CJS collectively (Wong, 2011). Policies would only be of value if both parties were accountable in abiding to the set protocols.

In the same way, improvements in communication would also improve the timeliness of transferred information (Thomson et al., 2003). The immediate access of relevant information to and from both parties would be extremely beneficial for both mental health and CJS professionals to complete their designated duties in a timely and efficient manner (Lamberti & Weisman, 2004; Thomson et al., 2003). Quinsey (2009) has concluded that technological innovations will assist in gathering, organizing, and distributing information. One such innovation could include the suggested factors in a formal policy outlined previously. This could lead to the possibility of patients going to court faster, and not depriving them of personal liberty or timely treatment unnecessarily. It might also save tax payers by providing services for those who need them most (Thomson et al., 2003).

In addition to communication factors, flexibility in appreciating others' disciplines and taking personal accountability in improving one's interprofessional services will aid in advancing forensic collaborative practices (Wettstein, 2005). Wettstein (2005) has concluded that mental health and CJS professionals have commonly had difficulty accepting and recognizing deficiencies in their services. This stance has hindered potential improvements in the field. Externally directive quality evaluations have traditionally led to perceptions of threatened professional independence. This in turn typically leads toward opposition to change. Similar to participants' views that a purely clinical or legal hierarchy proves inefficient, broader open-minded perspectives taken from expert domains of the CJS and interdisciplinary teams within hospitals may contribute suggestions and solutions to perceived problems in the forensic system (Casey et al., 1992; Wong, 2011).

Participants are playing their role in attempting to improve the quality of their collaborative services reflecting on their system. Identifying possible areas of improvement and providing suggestions to enhance collaborative performance has presented further insight for CJS and forensic health professionals. Innovations in technology will possibly aid in preventing communication barriers between organizations with the potential to enhance professional contributions. Although personal flexibility and accountability will facilitate quality improvement, there are many external factors that are out of internal professionals' control. More resources need to be allocated by governing bodies and stakeholders to improve the interactions of mental health and CJS professionals to continuously improve on the quality of their collaborative efforts. If a broader perspective at a national level can be determined, the importance of effective and efficient forensic collaboration may help external organizations appreciate what the field has achieved to the present time. It may then bring further light to the potential of quality services that the field of forensic psychiatry can attain with appropriate allocated resources. Such contributions may lead to the possibility that enhance collaborative performance together in ways that will save time and money, further protect the public, and limit the restrictions on patient freedoms as much as possible.

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SPECIAL FEATURE Cont'd

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**DEADLINE FOR THE OCTOBER 2011 EDITION IS
AUGUST 19, 2011**

SPECIAL FEATURE

National Associations Active in Criminal Justice (NAACJ)
Annual Report: 2010-2011
By: J. Stephen Wormith, Ph.D.
CPA representative to NAACJ

During the 2010-2011 year, the undersigned continued to represent the Canadian Psychological Association on the National Associations Active in Criminal Justice (NAACJ), which is an 'umbrella' organization for various voluntary sector and professional organizations that are national in scope and have a particular interest in Canada's justice system. NAACJ is funded by an operating grant from federal Ministry of Public Safety and Emergency Preparedness and currently consists of 18 organizations.

NAACJ and its member organizations had an active year in 2010-11, with a couple of activities being particularly noteworthy. In February, 2011, it sponsored, along with the Departments of Justice and Public Safety Canada, a one day symposium entitled "Community Empowerment through Social Enterprise." The key concept is that nonprofit organizations can mobilize into successful business operations. This may sound like an oxymoron, but interesting examples are cropping up across the US and Canada. None is more impressive than the Safer Foundation of Chicago. Its President and CEO, Dianne Williams, describes its impact on recidivism, a 26% lower rate than the state norm, by employing 'what works' and empirically based program design and evaluation. The Safer Foundation is one of the largest not-for-profit providers of employment placement and job readiness training exclusively targeting people with criminal records in the US. It also has a contract with the Illinois Department of Corrections to manage two large transition centres (N = 550).

Social enterprise is also an emerging concept in Canada. David LePage is spearheading Enterprising Non-Profit (ENP), an organization that supports the development and growth of nonprofit social enterprise in Canada by providing grants, technical assistance and other resources. Its mission is to work with other organizations to create an enabling environment for social enterprise across Canada. Interested readers are referred to: www.enterprisingnonprofits.ca

Secondly, with assistance from Public Safety Canada, NAACJ embarked on a fundamental review of its relationship with government, particularly the Correctional Service of Canada (CSC). Although joint discussions have been held in the past concerning the sometimes delicate relationship between our collection of NGOs (consisting of offender advocacy groups and professional associations) and the federal government justice interests (Justice Canada, Public Safety Canada, and CSC), this was the first detailed and systematic review in recent memory. An external consulting firm (One World Inc.) was contracted to lead and coordinate the exercise, which spanned three days of meetings over a two month period. Employing an acquisitive learning procedure called Appreciative Inquiry, which draws on positive psychology and promotes a cooperative search for the best in organizations (see Cooperrider, D. L., Sorenson, P. F., Jr., Whitney, D., & Yaeger, T. F. (Eds.). (1999). *Appreciative inquiry: Rethinking human organization toward a positive theory of change*. Champaign, IL: Stupes.), members hammered out a number of strategic themes for NAACJ: enhance public profile; engage members; develop priorities; and conduct action planning. A 'statement of possibility,' however, proved to be more elusive as member organizations wrestled with the concept of NAACJ being a network of diverse organizations, which share many values pertaining to justice in Canada, but has no mandate to speak for the individual member organizations.

