Talking About Sex in Sex Offense Treatment: Practical Approaches for Professionals

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Objectives

- ► Explain why SOTP treatment providers need to talk about sex and why it's difficult.
- ▶ Describe techniques for how to talk about sex in various contexts of sexual offense treatment.
- ▶ Initiate discussions about client sexual attractions and provider reactions when discussing sex in sexual offense treatment.
- ▶ Use diverse techniques for discussing sex and sexuality.

Part 1: Why we should talk about sex (and why we don't)

Focal points in SOTP

Dynamic Risk Factors

- ▶ Poor Problem-Solving
- ▶ Negative Emotionality
- ► Significant Social Influences
- ► Capacity for Relationship Stability (Fernandez et al., 2014)

Protective Factors

- ▶ Self-Control
- ► Leisure Activities
- ▶ Work
- ▶ Supervised Living

(Kelley et al., 2022)

Life Goals

- ▶ Inner Peace
- ▶ Happiness

(Yates et al., 2010)

Where we need to talk about sex

Dynamic Risk Factors

- ▶ Deviant Sexual Preference
- Sex as Coping
- ► Sex Drive / Preoccupation
- ► Capacity for Relationship Stability

Protective Factors

- ► Sexual Self-Regulation
- ▶ Prosocial Sexual Interests
- ► Prosocial Sexual Identity

Life Goals

- ▶ Inner Peace
- ▶ Happiness

Healthy Sex / Consent

(Watter & Hall, 2020)

Why talking about sex is difficult for treatment providers

- ▶ Focus on avoidance goals
- Discomfort / lack of training on sexuality
- Discomfort discussing paraphilias
- ► Concerns about boundaries (Buehler, 2022; Luca, 2018)
- ▶ Competing treatment needs
- Client reinforcement of avoidance of sexual discussions

Factors that may keep clients from talking about sex

- ▶ Discomfort / shame / lack of familiarity with talking about sex
- ▶ Trauma
- Lack of sexual knowledge
- Belief that talking about their sex lives is disrespectful to partner
- Concerns that talking about sex will lead to:
 - ▶ Negative perceptions
 - Sex-negative messaging
 - ► Restrictions / Assignments
 - ▶ Legal problems (Stephens et al., 2021)

What do we do about this?

- Training
- Supervision and Consultation
- ▶ Provide Structure
- ▶ Address Concerns
- ▶ Develop Therapeutic Alliance (Marshall, 2005)
 - ▶ Warmth, Empathy, Rewards, Directiveness
 - ► Supportive challenges vs Confrontation

Part 2: How to talk about sexual topics in treatment

Where to start

- ▶ Limits of confidentiality: What will happen if...
- Setting the tone: When and Why
 - ▶ Meeting treatment goals
 - ▶ Dynamic Risk, Protective Factors, Life Goals
 - ► Expectations in treatment
- ▶ Why these conversations may be difficult and how to proceed

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Ways of talking about sexual treatment needs

- Direct questions
- Journalling or behavior monitoring
- Assignments specific to:
 - ▶ Understanding offense
 - ► Addressing dynamic risk
 - ▶ Clients' sexual wants and goals
 - ▶ Healthy sexuality / Consent
- Assessments

Paraphilic Interest Vignettes

▶ Bob

- ▶ Sexually assaulted his 8-year-old nephew on three occasions and sexually assaulted his nephew's 9-year-old friend on one occasion while babysitting
- ▶ Has a history of viewing child sexual exploitation media
- ▶ Reports being intoxicated when offending
- ▶ Reports lack of romantic partner contributed to offending
- ▶ Demonstrated strong arousals to prepubescent males on PPG

Paraphilic Interest Vignettes

▶ Tony

- ▶ Hid cameras to record women changing in dressing rooms at clothing stores
- ▶ Reports excitement related to "outsmarting everyone"
- ▶ Reports "only occasionally" masturbating to the videos he recorded
- Recalls early memories of seeing his sister and her friends getting dressed for school and "sometimes" masturbates to these memories
- ► Has a history of walking by houses in the early morning to see what his neighbors do before work

Talking about paraphilic interests

- Why we should talk about this:
 - Assessments
 - ▶ Offenses / History
 - Comments made or behaviors noted in treatment
- Is it safe to talk to me about this?
- ▶ What does this term mean to you?
- ► Can you distinguish facilitation from motivation? (Seto, 2019)

What might be contributing to this attraction

- ► Physical attractions
- ▶ Emotional identification
- ► Lonely / Fears of rejection
- ▶ Thrill-Seeking

- ► Attraction to non-consent
- ► Attraction to pain
- ► Anger / Punishment

What we do with problematic sexual interests

- ► Acknowledge and Understand (Blagden et al., 2018; Jahnke et al., 2023)
- Safety Planning
- Arousal Management (Gannon et al., 2019)
- ► Healthy Sexual Scripts

