



National Offender
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Evaluation of Social Skills and Emotion Modulation programmes delivered at a high- secure Personality Disorder Treatment Service

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Evaluated Treatment components

Social Skills Treatment component

- Underpinned by theory surrounding social competence and based on a CBT model of treatment.
- Delivered over eight to ten weeks (both individual and group sessions).
- **Treatment aims:** Enhance participants ability to achieve their personal life goals, develop competence in social and interpersonal situations.

Emotion Modulation Treatment component

- Based on a CBT model of treatment.
- Delivered over eight to ten weeks (both individual and group sessions).
- **Treatment aims:**
 - Develop participants insight into their own emotional world and links to risk,
 - Educate about the adaptive, healthy functions of emotions,
 - Educate about how emotions can become problematic when they are over-controlled, and when they are over engaged.
 - Skills based to assist participants to modulate, change or tolerate their emotional responses.

Core considerations from the literature

Treatment effectiveness with PD and Psychopathic Offenders

- Enduring debate on the treatability of severe personality disordered offenders with a longstanding view that they are 'untreatable'.
- Despite recent findings (Tew et al., 2012; Wong et al., 2012; Saradjan, Murphy & McVey, 2013) there remains to be a level of doubt and uncertainties.

Social Skills, Offending and Treatment Outcomes

- Deficits in social interaction, social problem solving and social cognitive abilities has been linked to greater risk of offending (McMurrin & McGuire, 2005; Losel & Bender, 2003; Robertiello & Terry, 2007).
- Interpersonal nature of PD disorders, social skill deficits are heightened.
- Research to-date has not evaluated primary treatment outcomes of social functioning for PD and psychopathic offenders.

Core considerations from the literature

Emotion modulation, Offending and Treatment

- PD offenders struggle to communicate their current emotional state, they inhibit and over control emotional responses. This contributes to a secondary emotional response of anger (Linehan, 1993).
- Associations have been found with psychopathy (both factor PCL-R Factor 1 and 2) and emotion dysregulation. A stronger effect has been found for factor 2 (Donahue, McClure & Moon, 2014).
- Psychopathic offenders hold deficits in processing, experiencing an acknowledging emotional stimuli (Casey et al., 2013).
- Effectiveness of treatment in addressing deficits in emotion regulation is limited but there is a growing literature base exploring DBT (Nee & Farman, 2007).

Research rationale

- Evaluate the treatment components to support clinical practice at the Westgate unit.
- Effectiveness of the components on addressing treatment targets.
- Explore treatment effect for “high” and “moderate” scoring psychopathic offenders.
- Contribute empirical evidence to the academic field to support wider practices.

Method – Social Skills Treatment Component

- 44 adult male offenders who had completed treatment between 2008 and 2016.
- Participants were categorised into either ‘moderate psychopathy’ (PCL-R score <29) or ‘high psychopathy’ (PCL-R score >30). There were 22 and 21 participants in each group respectively.

Clinical Change Evaluation (pre and post treatment)

Psychometric tool	Description	Treatment targets
Inventory of Interpersonal Problems (IIP; Horowitz et al., 2000)	64-item measure of distress arising from interpersonal sources.	<ul style="list-style-type: none"> • Identify and monitor patterns of social behaviour • Socially competent behaviour
Interpersonal Reactivity Index (IRI; Davis, 1980)	28-item measure of cognitive and emotional components of empathy.	<ul style="list-style-type: none"> • Accurately perceive the social environment • Social problem solving • Perspective taking • Empathic concern
Self-esteem Scale (Thornton et al., 2004)	8-item scale relating to how participants feel about themselves	<ul style="list-style-type: none"> • Self esteem • Self confidence

Results: Social Skills treatment component

Psychometric tool	N	Pre-treatment (Mean)	Post-treatment (Mean)	Significance
Inventory of Interpersonal Problems				
Total	41	66.00	51.71	p < .01
Moderate Psychopathy	21	73.81	59.14	
High Psychopathy	20	57.80	43.90	
Interpersonal Reactivity Index - ECS				
Total	42	16.07	17.02	p = .765
Moderate Psychopathy	21	16.05	16.71	
High Psychopathy	21	16.10	17.33	
Interpersonal Reactivity Index - PTS				
Total	42	15.40	17.38	P < .05
Moderate Psychopathy	21	13.71	15.76	
High Psychopathy	21	17.10	19.00	
Self-esteem Scale				
Total	39	6.90	7.69	p = .175
Moderate Psychopathy	19	7.95	7.42	
High Psychopathy	20	5.90	7.95	

May suggest some treatment need areas are untreatable **OR**

- Insufficient focus on empathic concern during component.
- Unrealistic treatment target.

No significant main effect of treatment.

T-tests found a significant difference for high psychopathy group only (p < .05).

Method: Emotion Modulation Treatment Component

Sample

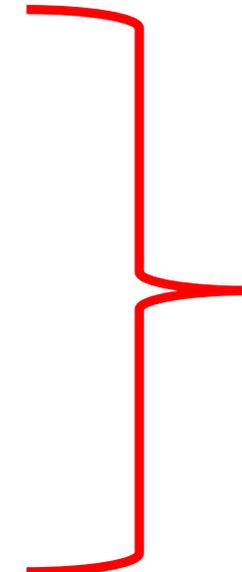
- 48 adult male offenders who had completed treatment between 2008 and 2016.
- Participants were categorised into either 'moderate psychopathy' (PCL-R score <29) or 'high psychopathy' (PCL-R score >30). There were 18 and 30 participants in each group respectively.

Clinical Change Evaluation (pre and post treatment)

Psychometric tool	Description	Treatment targets
Emotion Control Questionnaire (ECQ; Roger & Najarian 1989)	56 item scale that assess emotional response; Rehearsal, Emotional inhibition, Aggression Control and Benign Control.	<ul style="list-style-type: none">• Insight into function and emotional responses.• Change or tolerate emotions.
State-Trait Anger Expression Inventory (Staxi-II; Spielberger, 1999)	57 item scale that assess the experience, expression and control of anger. Three sub-scales; State Anger, Trait Anger and Anger Expression/Control.	<ul style="list-style-type: none">• Intensity of angry feelings and the extent to which a person feels like expressing anger at a particular time.

Results: Emotion Modulation Component

Psychometric tool	Pre-treatment (Mean)	Post-treatment (Mean)	Significance
ECQ: Rehearsal	11.36	7.52	$p < .01$
ECQ: Emotion Inhibition	13.09	11.30	$p < .05$
ECQ: Aggression Control	13.11	17.91	$p < .01$
ECQ: Benign Control	14.84	17.66	$p < .05$
STAXI: State Anger	16.79	15.72	$p < .05$
STAXI: Trait Anger	17.80	15.52	$p < .01$
STAXI: Anger Expression and Control	72.44	77.16	$p < .05$



- Positive clinical change across all scales.
- Similar pattern of findings for 'high' and 'moderate' psychopathy groups.

Main findings

- Contributes further insight into an area that had previously been considered to hold insufficient evidence to justify treatment.
- Positive change for some treatment need areas > PD offenders can make shifts in treatment.
- The findings contradict the notion that PD offenders cannot be treated.
- We need to review findings in terms of treatment delivery of these programmes;
 - Consider the appropriateness of aiming to develop psychopathic offenders' empathy.
 - Explore PD diagnoses and treatment outcomes
 - Participants experiences of treatment to identify factors that may be key to maximising benefit.

Limitations:

- Restrictions on external validity
- Short term evaluation
- Reliance on self-report measures, specifically with this group of offenders.



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Thank you!

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