Thirdly, with the federal election fast approaching (at least at the time of writing), and justice issues being front and centre, NAACJ has mobilized an information campaign that has focused on various parties' positions on justice matters. While being sensitive to individual organizational independence, as described above, NAACJ believes it has a responsibility in the public interest to lay out the implications of the previous government's "law and order" platform for Canadians. Specifically, the recent Conservative election promise to roll more than 30 previous bills that died with the dissolving of Parliament in March, 2011, into a single omnibus bill, potentially bringing them all into effect with a single vote, deserves national attention.

Finally, issues pertaining to mentally disordered offenders continue to command centre stage in corrections. CPA members may be interested to learn that the Heads of Corrections (federal and provincial) have created a new Federal/Provincial/ Territorial (FPT) working group on mental health (WGMH). The WGMH serves as an advisory body to the Heads of Corrections and was tasked to develop a national corrections mental health strategy for Canada in consultation with the Mental Health Commission of Canada (MHCC). *The Framework for a Corrections Mental Health Strategy for Canada* is the first step towards developing this strategy and is consistent with the goals and principles outlined by the MHCC in their report, "Toward Recovery & Well Being: A Framework for a Mental Health Strategy for Canada." Its focus is to ensure that time in the criminal justice system is viewed as an opportunity to engage individuals with mental health problems, to develop and implement new or already established treatment plans, and to integrate the services received in correctional settings with community-based treatment and follow-up services. The undersigned, along with the executive Director of CPA, Dr. Karen Cohen, have responded affirmatively to an invitation by CSC to participate in upcoming consultations with community stakeholders on the implementation of the aforementioned framework and the management and provision of services to offenders with mental health problems under the responsibility of CSC.

SECTION BUSINESS

CJS Executive Positions

At each Annual Convention Section Business Meeting, the members of your Executive team are elected. Each member serves a specific role. Currently, there is one vacancy in the Executive, however you may run for any position listed, and voting occurs at the Section Business Meeting on Friday, June 3 from 8:00-9:30, 2011. Below is a short description of each position.

CHAIR

(Mark Olver)

Liaise with CPA (e.g., keeping CPA informed of Section activities and respond to information requests on criminal justice issues). Develop and guide objectives set by the Executive. Develop mechanisms for the planning of Section objectives. Chair the annual SBM. Contribute to each *Crime Scene with the View from the Top* column and to *Psynopsis* with an annual article about the Section.

PAST CHAIR

(Jean Folsom)

Be a bastion of sober second thought and assume the duties of Chair in the event of his/her inability to perform his/her duties due to illness or mental defect.

SECRETARY/TREASURER

(Karl Hanson)

Responsible for financial matters and recordings of the Section proceedings (e.g., writing cheques, and serving as corporate memory for the Section). Contribute to *Crime Scene* at least once per year. Prepare a report for circulation prior to next year's SBM on year's accomplishments.

CRIME SCENE EDITORS

(Ainslie Heasman, Leah Todd, and Leslie Helmus)

The *Crime Scene* Editorial Team is responsible for the publication of *Crime Scene*, twice each year (October and May). Production of this newsletter involves solicitation of submissions, review of articles, correspondence related to submissions, revisions, writing the Editors' Note and other components of the newsletter, as well as formatting and distribution of the final product. The Editor(s) position can be designed as you wish: you can take on the task on your own or create an Editorial Team (e.g., Managing Editor, Review Editor, and an Editorial Assistant).

DIRECTOR-AT-LARGE: NAACJ

(Steve Wormith)

Liaise with National Associations Active in Criminal Justice (NAACJ) and maximize the Section's representation at funded meetings. Prepare a report for circulation prior to next year's SBM on year's accomplishments. Contribute to *Crime Scene* at least once per year.

DIRECTOR-AT-LARGE: CLINICAL & TRAINING

(David Simourd)

Identify CJS clinicians (target of 15 CJS members), foster discussion of clinical issues, identify training needs and potential preconference workshops addressing those needs, encourage and develop one symposium on clinical issues for the Annual conference. Contribute to *Crime Scene's* dedicated column by either writing the column or soliciting appropriate pieces from others. Prepare a report for circulation prior to next year's SBM on year's accomplishments.

DIRECTOR-AT-LARGE: POLICE PSYCHOLOGY

(Dorothy Cotton)

Identify CJS members with interests in Police Issues (target 15 members), foster discussion of related issues, encourage and develop one symposium and/or pre-conference workshop on police issues for the CPA annual conference. Contribute to *Crime Scene's* dedicated column by either writing the column or soliciting appropriate pieces from others. Prepare a report for circulation prior to next year's SBM on year's accomplishments.

DIRECTOR-AT-LARGE: PSYCHOLOGY IN THE COURTS

(Garry Fisher)

Identify CJS members with interests in Court Issues (target 15 members), foster discussion of related issues, encourage and develop one symposium and/or pre-conference workshop on court-related issues for the CPA annual conference. Contribute to *Crime Scene's* dedicated column by either writing the column or soliciting appropriate pieces from others. Prepare a report for circulation prior to next year's SBM on year's accomplishments.

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SECTION BUSINESS Con't

CJS Executive Positions Con't

DIRECTOR-AT-LARGE: CONTINUING EDUCATION

(open)

Investigate possible strategies to develop CE credits for the Section, and mutually recognized CE credits with the CJS of Division 18 of APA. Provide a report to the Executive on recommendations, as well as a report for circulation on year's accomplishments. Contribute to at least one *Crime Scene* per year.

