

Sex offender... forever? ^[1]

Dear Alice,

Is it true that sex offenders cannot be cured and are likely to continue their unacceptable behavior for the rest of their lives?

Answer

Dear Reader,

There's been a lot of debate over the psychology of sex offenders, and studies have produced varying results. Enough evidence, though, suggests that sex offenders are not exactly "incurable." To be more specific, some sex offenders have been shown to respond to treatment and rejoin society without committing any further crimes. Studies have even shown that sex offenders are less likely to commit additional crimes than other sorts of criminals, partly because the shame of being caught and placed on trial can serve as a deterrent against future offenses. A "sex offender" is the legal term for a person who has been arrested and legally convicted of a crime such as:

- Rape
- Sexual abuse
- Forcible touching
- Sexual behavior with a child
- Facilitating sexual behavior with a controlled substance
- Unlawful imprisonment
- Patronizing or promoting sex workers
- Distributing, creating, or possessing child pornography
- Incest
- Unlawful surveillance

The word "cure" is a tricky one in this context. There is no magic pill or method of therapy that will remove all high-risk impulses from a sex offender. The acts of sex offenders run the gamut and their arousal mechanisms differ so much, making it hard to draw conclusions based on this diverse group. Studies also have varied in the type of treatment or therapy used. Plus, opportunities for comprehensive, long-term studies are rare. Although treatment is not 100 percent effective, courses of treatment can help people who have been convicted of sex offenses

to identify and learn about their urges and then control them, reducing the risk of repeat offenses. It might be useful to think about "curing" sex offenders in a way that people often talk about "curing" alcoholics — offenders/addicts are never free of their issue, and they are always in recovery dealing with it every day of their lives.

The first major attempts to treat sex offenders came in the 1930s — offenders were deemed "mentally disordered" and committed to psychiatric facilities. Starting in the 1970s, new patterns of treatment emerged that focused on offenders becoming more self-aware and teaching them to control their high-risk impulses. Current approaches to treating sex offenders include:

Cognitive-behavioral

Counselors and therapists work toward changing sex offenders' high-risk thoughts and patterns of arousal.

Psycho-educational

Sex offenders often don't realize the impact of their behaviors on non-consenting adults and children. Offenders are made more aware of their responsibility for the acts they commit, and focus is placed on the offender's concern for his/her victim(s).

Pharmacological

Medication is used to reduce sexual arousal.

Often, these strategies of treatment are used in tandem and, to be most effective, are begun soon after a sex offender is incarcerated. Unfortunately, the prison environment often interferes with productive treatment. Once they are released, they are often monitored for a period of time as a deterrent against future crimes.

The issues raised in this question are complex and the medical research that has been conducted is neither comprehensive nor conclusive. Definitive answers may take a while to appear, although there are treatment program models that are showing positive results. To continue to learn more about these issues, you can start at the [Association for Treatment of Sexual Abusers \(ATSA\) home page](#) [2]. While the path to recovery may be difficult, sex offenders can receive effective treatment and refrain from committing sexual offenses in the future.

Alice!

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