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Risk assessment of sexual offenders in German forensic institutions

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Abstract

Background: The assessment of recidivism in sexual offenders is an urgent topic for forensic psychiatry in Germany. The call for useful predictive measures is therefore getting louder.

Aims: The present study analyses which criteria are employed by *therapists* in forensic hospitals to assess the dangerousness of sexual offenders. Of particular interest is whether the criteria listed in presently known prediction scores as decisive are actually used in decision-making in current forensic psychiatric practice.

Method: Data are collected in a prospective prediction study funded by the German Research Association.

Results: The results reveal that therapists employ mainly clinical and less historical criteria, thus indicating substantial differences from currently known prediction scores and results of other studies.

Conclusions: That therapists base their prediction of dangerousness primarily on clinical variables reveals a substantial error that has to be remedied. Further research on the extent of relevance of clinical variables is needed. © 2005 Elsevier Inc. All rights reserved.

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1. Introduction

One of the most pressing issues in forensic psychiatry in German-speaking countries is the prediction of recidivism in sex offenders. Explicit interest in predicting sexual violence mainly arises from the

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increasing public and media attention resulting from spectacular offenses committed by repeat offenders in recent years. However, in fact sexual offences are relatively seldom committed by forensic patients. According to a comprehensive meta-analysis, the recidivist rates are far lower than generally assumed (Hall, 1995; Hanson & Bussiere, 1996). Even so there have been many attempts to make predictions regarding this clientele "safer" and to extend current empirical knowledge. Moreover political action has been taken to accommodate the increasing preoccupation with safety and the rising fear of criminality in the population — resulting in far-reaching consequences (e.g. passing of the "Law on Combating Sexual Offences and other Dangerous Crimes" which came into force on 26.01.1998; Seifert, Jahn, & Bolten, 2001).

2. Situation in Germany

The present situation in Germany is that the majority (75%) of the 6000 to 7000 sex offenders are placed in regular jails whereas only a relatively small group is placed in forensic hospitals. Nevertheless, there has been a steady increase in the rate of admissions to forensic hospitals while the trend in releases has been cautious. Consequently the percentage of sex offenders in special hospitals is rapidly increasing, being almost 40% in some and continuing to rise. In Germany approximately 5500 to 6000 patients are serving sentences in special hospitals at present.

Prior to discharge a risk assessment of sex offenders by the treating therapist is obligatory. Such an evaluation is one of the most difficult and responsible tasks in forensic psychiatry and psychology. Although the decision on the patient's actual release is taken by the legal system, the court still requires a thorough and reliable appraisal of the patient's dangerousness from those "who know him best".

3. Risk assessment

In the last few years several lists for predicting recidivism in sex offenders have been developed to facilitate this complex decision-making process (for reviews see Hanson, 2002). The main purpose of these measures is to help clinical psychiatrists and psychologists, expert witnesses and courts to assess the risk of reoffending (more objectively). Initially, these prediction scores were based mainly on static, historical items such as age at committing first offence, number of prior convictions for similar offences and behavioural disorders in childhood, which are by definition no longer alterable. If an evaluation of dangerousness were to be based predominantly on these factors, strictly speaking most of the patients would never be released. However, a criterion-oriented prediction of recidivism has to include both statistical *and* dynamic criteria, in combination with a psychosocial assessment taking into account all available information. Thus, clinical and dynamic factors are increasingly being employed in newer prediction scores, i.e. sufficient attention is paid to the importance of changes in behaviour, attitudes and values. Still, such transformations are considerably more difficult to operationalize and render objective than static criteria.

The present study analyses which criteria therapists in forensic hospitals in Germany use to assess the dangerousness of sex offenders. Of particular interest is establishment of whether the criteria designated as decisive in the currently known prediction scores are employed in actual decisionmaking in forensic institutions. Download English Version:

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