Healthy Sex and Consent – Discussions

- What are you looking forward to / what's a reason to avoid problematic sexual behaviors?
- How do you make consent attractive?
- ▶ How do you know that consent is present without making sex awkward?
- ▶ How do you want yourself / your partner to feel after sex?
- ▶ How will you respond to differences in sex drive in your relationship?
- ▶ How would you tell a partner about your sexual desires or learn about theirs?
- ▶ What are your sexual boundaries and how would you explain them to a partner?
- What messages have you received about sex and _____
 - ▶ Masculinity?
 - ► Rejection?
 - Sexual Orientation?

Healthy Sex and Consent – Using Resources

▶ Tea and Consent

https://www.youtube.com/watch?v=pZwvrxVavnQ

- ▶ Why is consent more difficult when it comes to sex?
- ▶ What does it mean when someone doesn't want to have sex with you?
- ► The CERTS Model of Healthy Sex

https://www.healthyplace.com/sex/good-sex/the-certs-model-of-healthy-sex

- ▶ In addition to consent, what else is involved in healthy sex?
- What elements of healthy sex might be missing in impersonal sex?

Healthy Sex and Consent – Using Resources

- ► Research on sexual frequency and behaviors (ex: Herbenick et al., 2017; Herbenick et al., 2021; Herbenick et al., 2021; Ueda et al., 2020)
- Sex Made Simple: Clinical strategies for sexual issues in therapy (McCarthy, 2017)
 - ▶ Understanding common behaviors and trends related to sexuality
 - Creation of sexual styles
 - ► Addressing common sexual issues
- ▶ Gott Sex? (Gottman & Gottman, 2012)
 - Combining sex and intimacy
 - Asking for and saying no to sex
 - Creative ways of meeting sexual wants

Part 3: Attractions & Responses

Possible signs of client attraction:

- Providing too much detail about sexual behaviors / fantasies
- Commenting on provider's appearance
- Asking sexual or romantic personal questions
- Comparing the provider to a romantic partner
- ► Asking provider to meet outside of session
- Asking if the provider sees them as attractive
- ▶ Giving gifts
- Expressing sexual attraction or romantic interest

What is the function of the behavior?

- ▶ Interest in provider
- Sexual preoccupation
- Desire for help
- Efforts to comply with expectations
- ▶ Boundary pushing / Exerting control
- ▶ Efforts to connect with / distance from provider (Hartl et al., 2007)

Sexual attraction toward providers

- ► Client vulnerabilities Limited social contacts, interpersonal conflict, loneliness, feeling unlovable or unworthy, limited relationship experience (Rabasco et al., 2023)
- Sexual preoccupation and history of blurring relationship lines
- ▶ Therapist qualities attentive, warm, empathic, positive regard
- ▶ Transference
 - ► Erotic vs Eroticized

Responding to the client

- Consider function of behavior (Hartl et al., 2007)
 - ▶ Is Tony trying to express appreciation for the help you've provided?
 - ▶ Is Tony expressing attraction?
- ▶ Teach or model appropriate responses
 - ▶ Here's a different way you might try to express appreciation.
- ▶ Gently bring comments to client's attention
 - ▶ I noticed that you've compared me to your partner a couple times now. Why do you think that is?
- Process possible reasons for the comments
 - ► Are you perhaps concerned about whether you'll find a romantic partner? Or might this relate to feelings about me?

Responding to the client

- Normalize reactions but manage behavior
 - ▶ Attractions are common and make sense in this context. How do we acknowledge and process attractions when the relationship will not be sexual or romantic?
- Set expectations and boundaries
 - ▶ Sessions only happen in this office and the group room.
 - ▶ I won't be discussing my personal life. Here's why...
- Refer out as needed

Reactions to clients talking about sex

- ▶ Remember what we bring to the session:
 - ▶ What is apparent
 - ▶ What is perceived
 - ▶ What is influencing us
- ▶ How might what we bring to session affect the client?
- ▶ How might what we bring to session effect how we feel about the client?
- ▶ How do these conversations with these clients affect us?

Reactions to clients talking about sex

- ▶ Notice reactions:
 - ► Anger/Discomfort/Disgust
 - ▶ Interest
 - ► Anxiety/Fear/Uncertainty/Guilt
- Ask ourselves:
 - ▶ What does this reaction tell me about myself?
 - ▶ What does this situation or this client remind me of?
 - ▶ What does this reaction tell me about this client?
- Consult
 - ▶ Create a culture where talking about sex is safe/expected/encouraged (Hartl et al., 2007)

QUESTIONS?

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