

# **“Using Post Conviction Sex Offender Polygraph Testing (PCSOT) as a Tool to Further Assess Sex Offender Risk Factors”**: The Polygraph Periodicals, article dated October 16, 2006

## **Introduction**

We have been using the polygraph as a physiological assessment tool in the 6<sup>th</sup> Judicial District Department of Correctional Services (DCS) since 1995. Since we contracted with a private examiner, statistical records and analysis were not kept in the early years. Our hypothesis was that having the polygraph as a tool in our assessment package enhanced admissions, confessions, and provided a more complete picture of the sex offender sitting before us. In 1999, the Iowa Department of Corrections (DOC) and DCS established a statewide polygraph program. Eight of us from across the state went to polygraph school to become certified polygraph examiners with specialization in post conviction sex offender testing (PCSOT). In 1999, I began keeping statistical records of polygraph examinations in the 6<sup>th</sup> Judicial District DCS.

PCSOT polygraph programs were traditionally based upon the treatment model and seen as a treatment aid for providers and group facilitators to deal with offender denial or minimization. The disclosure exam was heavily focused on resolving the number of victims the offender had amassed throughout his offending lifetime. Our program in the 6<sup>th</sup> District was primarily based upon that premise and I followed suit as the next examiner.

## **The Dynamic Supervision Project**

However, in 2001 our philosophy about sex offender supervision, treatment, and monitoring began to develop clarity and definition as we entered into a partnership with Dr. Karl Hanson, Andrew Harris, and the Solicitor General of Canada. The project was a huge undertaking called the Dynamic Supervision

Project (DSP). In brief summary, Dr. Hanson completed a study called a meta-analysis in 1996 that identified risk factors associated with sex offender recidivism. This meta-analysis was the foundational research for the development of his actuarial sex offender risk assessment tools. Dr. Hanson and Andrew Harris had a theory that beyond the actuarial (known historical) factors associated with recidivism, there were also dynamic factors (variables that are changeable) that are key predictors of sexual offense recidivism. Hanson and Harris conducted a study of sex offenders within their Canadian provinces in 1998 called Dynamic Predictors. From that study, specific dynamic factors emerged that appeared to be associated with recidivism. The researchers then needed to validate their study. The Dynamic Supervision Project emerged from that process and involved an active study of 1,000+ sex offenders on community based supervision. The study was inclusive of male and female adult sex offenders with varied sex offenses. The study involved multiple jurisdictions; the Canadian Provinces, the entire state of Alaska, and the 6<sup>th</sup> Judicial District of Iowa.

### **DSP Principles Introduced to the Polygraph Program**

As a result of that project, we have begun to purposely shape and mold our sex offender program (SOP) around that research. Our philosophy, treatment, supervision, and monitoring of sex offenders is now centered on the evidence based practices from Hanson and Harris' research. Key things emerged from the study that questioned previously held myths about sex offenders, factors associated with re-offense, and amenability to treatment. We began to challenge the traditional model of treatment and supervision, and the focus of our PCSOT polygraph testing.

The primary factors that emerged from the study which impacted our thinking about polygraph testing and what our focus should be were:

- Denial of the sex offense was not a significant factor associated with sex offense recidivism
- Minimization of the sex offense was not a significant predictor associated with sex offense recidivism
- The number of victims of an historical context (prior to the most recent sex offense) was not a significant factor associated with sex offense recidivism

The research supported that the following actuarial (historical) victim factors were significant and associated with sex offense recidivism:

- Any male victim
- Any unrelated victim
- Any stranger victims
- Victim access; an offender that continues to access a victim(s) after public disclosure and formal sanctions or discipline have been imposed

The study also established preliminary findings that there are dynamic factors which are predictive of sex offense risk. These factors are variable and changeable through the impact of treatment, supervision, and monitoring:

- Intimacy deficits
- Sex drive/pre-occupations
- Sexual self regulation
- General self regulation
- Cooperation with supervision
- Personality traits, disorders, negative moods, and hostility
- Victim access

Based upon this preliminary research, in 2003 our polygraph program took a pivotal turn from the traditional model primarily focused on using the polygraph as a tool to identify the historical number of victims, break denial, and confront discrepancies from

official records and offender admissions. Although those factors remained as a component of the polygraph examination, there was a fundamental shift to using the polygraph examination as a profiling tool to assess sex offender risk; static (unchangeable) factors and dynamic (changeable) factors.

