

Stress and Motivation in Sexual Abuse Treatment

Insights from the 2025 Survey

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Survey Respondents

- 249 professionals who work in the field of treating individuals who have caused sexual harm
- Ages ranged from 20s to 80 years old
- Professionals with 4—20+ years of experience treating individuals who have abused
- 76% of respondents were women
- Variety of work settings, including correctional institutions, government agencies, community organizations, and private practice

What We Asked

STRESSORS

Identify top three workplace stressors:

- Workplace leadership/management
- Inability to change systemic issues
- Processing traumatic details of the offenses
- Limited career development opportunities
- Lack of professional support networks
- Interagency collaboration difficulties
- Job security concerns
- Challenging interactions with colleagues
- Exposure to disturbing visual material

MOTIVATORS

Identify top three sources of joy and motivation:

- Observing client growth and progress
- Positive relationships with colleagues
- Participating in structured team-building activities/get-togethers
- Receiving recognition for professional contributions
- Experiencing supporting leadership
- Opportunities for professional development & growth
- Receiving competitive financial compensation
- Contributing to a safer society

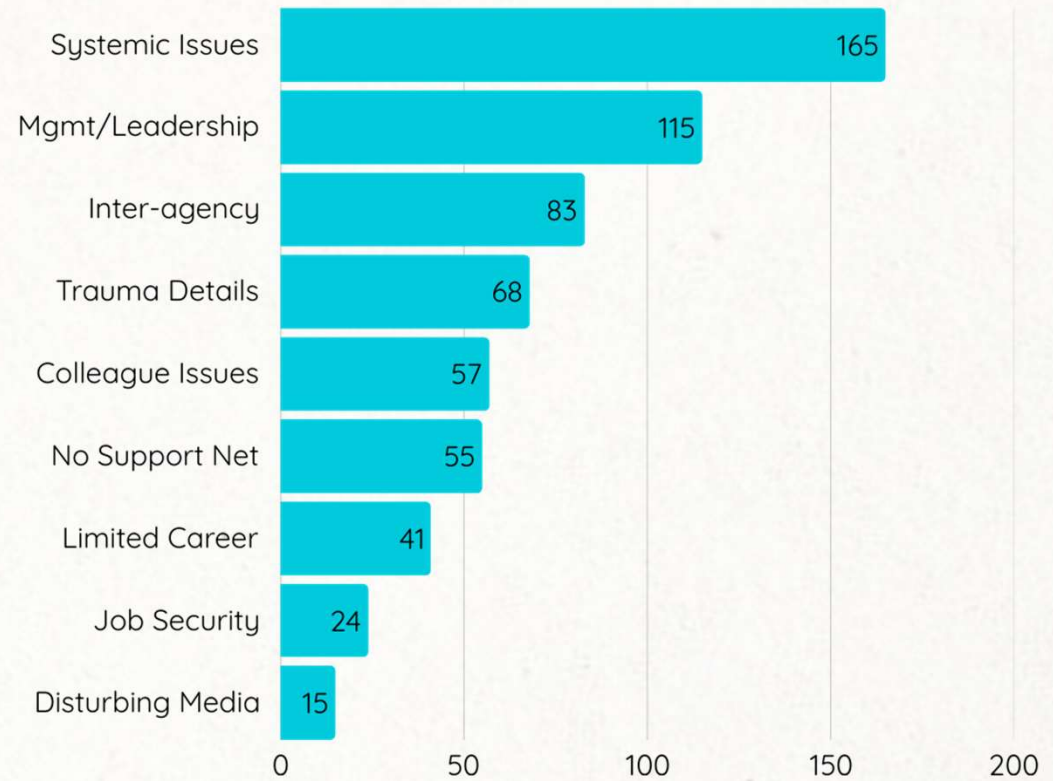
POLL

What would you say is your top workplace stressor?



WORKPLACE STRESSORS AMONG CLINICIANS

Survey Findings



#1 Stressor

Inability to Change Systemic Issues

- Societal stigma and negative public attitudes towards those who sexually offend, which influence policy and available resources
- Legal frameworks that make it difficult for professionals to implement evidence-based practices that promote healing and reduce recidivism
- Internal biases and institutional cultures within treatment programs, justice systems, and social service agencies

“Working in this field means that the laws, which often don’t reflect the known research about those who commit sex offenses, directly impact my work daily. Our expertise and knowledge in this area are not considered or questioned when new laws or amendments to existing laws are considered.”

