

**Sixth Annual Forensic Psychology Masters Research Conference,  
School of Psychology, University of New South Wales 2008**

<b>Session 1 9.15-10.45</b>	
9.15–9.30	<b>Conference Opening</b> Associate Professor Brett Hayes (Head of School)
9.30–9.55	<i>Predictors of Treatment Attrition for Intra-familial Child Sexual Offenders</i> <b>Luke Brabant</b>
9.55–10.20	<i>Sexual offending attributions and the victim- offender relationship as predictors of sexual recidivism in intrafamilial offenders</i> <b>Patrycja Luketic</b>
10.20–10.45	<i>Denial in Intra-familial child sexual offenders: it's impact on treatment acceptance and recidivism</i> <b>Sophie Purcell</b>
10.45–11:15	<b>Coffee Break</b>
<b>Session 2: 11.15-12.30</b>	
11.15–11.40	<i>Hot Stuff: Alcohol, Rumination, Psychopathy, Trait Displaced Aggression and the Depletion of Executive Functioning as a Recipe for Triggered Displaced Aggression</i> <b>Amanda White</b>
11.40–12.05	<i>Effects of alcohol on dehumanization</i> <b>Yat Sang Cheung</b>
12.05–12.30	<i>Does alcohol intoxication differentially affect recognition of own-race and other-race faces?</i> <b>Kirin Hilliar</b>
12.30–1.45	<b>Lunch and Supervisors meeting</b>
<b>Session 3: 1.45 to 3.35</b>	
1.45–2.10	<i>An evaluation of a custodial based treatment program for high risk sex offenders</i> <b>June Fong</b>
2.10–2.35	<i>An evaluation of a domestic violence perpetrator program: Determining efficacy through short-term recidivism rates</i> <b>Tamara Sweller</b>
2.35–3.00	<i>Clinical Utility of Structured Risk Assessment for Child Protection Matters</i> <b>Annalese Bolton</b>
3.00 -3.25	<i>Highly probable or 99% certain: The influence of clinical versus actuarial expert facial mapping evidence</i> <b>Helen Wallace</b>
3.25-3.35	<b>Closing remarks – Richard Kemp, Director Forensic Masters Program</b>

## ***SESSION ONE: 9.30 to 10.45***

### ***Predictors of Treatment Attrition for Intra-familial Child Sexual Offenders***

**Luke Brabant**

**Supervisor: Associate Professor Jane Goodman-Delahunty**

Treatment attrition from sex offender treatment programs is high. Given the elevated risk of recidivism for treatment dropouts, there has been an increase in interest within psychological literature in the development of models that aid in predicting treatment attrition so that early intervention can occur. However, there has been considerable discrepancy in what factors are considered to classify sexual offenders as being high risk of attrition. One explanation for this discrepancy is the heterogeneity of sexual offender types. Intrafamilial child sex offenders differ in many respects to other sexual offenders and thus need to be considered separately. The current study aimed at identifying whether intrafamilial child sexual offenders in a community based treatment program who failed to complete treatment ('noncompleters') were at a higher risk of reoffending than offenders who completed treatment ('completers') or those who never received treatment at all ('declined'). Moreover variables that fall under the Risk, Need and Responsivity principles were examined to determine if they could reliably predict treatment attrition. Results indicated that treatment noncompleters reoffended at a comparable rate to treatment completers and offenders who were declined treatment. Moreover, one demographic and two responsivity variables were found to reliably predict attrition. These findings are discussed with reference to current psychological theories and research, and practical implications, limitations, and suggestions for future research are provided.

### ***Sexual offending attributions and the victim- offender relationship as predictors of sexual recidivism in intrafamilial offenders***

**Patrycja Luketic**

**Supervisor: Associate Professor Jane Goodman-Delahunty**

This project aims to investigate sexual offending attributions and the victim-offender relationship as predictors of sexual recidivism in intrafamilial offenders. Research has shown that causal attributions that are internal, stable and uncontrollable are more difficult to modify than attributions categorised as external, unstable and controllable. Moreover, the way in which sexual offenders reason about their behaviour is biased by the implicit theories that person holds. However, the effect of biological versus nonbiological parental status on the type of attributions for offending behaviour is unknown. The results were not statistically significant, although there was a trend which confirmed that offenders who made internal, stable and uncontrollable attributions were more likely to recidivate compared to those offenders who external, unstable and uncontrollable causal attributions. However, the type of causal attributions made by offenders is independent of their relationship with the victim. The results suggest that causal attributions which are internal, stable and uncontrollable in nature are difficult to modify and they appear to help maintain the offending behaviour. However, when the attribution model was compared with a competing behavioural based model, the results suggested that both models were equally able to account for recidivism in the sample of intrafamilial offenders. The results of the study have considerable practical importance and have the potential to inform and influence specialised treatments and interventions.