### **Outcomes and Measures: The Polygraph Program Results**

This shift has seen positive outcomes with the scoring accuracy of the sex offender risk assessment tools (Static 99, Stable 2000, and Acute 2000). We have also seen positive outcomes within our polygraph program.

For example, when the focus of the polygraph program adhered to the traditional treatment model (designed to break denial, resolve index offense case discrepancies, and determine a historical total number of victims disclosed) the following statistics held true concerning the percentage of Inconclusive test results:

- 8/1999 through 6/30/2002:
  - Inconclusive test results maintained a consistent 8% of sexual history and specific issue exams (1999, 2000, 2001, 2002).

With the shift in 2003 to using the polygraph examination as a profiling instrument to better assess risk factors associated with recidivism the following statistics emerged concerning Inconclusive test results:

- 6/2003 through 6/2005:
  - Inconclusive test results maintained a consistent 3% of sexual history and specific issue exams (2003, 2004, 2005).

There was a 5% decrease in the number of inconclusive tests when the focus of the examination shifted from offense discrepancies and historical total number of victims to the identification of sex offense risk factors associated with recidivism. Further, in fiscal year 2003, there was an 80%

resolution closure rate for Deception Indicated results; admissions and/or confessions that would account for the noted deception. By fiscal year 2006, the resolution closure rate for Deception Indicated results had increased to 93%; a 13% improvement.

Lastly, throughout fiscal years 2000-2003, examinations were terminated for medical or mental health reasons at a consistent rate of 6% per fiscal year. Some of these terminations were due to examinees having mental health disorders of anxiety, depression, or schizophrenic traits. Most of these examinees were taking medications and were oriented to all spheres; time, person, place, and purpose. Although being a questionable subject for an examination most examinees were initially screened and determined to at least be suitable for a detailed interview and probable testing. However, the stress associated with the traditional interview and interrogation *seemed to contribute* to the termination of some of these examinations. Examinees displayed an inability or unwillingness to comply further or the examiner prematurely concluded the examination, having determined that the examinee was unsuitable for testing at that time.

Throughout fiscal years 2004-2006 the termination rate for examinees reporting medical or mental health issues was significantly reduced to a range of 1-2%. Based on these preliminary findings, it is possible to form a hypothesis that the purpose of the polygraph examination directly impacts issues of suitability for testing and being able to complete an exam. The examinee dealing with the medical or mental health issues that already create a heightened state of anxiety, paranoia, or arousal *could be* less susceptible to internal or external stressors which effect the testing *when the purpose of the testing* is to profile the offender and identify risk assessment factors, *rather than* the traditional interrogation into issues of denial, minimization, number of victims, and index case discrepancies.

## Conclusion

By using the polygraph examination to further assess sex offender risk factors inconclusive results have declined, fewer examinees are determined unsuitable for testing, and the focus of maintenance and monitoring testing has been more clearly defined as well. The sexual history interview and disclosure examination has already established the framework for polygraph testing to monitor many of the dynamic risk factors identified by the Stable 2000 and Acute 2000 risk assessment instruments:

- Intimacy deficits
- Attitudes supportive of sexual assault
- Sexual self regulation
- General self regulation
- Victim access
- Sexual pre-occupations/sex drive
- Substance abuse
- Significant social supports
- Personality traits, disorders, negative mood, and hostility

These target areas become the primary focus for the examiner to assess during the period of correctional supervision as we conduct maintenance and monitoring testing on a periodic basis.

At this point, our data is only preliminary and *other factors could be contributing to these overall results*. However, the observations we have made are certainly promising and noteworthy in advancing the field of PCSOT polygraph testing, the containment or collaborative treatment approach to sex offender management, and the accuracy of scoring sex offender risk assessment instruments.

Sincerely in Truth,

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### References/resources:

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“Where Should We Intervene: Dynamic Predictors of Sexual Offense Recidivism”, by R. Karl Hanson and Andrew Harris, 2/2000