#2 Stressor

Workplace Leadership/Management

The impact of supervisors, program directors, and administrative leaders on professionals includes:

- Providing resources for quality care
- Shaping response to ethical dilemmas and crisis management
- Influencing emotional wellbeing and burnout prevention
- Managing workloads and approaches to collaborative care

“I have found that the biggest challenges actually lie within the workplace politics. At times, upper management can feel so distanced from client work, and individuals doing more direct client care don’t have as much of a voice in what happens as they could/should. “

#3 Stressor

Interagency Collaboration Difficulties

- Difficulties coordinating efforts and maintaining clear and timely communications due to agency protocols and priorities
- Differences in goals and expectations between agencies (which can lead to misunderstanding and miscommunication)
- Disagreements over responsibilities, confidentiality, or the best approach to supervision and treatment of the client
- Varying levels of experience, resources, and training
- Sharing sensitive client information due to legal barriers and ethical concerns

“The most difficult part of interagency collaboration is the misunderstanding of the role of our agency as a treatment provider rather than a part of punishment.”

Additional Comments from Providers

“I often see leadership making decisions that I do not see as in the best interests of our residents. However, there is no clear mechanism for voicing my concerns.”

“Worried about public opinion of individuals who have sexually offended being in the community, with me being the only treatment provider in town, and there are social media posts about it.”

“My biggest challenges are securing housing for those who offend and helping them find suitable employment that minimizes risk and pays a livable wage.”

“Secondary trauma and processing the harm and deviant nature of individuals causes serious issues with trust and relationships.”

“We are severely understaffed due to resignations and people out on short-term disability and are constantly in ‘crisis mode.’ We don’t have the ability to adequately train the new therapists and cover all the holes left by vacancies.”

POLL

What would you say is your top workplace motivator?



WORKPLACE MOTIVATORS AMONG CLINICIANS

Survey Findings



#1 Motivator

Observing Client Growth & Change

- Client growth means meaningful change in behavior and self-awareness, including:
 - taking accountability
 - developing empathy
 - building healthier relationships.
- 81% of respondents said they are motivated by observing client growth and change
- Most frequently cited source of motivation across all age groups

“There is nothing more motivating to me than seeing an angry client in denial make very observable changes in both thoughts and attitudes, and then reporting how much they are learning and how much they look forward to sessions.”

#2 Motivator

Contributing to a Safer Society

- Second most common source of motivation is a sense of purpose from knowing their work helps build safer communities
- 61% of all respondents cited this contribution as a significant motivator
- 75% among professionals in their seventies—sense of purpose strengthens with experience.
- Why it matters: Effective rehabilitation and prevention not only reduce individual risk but also help prevent future harm and support community wellbeing

“I do like to think that the work we do not only has the potential to improve clients’ lives but also helps keep the community safer.”

#3 Motivator

Positive Relationships with Colleagues

- 44% of respondents identified positive relationships with peers as a source of motivation
- Consistent across most age groups
- Drops to 31% among professionals aged 71-80
- Peer relationships may become less central motivators later in one's career

“I wouldn't be able to do this work without my amazing colleagues who are also friends. I cannot talk about my work to anyone else in my life, and one of them is always there when I need a consult or am feeling unsure of myself (it still happens after 15 years in the field).”



Additional Comments from Providers

“My organization provides evidence-based training; thus, I find value in my work and believe that contribution to client change also contributes to a safer community.”

“Working with this population under mandated conditions means working with clients longer-term, so we get to see significant and meaningful changes both in their lives as well as the lives of their families.”

“I love the job that I do. It is stressful and not for everyone; however, it is very rewarding to see change and growth.”

“When I feel like I’m well compensated for my time, can meet my basic needs, and have supportive colleagues and leadership, I feel I continue to do good work I can be proud of, regardless of individual client outcomes in the short term.”

“I value having regular time to talk with colleagues who are doing similar work. It is hard to talk about this kind of treatment unless the person knows about it already.”

Moving Forward

Communities of Connection

Gathering with colleagues to reflect on stressors, motivators, and other concerns that affect our work. Self-care can be a shared, team-based practice!

Foster a Culture of Feedback

Staff feel heard, respected, and safe giving input; team-building alone is not enough

(Prescott et al., 2017)

Systemic Barriers

Examine policies, laws, and organizational cultures that may undermine effective practice

Normalize Vicarious Trauma

Treat exposure-related stress as expected and provide ongoing support, especially for those new to the field

Clarify Leadership Practices

Develop better understanding of sex-offense treatment and day-to-day clinical realities; recognize and build on staff strengths; address excessive caseloads and staff inquiries

Strengthen Interagency Collaboration

Invest in clearer protocols, regular meetings, and training to reduce collaboration-related stress

Your Ideas for Moving Forward?



Why This Survey Matters

- Highlights both the challenges and the meaningful rewards of this work
- Shows that, despite systemic and organizational barriers, professionals draw motivation from client progress and community safety
- Underscores the need for more supportive leadership and workplaces
- Reminds us that acknowledging these unique stresses is essential to keeping professionals engaged, effective, and valued in their roles



Thank You!



Access full survey at the link below or by using the QR code

https://safersociety.org/wp-content/uploads/2025/11/Stressors-and-Motivators-Among-Professionals-Treating-Clients-Who-Have-Sexually-Abused_2025-Survey_Final.pdf