DIRECTOR-AT-LARGE: CONFERENCE PROGRAMME

(Leslie Helmus)

Oversee the CJS convention program including reminders for submissions for the next year's conference. Work with DAL's to identify specific pre-conference workshops and symposiums. Oversee evaluation of student posters and respective prizes at the conference. Contribute to at least one *Crime Scene* per year.

DIRECTOR-ATLARGE: WEB COORDINATOR

(Joe Camilleri)

Responsible for maintaining the Section's website in a timely fashion and for liaising with the web staff at CPA. Prepare a report for circulation prior to next year's SBM on year's accomplishments.

RECENT PUBLICATIONS

Camilleri, J. A. (2011). *Tactics to Obtain Sex Scale*. In T. D. Fisher, C. M. Davis, W. L. Yarber, & S. L. Davis (Eds.), *Handbook of Sexuality-Related Measures* (3rd ed., 628-630). Routledge.

Camilleri, J. A. & Quinsey, V. L. (2011). *Appraising the risk of sexual and violent recidivism among intellectually disabled offenders*. *Psychology, Crime, and Law*, 17, 59-74.

The relatively high prevalence and recidivism rates of offenders with intellectual disabilities suggest research on appraising their risk is an important priority. Although research has found good predictive accuracy of available risk assessments with intellectually disabled (ID) offenders, we recommend several ways to improve on them: understanding the theoretical link between intellectual disability and offending may help to identify new risk items; avoiding assessments that require clinical judgment in risk appraisal; developing risk assessments using best practices; and accumulating studies with larger samples from all intellectual disability categories for the purposes of meta-analytic research. To demonstrate an approach to reaching the latter goal, we present new analyses that show the Violence Risk Appraisal Guide (VRAG) has good predictive accuracy with psychiatric patients of lower intelligence.

Davis, K., Fitzsimmons, C. L., & Moore, T. E. (2011). *Improving the Comprehensibility of a Canadian Police Caution on the Right to Silence*. *Journal of Police & Criminal Psychology*, Published online: January 27, 2011.

Modifications to a Canadian police caution on the right to silence were made in an attempt to increase its comprehensibility. University participants were asked to imagine themselves in an arrest and interrogation situation in which they were either innocent or guilty. It was hypothesized that participants who received the modified caution would score significantly higher on measures of comprehension than those who received the standard caution. Results indicated that comprehension was significantly higher among those that received the modified caution, and that those with higher comprehension scores were more likely to exercise their right to silence. These findings suggest that clarifying and standardizing how a detainee's rights are communicated will lead to better comprehension and greater protection against false or coerced confessions.

RECENT PUBLICATIONS Con't

Moore, T. E., & Fitzsimmons, L. (in press). Justice Imperiled: False confessions and the Reid technique. *Criminal Law Quarterly*.

There is now widespread consensus that false confessions are one of the leading causes of wrongful convictions, due partly to the fact that the courts typically attach tremendous importance to them. According to Wigmore the "confession of a crime is usually as much against a man's permanent interests as anything well can be; ... no innocent man can be supposed ordinarily to be willing to risk life, liberty, or property by a false confession. Assuming the confession as an undoubted fact, it carries a persuasion which nothing else does, because a fundamental instinct of human nature teaches each one of us its significance."

Because confessions are statements against interest, they are regarded by the justice system as inherently reliable. Consequently, police, prosecutors, judges, juries, and even defence attorneys are predisposed to infer guilt, based on the confession. In addition to the considerable harm and suffering befalling the accused, additional negative consequences that result from false confessions include the misdirection of resources, diminished public faith in the justice system, and the premature abandonment of an investigation that allows the actual culprit to remain free to commit additional crimes. This paper reviews the interrogation procedure currently in vogue in North America, describes inherent problems with it that compromise the reliability of admissions arising from it, and offers some suggestions for improvement.

Olver, M. E., Stockdale, K. C., & Wormith, J. S. (2011). A meta-analysis of predictors of offender treatment attrition and its relationship to recidivism. *Journal of Consulting and Clinical Psychology*, 79, 6-21.

Objective: The failure of offenders to complete psychological treatment can pose significant concerns, including increased risk for recidivism. Although a large literature identifying predictors of offender treatment attrition has accumulated, there has yet to be a comprehensive quantitative review of this body of work. **Method:** A meta-analysis of the offender treatment literature was conducted to identify predictors of offender treatment attrition and examine the relationship of attrition to recidivism. The review covered 114 published and unpublished studies representing 41,438 offenders. Sex offender and domestic violence programs were also examined separately given their large independent literatures. **Results:** The overall attrition rate was 27.1% across all programs ($k = 96$), 27.6% from sex offender programs ($k = 34$), and 37.8% from domestic violence programs ($k = 35$). Rates increased when preprogram attrition was considered. Several significant predictors emerged and included demographic characteristics (e.g., age, $r_w = -.10$), criminal history and personality variables (e.g., prior offenses, $r_w = .14$, antisocial personality, $r_w = .14$), psychological concerns (e.g., intelligence, $r_w = -.14$) formalized risk assessment measures (e.g., Statistical Information on Recidivism scale, $r_w = .18$), and treatment-related attitudes and behaviors (e.g., motivation, $r_w = -.13$). Results indicated that treatment noncompleters were higher risk offenders and attrition from all programs significantly predicted several recidivism outcomes ranging from $r_w = .08$ to $.23$. **Conclusions:** The clients who stand to benefit the most from treatment (i.e., high risk-needs) are the least likely to complete it. Offender treatment attrition can be managed and clients can be retained through an awareness of, and attention to, key predictors of dropout and adherence to responsivity considerations.

