HANSON STUDY SHOWS TREATMENT HAS LITTLE EFFECT

Author Unknown (circa 2007)

A study by a group of researchers headed by Dr. R. Karl Hanson , senior research officer for the Department of Public Safety and Emergency Preparedness in Canada, found that treatment programs for sex offenders have little effect on rates of recidivism. Dr. Hanson is one of the world's foremost experts on sex offense recidivism, and through his research developed the "*Static 99*," an actuarial tool, for the Canadian Government to use in determining appropriate treatment and housing for sex offenders based on risk factors. This system of predicting re-offense risks is now heavily relied upon by California's Department of Mental Health ("DMH") evaluators when assessing sex offenders for incarceration and treatment under the State's Sexually Violent Predator Act ("SVPA"), a civil commitment law.

The Hanson group's study was a meta-analysis of 43 earlier studies. This research showed that the treatment groups averaged a slightly lower recidivism rate than the untreated comparison groups. [12.9% vs. 16.8%] However, this difference is a much smaller advantage than either researchers or clinicians would like and may be statistically insignificant in any event. "It is devilishly hard to identify treatment related changes in a person's risk for committing sexual offenses," Hanson stated of his research. Moreover, some researchers including Grant Harris of Canada's Mental Health Center, believe that even a minor difference of 4.5% in Hanson's research overstates the treatment effect.

Indeed, the Hanson group's research paper itself conceded that its study may overestimate treatment results. According to the researchers, the most reliable figures come from studies of groups which are randomly selected for participation or non-participation in treatment. Groups in which the participants volunteered or were selected on the basis of various criteria tend to produce results which may be biased in favor of a treatment effect. Only one of the 43 studies analyzed by the Hanson group was of such a random group. It found identical sexual recidivism rates for treated and untreated offenders. This study, (Marques, J.K. & Day, D.M., May 1998, *Sex Offender Treatment Evaluation Project: Progress Report*, California Department of Mental Health.), was of California's Sex Offender Commitment Program ("SOCP"). Thus, the most unbiased study analyzed by the Hanson group, and the one with the most relevance to sex offender treatment in California, showed that California's treatment program had no effect whatsoever on sexual re-offending.

With specific reference to SVP type treatment schemes, the Hanson group found studies that compared sex offenders who needed treatment to less needy offenders, consistently found worse outcomes for the treatment groups.

The Hanson study also reported the surprising finding that offenders who refused treatment were at no higher risk for sexual re-offending than offenders who started treatment. The Hanson group concluded that, "some offenders may realistically conclude that they do not require treatment," and "the current results . . . are a challenge to evaluators who routinely use 'treatment refusal' as a poor prognostic indicator."

Despite Hanson's conclusions, DMH evaluators continue to routinely use treatment refusal as an indicator of re-offense risk. They do this despite the fact that Hanson himself presented this information to a conference of DMH. evaluators in San Diego in 2001, and despite the publication of the Hanson group's research paper in the house organ of their own group, the Association for the Treatment of Sexual Abusers ("A.T.S.A.").

Moreover, the "treatment refusal" factor is not the only Hanson research DMH evaluators ignore. Although they are more than happy to extol any of Hanson's work which generally favors pro-commitment, such as the *Static-99*, DMH psychologists consistently neglect Hanson's other major studies. Particularly, *Age and Sexual Recidivism*, a major study which showed that rates of sexual recidivism dive sharply after age 50. By age 60, the recidivism rate is as low as 3.8%, a rate comparable to released castrated sex offenders.

Despite Hanson's impeccable research and recommendations which are accepted by professionals internationally, California's DMH evaluators routinely mis-apply *Static-99's* re-offense predictions to men over age 45. Thus, by the end of the *Static 99's* 15 year projection period, such men will be in the age ranges where recidivism is virtually non-existent. At a time, such as the present, when current science is not much better than flipping a coin at predicting future dangerousness, the DMH evaluators make it even worse by failing to properly follow Hanson's instructions and warnings for use of the *Static 99.* Largely, this is due to pro-commitment biases and mandates contained in the DMH Standardized Assessment Protocol, Evaluators' Handbook (2004).

The result is evident at Atascadero and Coalinga State Hospitals, where the average age of those committed under the SVPA is 52. There are large numbers of infirm men in their, 60s, 70s, and even 80s filling bed space that could be better utilized in treating younger persons who actually are statistically dangerous at the present time. These are elderly men with offenses several decades old, but for whom research clearly shows future risk is very low. They are incarcerated probably for life at great taxpayer expense. Moreover, over 25 of such elderly, but "dangerous," individuals have died at ASH in the past eleven years.

Using Hanson's research, defense attorneys should thoroughly cross-examine DMH evaluators who list "treatment refusal" as a risk factor, or who fail to make downward adjustments for age in their risk prediction percentages.

Sources for this article:

1. R. Karl Hanson, et al. *First Report of the Collaborative Outcome Data Project on the Effectiveness of Psychological Treatment for Sex Offenders*, published in "Sexual Abuse: A Journal of Research an Treatment," Vol. 14, No. 2 (April 2002).

2. R. Karl Hanson, *Age and Sexual Recidivism: A Comparison of Rapist and Child Molesters, 2001*, available at www.sgc.gc.ca

3. *Men of Prey: Scientists Peer into the Dark World of Sex Offenders*, Science News, Vol. 162, July 27, 2002. Also at www.sciencenews.org