***Denial in Intra-familial child sexual offenders: it's impact on treatment acceptance and recidivism***

**Sophie Purcell**

**Supervisor: Associate Professor Jane Goodman-Delahunty**

Following conviction for a sexual offense, many offenders persist in denying that the offense took place, the severity of the offense or their participation in the offense. Previous research suggested that, in general, denial was unrelated to sexual or violent recidivism. However, research on intrafamilial child sexual offenders indicated that denial was associated with increased sexual recidivism. Issues arise, and are addressed in the current study, with the definition of denial, the heterogeneity of the sexual offenders studied, the stage at which denial is measured and the effect of denial on treatment. Participants in the current study were 214 males assessed for treatment at the NSW Pre-Trial Diversion of Offenders Program (Cedar Cottage) between 1989 and 2003. These participants were grouped into four levels of denial measured pre-treatment, and the results revealed that as denial increased, the likelihood of being accepted into the treatment program decreased significantly. Pre-treatment denial did not have any impact on any type of time to recidivate. Exploration of demographic, offense, treatment and risk measure variables were also carried out. The results raise concern about the treatment options available to offenders who initially deny their offense. A broader, more fluid definition of denial is recommended to inform treatment amenability and should be a treatment tool and not an exclusion criterion.

## ***SESSION TWO 11.15 to 12.30***

### ***Hot Stuff: Alcohol, Rumination, Psychopathy, Trait Displaced Aggression and the Depletion of Executive Functioning as a Recipe for Triggered Displaced Aggression***

**Amanda White**

**Supervisor: Dr. Tom Denson**

This is the first experiment to examine temporary impairment in executive functioning as the mediating link between alcohol and rumination on triggered displaced aggression (TDA). Built on previous theories and research, it was proposed that impaired executive functioning, induced by alcohol and provocation-focused rumination, leads individuals to elicit aggressive behaviour, particularly for those predisposed to such responding. An ethnically diverse sample of 100 young adult participants (47 men, 53 women) was recruited from a university community. All participants were provoked by an experimenter, randomly assigned to a 2 (alcohol, placebo) x 2 (rumination, distraction) between-participants design. The Stroop assessed inhibitory control. Participants were then given an opportunity to aggress against a fictitious annoying participant by determining the amount of hot sauce the fictitious participant must consume. Results showed that executive functioning was most impaired among participants who received alcohol and ruminated. These participants also displayed the highest levels of TDA. Furthermore, trait displaced aggression interacted with alcohol, and psychopathic tendencies interacted with rumination to produce higher levels of aggression. These results provide support for the attention allocation model and theories suggesting that depletion of executive functioning may increase aggressive responding. Further this is the first study to examine the role of personality dimensions: psychopathic tendencies and trait displaced aggression within TDA. Understanding how such situational and personal factors affect aggressive responding within the TDA has broader implications for real world aggression such as road rage and intimate partner violence. The implications and limitations of such research are discussed.

### ***Effects of alcohol on dehumanization***

**Yat Sang Cheung**

**Supervisor: Dr Tom Denson**

The present study investigated the effects of alcohol on outgroup dehumanisation. Humans have a natural tendency to dehumanise the outgroup. The current study focused on 2 forms of dehumanisation: denying others (a) uniquely human emotions (infra-humanisation; Leyens et al., 2000; Leyens et al., 2001) and (b) traits that represent high levels of human nature. Uniquely human emotions include “love”, “hope”, and “contempt”, as opposed to emotions perceived to be shared with animals, such as “sadness” and “happiness”. Traits that represent high levels of human nature include “active”, “curious”, and “Impatient”, as opposed to traits that simply differentiate humans from animals but not related to high levels of human nature, such as “humble”, “polite”, and “ignorant”. Previous findings suggested that inhibition might be involved in the regulation of dehumanisation (Viki et al., 2006). Alcohol is well-known for its disinhibition effects and numerous studies have shown that alcohol-intoxicated people are less capable of withholding prepotent responses (e.g., Fillmore & van Selst, 2002; Finn, Justus, Mazas, & Steinmetz, 1999). It is possible that intoxicated individuals will display greater dehumanisation tendencies due to decreased inhibitory control. This study tested this hypothesis by administering alcohol or placebo to 103 university students (50 males, 53 females), who subsequently completed measures of dehumanisation. These participants were recruited from the campus of the University of New South Wales and were regular alcohol drinkers. In measures of dehumanisation, participants rated either 3 ingroups (UNSW students, own religious group, and own national group) or 3 outgroups (University of Tasmania students, Muslims, and Aboriginals) on their ability to experience uniquely human emotions

and non-uniquely human emotions, as well as high human nature traits and low human nature traits. It was predicted that participants will reserve for their ingroups uniquely human emotions and high human nature traits but not non-uniquely human emotions and low human nature traits. Current findings and implications for future research are discussed.

*Does alcohol intoxication differentially affect recognition of own-race and other-race faces?*

**Kirin Hilliar**

**Supervisor: Dr Richard Kemp**

The own-race bias (ORB) refers to the general tendency for people to be better at recognising own-race faces compared to other-race faces. While most research has examined the ORB in the context of perceptual expertise, my research investigates the social-cognitive factors that influence how we process, encode, and recognise faces, and may thus contribute to the ORB. While my first studies looked at the effects of social labels on face recognition, my current experiment aims to test whether recognition of own-race and other-race faces is differentially affected by alcohol intoxication. The theoretical background, study design, and provisional results will be discussed.