Olver, M. E., & Wong, S. C. P. (2011). A comparison of static and dynamic assessment of sexual offender risk and need in a treatment context. *Criminal Justice and Behavior*, 38, 113-126.

The authors investigated the efficacy of static versus dynamic approaches to risk assessment and the validity of the Risk Principle through comparing treatment changes made by high- versus lower-risk offenders. The investigations were carried out using a sample of 321 treated sex offenders followed up for an average 10 years postrelease. Risk was assessed using the Static 99, and treatment change was assessed using the Violence Risk Scale—Sexual Offender version. Actuarially high-risk/low-change offenders had significantly higher rates of sexual recidivism than similarly high-risk offenders who had demonstrated greater treatment changes. The Static 99 predicted sexual recidivism well among sex offenders with smaller treatment change but demonstrated weaker prediction among offenders with greater treatment change, likely owing, in part, to the static nature of the risk predictors. Implications regarding the dynamic nature of risk and potential utility of incorporating treatment change-related information into sex offender risk assessments are discussed.

RECENT PUBLICATIONS Con't

Olver, M. E., & Barlow, A. A. (2010). Public attitudes towards sex offenders and their relationship to personality traits and demographic characteristics. *Behavioral Sciences & the Law*. 28, 832-849.

The present study examined public attitudes toward the sentencing, treatment, management, and perceived dangerousness of sex offenders. Seventy eight university undergraduates completed a 25-item attitude toward sex offenders survey developed for the present study, along with a five-factor measure of personality (NEO Personality Inventory-Revised), a demographic questionnaire, and the Paulhus Deception Scale, to control for social desirability. While participants most frequently endorsed the belief that sentences were not sufficiently severe, they tended to espouse treatment and risk management alternatives to longer sentences and eschewed exceptionally severe punishments (e.g., surgical castration). Participants estimated high rates of sexual recidivism (59%), although also estimated significantly lower recidivism rates for treated offenders. Results of a principle components analysis suggested that participant attitudes comprised two broad domains: Systems attitudes (e.g., law enforcement, corrections, justice) and Rehabilitative attitudes. Although few demographic differences emerged in participant attitudes, Openness to Experience and Agreeableness each significantly predicted more rehabilitative attitudes, while contrary to expectations, Extraversion was significantly associated with more negative systems-related attitudes. The results provide support that personality traits may be linked toward important social attitudes, including those toward sex offenders.

Rice, M. E. & Harris, G. T. (in press). Is androgen deprivation therapy effective in the treatment of sex offenders? *Psychology, Public Policy, and Law*.

We review the effects of androgen deprivation on the sexual behavior of human males. Although eunuchs have existed in many cultures over the last 4000 years, there is scant detailed and specific information in the historical record about castration status and sexual behavior. From the literature on modern-day eunuchs who are not sex offenders, we conclude that androgen deprivation reduces sexual desire and behavior, including sexual intercourse. Most men, especially those who did not volunteer for the treatment, experience the side effects as extremely bothersome. Androgen deprivation therapy (ADT) receives endorsements from some clinicians who treat sex offenders and it probably reduces sexual recidivism among men who freely request the procedure, but good evidence is sorely lacking. Men who freely request and persist with ADT are probably an especially low risk group. Little is known about the effects on sexual or violent recidivism among sex offenders who do not freely request it. Little is known about the long term effects of ADT on sexual behavior in general, and sexual recidivism in particular, or about long term health effects. Clearly, much more research is needed before ADT has a sufficient scientific basis to be relied upon as a principal component of sex offender treatment.

Rice, M. E., Harris, G.T., Lang, C., & Chaplin, T. C. (in press). Adolescents who have sexually offended: Is phallometry valid? *Sexual Abuse: A Journal of Research and Treatment*.

It is unclear whether deviant sexual preferences distinguish adolescents who commit sex offenses in the same way that such deviance characterizes adult sex offenders. We compared male adolescents (mean age = 15) at the time of a referral sex offense, matched adult sex offenders, and normal men (adult non-offenders or non-sex offenders). We hypothesized: phallometric responses of the adolescents would be similar to those of adult sex offenders and would differ from normals; adolescents with male child victims would exhibit greater evidence of sexual deviance than those whose only victims were female children; among adolescents who had molested children, those with a history of sexual abuse would exhibit more evidence of sexual deviance than those with no such history; and phallometric measures would predict recidivism. With some notable exceptions or qualifications, results confirmed the hypotheses. Phallometry has valid clinical and research uses with adolescent males who commit serious sex offenses.

Spidel, A., Hervé, H. F., & Greaves, C., & Hare, R. D. (Aug 2010). "Wasn't me!" A field study of the relationship between deceptive motivations and psychopathic traits in young offenders. *Legal and Criminological Psychology*.

Evaluating truthfulness is an integral part of any forensic assessment. Unfortunately, the motives underlying the use of deceptive strategies by offenders and how these may be mediated by personality are not well established, particularly in adolescent samples. Accordingly, the aim of the present study was to identify different deception-related motivations in a sample of juvenile offenders, with special emphasis placed on the relationship between these motivations and psychopathic traits. Archived file and videotaped information for 60 Canadian federal juvenile offenders were reviewed in order to identify real-life (spontaneous) patterns of deceptive motivations. Not only were juvenile offenders found to lie for a variety of reasons, but also psychopathy was found to mediate the specific motivational patterns leading to offender-perpetrated deception. The relevance of these findings to the assessment of truthfulness in offender populations is discussed.

RECENT PUBLICATIONS Con't

Stockdale, K. C., Olver, M. E., & Wong, S. C. P. (2010). The Psychopathy Checklist: Youth Version and adolescent and adult recidivism: Considerations with respect to gender, ethnicity, and age. *Psychological Assessment, 22*, 768-781.

The present study investigated the predictive accuracy of the Psychopathy Checklist: Youth Version (PCL: YV; Forth, Kosson, & Hare, 2003) for youth and adult recidivism, with respect to gender, ethnicity, and age, in a sample of 161 Canadian young offenders who received psychological services from an outpatient mental health facility. The PCL: YV significantly predicted any general, nonviolent, and violent recidivism in the aggregate sample over a 7-year follow-up; however, when results were disaggregated by youth and adult outcomes, the PCL: YV consistently appeared to be a stronger predictor of youth recidivism. The PCL: YV predicted youth recidivism for subsamples of female and Aboriginal youths and very few differences in the predictive accuracy of the tool were observed for younger versus older adolescent groups. Both the 13-item (i.e., Cooke & Michie, 2001, three-factor) and the 20-item (i.e., Hare, 2003, four-factor) models appeared to predict various recidivism criteria comparably across the aggregate sample and within specific demographic subgroups (e.g., female and Aboriginal youth). The Antisocial facet contributed the most variance in the prediction of adult outcomes, while the three-factor model contributed significant incremental variance in the prediction of youth recidivism outcomes. Potential implications concerning the use of the PCL: YV in clinical and forensic assessment contexts are discussed.

MEMBERS ON THE MOVE

Dorothy Cotton was recently elected to the Practitioner's Seat of the Canadian Psychological Association Board. In this capacity she will chair the Professional Affairs Committee.

Janine Cutler has joined the Andrew Shaul Psychology Professional Corporation in Toronto.

Tarah Hook has joined the Alberta Hospital Edmonton as the Clinical Lead/Senior Psychologist with the Phoenix Inpatient Sexual Offender Treatment Program.

CONGRATULATIONS!!

KUDOS

Dr. Howard Barbaree will be awarded the Criminal Justice Section's Donald Andrews Career Contribution Award at the NACCJPC.

Dr. Jane Barker will be awarded the Significant Achievement Award by the Criminal Justice Section at the upcoming Annual Convention for her edited and co-authored book *Women and the Criminal Justice System: A Canadian Perspective*.

Edward (Ted) Ormston will be awarded the Canadian Psychological Association's 2011 Humanitarian Award. Mr. Ormston is the Chair of the Mental Health and Law Advisory Committee of the Mental Health Commission of Canada, and was instrumental in establishing the world's first Mental Health Court in Ontario.

Please check program information to attend the presentation of these awards.

STUDENTS' WATER COOLER

From Misunderstanding to Advocating for Juvenile Offenders: An Unexpected but Welcomed Journey

By Jennifer L. Cometto, University of Windsor

I first had the opportunity to work with juvenile offenders (JO) as a practicum student at a community mental health setting with a Diversion Program (i.e., an opportunity for low-risk JO who show evidence of mental health challenges to evade court proceedings by attending counselling until they demonstrate the ability to make better choices, employ adaptive coping skills, and gain insight into offence-related behaviours so as to prevent future occurrences). Although it was not included in my practicum contract, I agreed to conduct psychological assessments with JO for the purpose of helping to determine their eligibility for diversion. Due to my limited experience with this population and fear of what some of the offences suggested JO were capable of, I asked my supervisor to oversee my first assessment in its entirety from behind a one-way mirror. In preparation, I anticipated interactions with what I imagined would be a large, intimidating, thug-like youth who would be uncooperative, over confident, and opportunistic. Imagine my astonishment when I scanned the waiting room to find a socially awkward, self-conscious, withdrawn adolescent of small stature. How could this be the person that had committed the sexual offences I had read about? After acknowledging my biases and educating myself further, I recognized this profile, as well as the soon-to-be revealed information processing deficits and abysmal lack of sexual knowledge, as being relatively common to known juvenile sex offenders (JSO). Throughout the course of the assessment, I developed an unexpected and genuine sense of compassion and forgiveness toward the youth. I even caught myself thinking that, considering his upbringing, his offences seemed predictable and almost small in scale. For instance, in addition to many other risk factors for sexual misconduct, the youth had been raised in a brothel with male role models who regularly degraded women (some whom had been convicted of rape), and females who were paid to appear to enjoy such treatment. Although the details varied, many of the cases that I was assigned resembled the neglect, dysfunctional family dynamics, and pattern of learned behaviour that I became so acquainted with in my first case.

An expert with JSO recognized my healthy sense of scepticism, inquisitive nature, and compassion as an asset for establishing therapeutic rapport and successful intervention with JO. Over the course of twelve months he supervised me as a co-facilitator of JSO process groups and family therapy sessions and later granted me the opportunity to share my insights at a two-day workshop for treatment providers. From these experiences I learned to approach case conceptualization and intervention by developing a rich understanding of the mechanisms by which developmental outcomes are gradually achieved. To do this, I've relied heavily on developmental psychopathology theory to help unravel the dynamic interplay of individual, familial, and socio-cultural influences contributing to clients' overall psychological functioning. From this perspective, I explore how clients impact their environment and how social networks, in which the client is embedded, have shaped their attitudes, beliefs, behaviours and attachment security. Using this approach I have found great joy, success, and challenges working with JO in inpatient, residential, and outpatient settings. Though it seems unrealistic to think that JO will be model citizens following a period of intervention, my experiences have shown that early intervention can significantly reduce recidivism rates and improve adolescents' quality of life. In particular, my experiences have led me to question whether we (i.e., mental health providers) have done a disservice to JO by overlooking Post-Traumatic Stress Disorder (PTSD) in the presence of severe disruptive behaviours and too readily accepting parents' refusal to participate in treatment. This is not to excuse the behaviour of JO but to recognize the role of their environment and the fact that parents and children often resemble one another due to shared circumstances (e.g., identification with the aggressor), culture (e.g., tolerance for aggression, what is considered aggressive), and genetic material (e.g., impulsivity, predisposition for mental health diagnoses).