### ***SESSION THREE: 1.45 to 3.25***

#### ***An evaluation of a custodial based treatment program for high risk sex offenders***

**June Fong**

**Supervisor: Dr. Richard Kemp, and Jayson Ware**

The present study examined the efficacy of a sex offender treatment program for high-risk male sex offenders in custody. Program evaluation is becoming an increasingly important aspect of sex offender treatment, as service providers have a duty of care to the clients as well as the public at large to ensure that those released are not at risk of causing further harm. In New South Wales, recently introduced legislation (Crimes (Serious Sex Offenders) Act 2006) now allows for detention or close supervision of sex offenders beyond the expiration of their prison terms if they have not made any attempts at rehabilitation in custody. This has made it imperative for treatment providers to demonstrate empirical evidence of the efficacy of treatment which can stand up to close legal scrutiny and challenges. The current study adopted an incidental cohort design to compare recidivism rates in a group of treated offenders, a group who started but did not complete treatment, and a group who was found suitable but subsequently declined to participate in treatment. Rates of reoffending were compared in terms of the number of reconvictions, length of time before reoffending upon release from incarceration, as well as changes in severity of sexual offending patterns. The implications of the results for the treatment of sex offenders and for future research and program evaluation strategies will be discussed.

#### ***An evaluation of a domestic violence perpetrator program: Determining efficacy through short-term recidivism rates***

**Tamara Sweller**

**Supervisor: Dr Richard Kemp and Chris Blatch**

Domestic violence is a recurring problem in the community. The high recidivism rate of offenders highlights the importance of effective perpetrator treatment programs. The NSW Department of Corrective Services initiated the Domestic Violence Integrated Court Model (DVICM) and provided a pilot Domestic Violence Perpetrator Program (DVPP) within the community. An initial evaluation of the DVPP was presented in the current study through a comparison of short-term recidivism rates between three groups: DVPP group, an alternate DV program group, and a no treatment control group. Results indicated that the DVPP and control groups were similar in terms of the time until offenders committed their first re-offence, while the alternate DV program group overall re-offended significantly sooner. Although previous research has indicated that program compliance is related to recidivism, the predictors of program compliance as found by Stephen (2007) differed in the current study. Compliance with the DVPP did not reduce rates of recidivism within this group; the implications for this result are discussed. However, the DVPP group appeared to have a promising start with respect to recidivism rates compared with the other groups. A longer follow-up period might present positive results for this intervention.

*Clinical Utility of Structured Risk Assessment for Child Protection Matters*

**Annalese Bolton**

**Supervisor: Dr Chris Lennings and Dr Helen Paterson**

It is unclear why structured risk assessment approaches, that are well established and shown to be superior in most forensic jurisdictions, have had little uptake in the Australian child protection field. Thus, this study examines whether structured risk assessment concepts have clinical utility for child protection matters. Using a panel study design involving eight highly experienced and respected Children's Court clinicians, this study explores clinician reactions to the direct application of structured risk assessment concepts (i.e. actuarial alone, contextual alone, and a combined approach) to 30 reunification case studies (adapted from actual Children's Court cases). In particular, this study focuses on three risk assessment concepts. First, the actuarial empirically validated South Australian Family Risk of Abuse and Neglect (SA-FRAAN; Johnson, Wagner, & Weibush, 2000). Second, a revised version of the consensus-based Family Strengths and Needs Assessment (FSNA; Shlonsky & Wagner, 2005) as a substitute and potential starting point for the development of an appropriate contextual device (as none currently exist in child protection). Third, a proposed Risk Matrix model involving a process of combining the actuarial and contextual assessments to formulate an overall risk estimate. In addition, inter-rater reliability rates were computed. Preliminary data indicate that both measures were seen as useful adjuncts to the assessment process.

*Highly probable or 99% certain: The influence of clinical versus actuarial expert facial mapping evidence*

**Helen Wallace**

**Supervisor: Dr Richard Kemp**

The identities of people filmed on CCTV while committing a crime are often contested in court. Courts may utilise experts to determine whether the accused is the perpetrator shown on the video. One of the techniques that has begun to be employed in court is known as facial mapping analysis which refers to several techniques used to compare different facial images (Bromby, 2003). Currently facial mapping evidence is based on less accurate clinical opinion rather than more accurate actuarial testimony. Jurors have been shown to be more influenced by expert clinical opinion than actuarial testimony in research regarding dangerousness in sexually violent predators (Lieberman, Krauss, Kyger & Lehoux, 2007), capital sentencing (Krauss & Lee, 2003; Krauss & Sales, 2001), battered woman syndrome (Schuller, 1992) and repressed memories of childhood sexual abuse (Shuman & Sales, 1998). 159 participants viewed CCTV footage in which the accused was either the same or a different individual to the perpetrator captured on CCTV and were then presented with either clinical, actuarial or no expert evidence. The findings and limitations of the study are discussed, along with suggestions for future research.