Throughout the application process for internship I came to realise that my most rewarding and complex cases have involved working with JO and their families. As such, I urge psychologists in training to actively seek out opportunities with this population – if not for the experience with family therapy, differential diagnosis, and rapport building, then for the personal growth you will undoubtedly gain from the journey. My own experiences have instilled in me an ethic of caring, a strong sense of social betterment, and the importance of self-care and taking time to cultivate, nurture, and express appreciation for collaborative working relationships with other professionals.

For more information: Cometto@uwindsor.ca

EDUCATIONAL INFORMATION

Do you have a love for Forensics? Are you looking for a chance to specialize in such a unique field at the undergraduate level? Look no further than the University of British Columbia Okanagan Campus. At the UBC campus in Kelowna, British Columbia, students (enrolled in either Arts or Science) who are majoring in Psychology and intending to complete an Honours degree have the additional option of concentrating their Honours specialization in Forensic Psychology. Currently, this UBC campus is the only one in Canada that offers such an option to its undergraduate students. This Honours Forensic Specialization program allows for students to engage in both coursework and practical work in a Forensic setting. Such a program is intended to support a student's love for Forensic Psychology, while allowing for practical, real-world experience.

You can find more information about this great program at UBC at <http://www.ubc.ca/okanagan/psyo/undergrad/program.html>. Scroll down to the heading Psychology Honours Program (BA or BSc), click on Calendar, and then scroll down the page to read all about what this amazing opportunity in Forensic Psychology has to offer!

UPCOMING CONFERENCES

Canadian Psychological Association 72nd Annual Convention

June 2-4, 2011 Toronto, Ontario, Canada

www.cpa.ca

North American Correctional and Criminal Justice Psychology (NACCCJP) Conference

June 2-4, 2011 Toronto, Ontario, Canada

International Association of Forensic Mental Health Services Annual Conference

June 29-July 1, 2011 Barcelona, Spain

www.iafmhs.org

The 199th Annual Convention of The American Psychological Association

August 4-7, 2011 Washington, D.C., United States

American Correctional Association

141st Congress of Correction

August 5-10, 2011 Kissimmee, Florida, United States

www.aca.org

The 13th Conference of The International Academy of Investigative Psychology

September 19-21, 2011, San Francisco, California, United States

www.ia-ip.org

Association for the Treatment of Sexual Abusers (ATSA)

30th Annual Conference

November 2-5, 2011 Toronto, Ontario, Canada

www.atsa.com

The American Society of Criminology Annual Meeting

November 16-19, 2011 Washington, D.C., United States

www.asc41.com

NORTH AMERICAN CORRECTIONAL & CRIMINAL JUSTICE PSYCHOLOGY CONFERENCE

You Don't Want to Miss NACCJPC2

By: Jim Cheston, NACCJPC2 Marketing Committee Co-Chair

If you are reading this and have not yet registered for the Second North American Correctional and Criminal Justice Psychology Conference (NACCJPC2) in Toronto from June 2nd to 4th, 2011, I suggest you forget about reading this article and click the link on the advertisement to register for the conference right now! If you need any further convincing, then you must not have heard about everything that is going to be happening at NACCJPC2. Anyone with any sort of interest at all in correctional/forensic psychology would not want to miss this conference. There is not another conference that can compare to either the calibre of presenters or the range of interest areas within the field of correctional/forensic psychology. Not only that, but it is being held in the vibrant and cosmopolitan city of Toronto during a time of year that promises great weather in a culturally diverse city. Anyone who is reading *Crime Scene* likely appreciates the unique opportunity that this conference provides to people in our area of psychology.

The Keynote Speakers will present their expert positions on some of the central current issues in the main areas of Correctional and Forensic Psychology. From the neurobiology of violent offending to a public policy view of psychology and corrections, and from current views in assessment and treatment to the emerging and very topical area of Mental Illness in the Criminal Justice System, there is something for everyone. There will be international experts, scholars and practitioners from around the world, mingling and discussing their various perspectives on the many interesting areas within this field. The opportunity for professional development is also more directly available in the five Pre-Conference Workshops. The many research and practise presentations over the three days of the conference offer insight into the developing knowledge and types of assessment and interventions that are defining the progress of Correctional/Forensic Psychology.

There really is no question that this conference is a must-do for people in the field. Something that is perhaps not as widely appreciated, however, is the extent to which this conference would be interesting and informative to professionals in a number of related fields. People such as lawyers, forensic psychiatrists and social workers, police and criminologists would certainly find some of the work at the conference relevant and worthwhile. So if you have not yet registered, I strongly encourage you to do so. If you have, then you will be joined at the conference by many of our colleagues from around the globe. Finally, if you know of friends or colleagues in related fields who might not have heard about NACCJPC2, you might mention it to them and encourage them to visit the website as well. This would serve to expand the influence of the conference beyond its benefit to Correctional and Forensic Psychology to informing others in related fields.

And in addition to all the professional benefits of attending this conference, there are also the many and varied ways to enjoy yourself during your stay in Toronto. Visit the conference website for ideas on how to make your stay in Toronto an extremely enjoyable, as well as a professionally fulfilling one.

For more information: Jim.Cheston@Ontario.ca

**JOIN NACCJPC-2 ON
FACEBOOK**

**CHECK OUT THE
NACCJPC-2 PROGRAM
ON THE FOLLOWING
PAGES**

2nd North American Correctional & Criminal Justice Psychology Conference

June 2-4, 2011 | Toronto, Canada

An International Meeting of Minds for Correctional Psychology Excellence



Distinguished Keynote Speakers

Joel Dvoskin, Ph.D.: Crime & Punishment & Psychology: How to Spend a Fortune Making America Less Safe

R. Karl Hanson, Ph.D.: The Assessment and Treatment of Sex Offenders

Sheilagh Hodgins, Ph.D.: The Neurobiology of Persistent Violent Offending

Jennifer Skeem, Ph.D.: Mental Illness and Criminal Justice Involvement: A New Paradigm for Research and Policy

Paula Smith, Ph.D.: Treatment Integrity: The Relationship Between Program Level Characteristics and Offender Recidivism

*See our website for more information about our **speakers**,
registration and **travel information**, and **Toronto leisure activities**:*

cpa.ca/aboutcpa/cpasections/criminaljusticepsychology/NACCJPC/

Pre-Conference Workshops

Assessing Dynamic Risk in Sexual Offenders: The STABLE-2007 and ACUTE-2007: Andrew Harris, Ph.D.

Violence Assessment Workshop: Daryl G. Kroner, Ph.D., Jeremy F. Mills, Ph.D., & Robert D. Morgan, Ph.D.

Translating Neurobiological Theory with Correctional and Forensic Practice: David Nussbaum, Ph.D.

How to Conduct a Meta-Analysis (with a Focus on Criminal Justice Research): Leslie Helmus, M.A.

An Introduction to Motivational Interviewing with Offenders: Joel Ginsburg, Ph.D. & Sharon Kennedy, Ph.D.

Hundreds of presentations, symposia, papers, and posters; Celebration of Excellence Reception; Meet experts in the field



Criminal Justice Section
of the Canadian Psychological
Association (CPA)



Division 18 (Psychologists in Public Service) of the American Psychological Association (APA)

Thursday, June 2, 2011

TIME	Room 1	Room 2	Room 3	Room 4	Exchange - Meeting
8:00	<p>P Smith (15745) An examination of the psychometric properties of the Rapid Risk of Violence Screen (RROVS)</p> <p>L Marshall (16218) Aging and sexual offending: an examination of older sexual offenders 8:00 – 9:00</p>	<p>K Taylor (14918) Women Offenders in Canada and recent research initiatives: Female sex offenders, mental health, and therapeutic alliance 8:00 – 9:30</p>	<p>M Oliver (15893) Offender treatment of specialized populations around the world 8:00 – 9:30</p>	<p>G. Wilton (15506) Mentally disordered offenders: mental health screening, profile, and correctional outcomes with serious mental disorders, concurrent disorders and ADHD 8:00 – 9:30</p>	<p>Psychologists working with Criminal Justice and Corrections Policy: Don't shoot the messenger!</p>
9:00	<p>H. Barbaree (14758) Integrating aging into our understanding of sex offender risk 9:00 – 10:00</p>		<p>E Ross (16615) Is there measurable improvement in offender's executive cognitive functioning after moderate intensity correctional rehabilitation programming? 9:30-10:00</p>	<p>A Gray (16316) Radicalization to violence and national security community outreach 9:30-10:00</p>	<p>Round Table Chair: Sheila Brandt 8:30 - 10:00</p>
10:00	<p>Opening Remarks: Jeremy Mills INVITED SPEAKER: Sheilagh Hodgins (14492) The Neurobiology of Persistent Violent Offending Civic Ballroom 10:00 – 12:00</p>				
12:00	<p>LUNCH 12:00 – 1:00</p>				
1:00	<p>A. Forth (15846) The psychology of criminal conduct: the legacy of Don Andrews 1:00 – 2:30</p>	<p>D Kroner (15797) Dynamic risk assessment: examination of a 6-wave study with outcome data 1:00 – 2:30</p>	<p>L. Marshall (15702) Implementation and evaluation of treatment interventions at a secure treatment unit for mentally ill offenders 1:00 – 2:30</p>	<p>N Gross (15897) Offender treatment programs: past, present and future directions 1:00 – 2:30</p>	<p>Sheilagh Hodgins</p>
2:30	<p>Crime & Punishment & Psychology: How to Spend a Fortune Making America Less Safe Civic Ballroom 2:30 – 4:00</p>				
4:00	<p>POSTER SESSION (107 Posters) Dominion Ballroom 4:00 – 6:00</p>				
6:00	<p>PRESIDENTIAL RECEPTION 6:00 – 8:00</p>				

Friday, June 3, 2011

TIME	Room 1	Room 2	Room 3	Room 4	Exchange - Meeting
8:00	G Bourgon (14461) Supervising offenders in the community: bringing evidence based practices to everyday supervision 8:00 – 9:30	F Cortoni (16680) Reducing recidivism among violent offenders: the effectiveness of treatment 8:00 – 9:30	G Wilton (15442) Treatment programs of Aboriginal and Inuit offenders in the federal correctional system 8:00 – 9:30	D Nussbaum (16620) The utility of central neurobiological models for forensic practice 8:00 – 9:30	Meeting Ont. Correctional Psychologist 8:00 – 11:00
9:30	INVITED SPEAKER: R. Karl Hanson (14494) The Assessment and Treatment of Sexual Offenders Civic Ballroom 9:30 – 11:00				
11:00	Y Fernandez (15783) Correctional psychology can be clinical psychology on steroids 11:00 – 12:30	M. Campbell (15534) Mental Health Courts: who gets in, what changes, and how relevant is RNR model, and what do people think about mental health courts 11:00 – 12:30	R Serin (16370) Violent Offender programming: Models, measures and outcomes 11:00 – 12:30	J Wormith (15650) Nailing down thorny questions on offender risk assessment platform 11:00 – 12:30	R. Karl Hanson
12:30	LUNCH 12:30 – 1:30				
1:30	G. Harris (15447) Empirical evidence on psychopathy as a life history strategy 1:30 – 3:00	A Gray (16373) Issues in intimate partner violence intervention: treatment exposure (dosage), treatment environment and treatment attrition 1:30 – 3:00	D Simourd (16222) Correctional treatment: paying attention to things that make a difference 1:30 – 3:00	S. Manchak (15144) Moving beyond "what works" to "how?" and "for whom?" A closer look at interventions for offenders with mental illness 1:30 – 3:00	Neil Gredecki Corrections in the UK
3:00	INVITED SPEAKER: Jennifer Skeem (14499) Mental Health and Criminal Justice Involvement: A New Paradigm for Research and Policy Civic Ballroom 3:00 – 4:30				
4:30	A Forth (16594) Psychopathy: Current controversies and advances 4:30 – 6:00	G. Serran (14698) Therapeutic process issues in the treatment of sexual offenders 4:30 – 6:00	T. Skilling (14876) Risk assessment and treatment planning: adhering to the risk, need, responsibility principles in juvenile justice system 4:30 – 6:00	K Babchishin (15370) Improving our risk assessment communication: non-arbitrary methods for quantifying offenders' risk for crime and violence 4:30 – 6:00	Jennifer Skeem
6:00	CELEBRATION OF EXCELLENCE RECEPTION & LIVE MUSIC Starts at 6:00				

Saturday, June 4, 2011

TIME	Room 1	Room 2	Room 3	Room 4	Exchange - Meeting
8:00	<p>Sexual Offender Treatment</p> <p>D Prescott (16698 & 16702) Motivational interviewing in treatment with sexual offenders</p> <p>Motivation and change in the treatment of sexual offenders: considerations for practice</p> <p>8:00 – 9:00</p>	<p>Gender Issues</p> <p>R Rowe (16633 & 16603) The assessment of female adolescent psychopathy in a forensic mental health sample. & Gender differences in risk factors for youth: a closer examination of peer relationships and substance abuse</p> <p>D Derksen (14971) Gender-informed correctional interventions: developments, implementation and evaluation</p> <p>8:00 – 9:00</p>	<p>Jury Duty & Decision Making</p> <p>N Korva (15507) Dangerous decisions with female defendants: the impact of gender and trustworthiness on juror decision-making</p> <p>L Stermac (16476) The psychological impact of jury duty</p> <p>8:00 – 9:00</p>	<p>Qualitative Research</p> <p>F Jacquard (14512) Hope at work: the storied experience of hope for frontline workers who counsel in forensic settings</p> <p>K Seidler (14736) Community perceptions on sex offender management: is it making our children safer?</p> <p>8:00 – 9:00</p>	
9:00	<p>J Wormith (15728) Something old and something new: innovations in offender assessment</p> <p>9:00 – 10:30</p>	<p>N Gredecki (14610) Forensic Psychology: developments in forensic practice in the UK</p> <p>9:00 – 10:30</p>	<p>S Brown (16025) Gendered pathways, risk assessment and non-suicidal self-injurious behaviour in female offenders: utilizing qualitative and quantitative approaches</p> <p>9:00 – 10:30</p>	<p>M Patry (15436) Recruiting and retaining a healthy correctional mental health workforce: developmental perspectives</p> <p>9:00 – 10:30</p>	<p><i>Future Directions in Sex Offender Treatment</i> Liam Marshall Gwenda Willis Ainslie Heasman</p>
10:30	<p>Treatment Integrity: The Relationship Between Program Level Characteristics and Offender Recidivism</p> <p>Civic Ballroom 10:30 – 12:00</p>				
12:00	<p>Lunch</p> <p>12:00 – 1:00</p>				
1:00	<p>M. Oliver (15657) Assessing dynamic violence risk: methodological, conceptual and clinical considerations. 1:00 – 2:30</p>	<p>E Anderson (15471) Prisons: a cauldron for disease</p> <p>1:00 – 2:30</p>	<p>B Rector (16232) Effective correctional practice in custody facilities and community probation</p> <p>1:00 – 2:30</p>	<p>D Cotton (15373) Pre-employment psychological assessment of police candidates: national guidelines</p> <p>1:00 – 2:30</p>	<p>Paula Smith</p>
2:30	<p>J Blais (15792) Validated risk factors as predictors of recidivism across special populations: a quantitative review of the central eight</p> <p>2:30 – 4:00</p>	<p>K Parhar (16428) Applications of applied social psychology to criminal justice issues</p> <p>2:30 – 4:00</p>	<p>J Malcolm (15981) A closer look at criminal attitudes</p> <p>2:30 – 4:00</p>	<p>D Luong (14979) Correctional Services Canada and community partners: lessons learned and best practices in collaboration to enhance successful reintegration</p> <p>2:30 – 4:00</p>	