NOTA
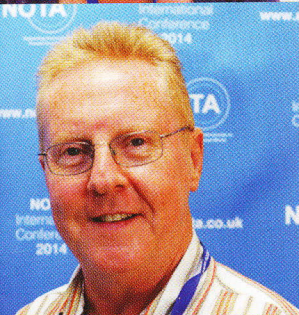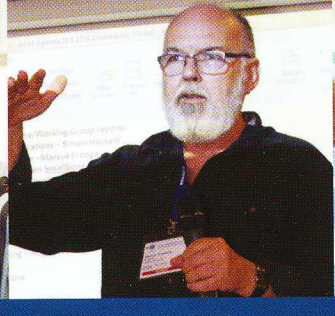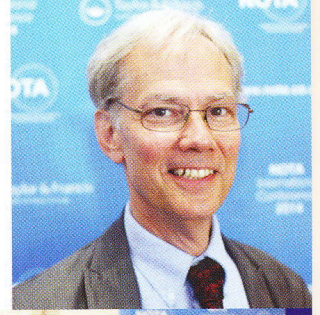# *NEWS*

Catch up with events at
NOTA's Annual Conference at
York University in September

Supporting Professionals to Prevent Sexual Abuse

Stay informed by visiting the NOTA website: **www.nota.co.uk**

For regular updates, News, Policies and Good Practices, NOTA Training Committee and Branch Events together with information on Publications and Resources

NOTA

Supporting Professionals to
Prevent Sexual Abuse

York Conference Report 2014
Tony Morrison Memorial Lecture Helping Others (and Ourselves) Change Course: A Brief Case for Motivational Interviewing - David S. Prescott, LICSW

In what would become a highly influential essay back in 1974 criminologist Robert Martinson asked 'Does nothing work?' His concern that rehabilitation efforts in prisons weren't working resulted in massive de-funding and elimination of services in the criminal justice world. His essay, which became the basis of the 'nothing works' philosophy, was premature. Indeed, the following year, Martinson was part of a team whose findings were more optimistic (Lipton, Martinson, & Wilks, 1975). Martinson would subsequently recant his earlier arguments (Martinson, 1979), but by then the stage was set for decades of belief that criminals don't change and that treatment doesn't work. It would be roughly 15 years before improved statistical methods further supported rehabilitative efforts in the criminal justice field (e.g., Gendreau & Ross, 1987).

Against this backdrop and prompted by concerns that traditional counseling approaches were not enough to help people lead abuse-free lives, efforts to treat people who had sexually abused have historically often been overtly confrontational in nature (e.g., Salter, 1988). However, a meta-analysis by Karen Parhar and her colleagues found that coercive methods of correctional treatment are less successful than voluntary, invested participation (Parhar, Wormith, Derkzen, and Beauregard, 2008). Ultimately, recent studies of psychotherapy and therapeutic processes, including with people with sexual behavior problems, have made clear that:

- The most effective therapists who treat sexual behavior problems are warm, empathic, rewarding, and directive (Marshall, 2005);

- Poorly administered treatment can replicate the dynamics of abusive relationships. For example, clients in treatment who simply follow their therapists' orders may be re-enacting power-based relationships similar to intimate-partner violence (Shamai & Buchbinder, 2010);

- Therapists who treat sexual behavior problems often believe themselves to be more helpful than their clients do (Beech & Fordham, 1997);

- The average therapist rates themselves as more effective than approximately 80% of their peers (Walfish, McAlister, O'Donnell, & Lambert (2012);

- People tend to change more in response to what they hear themselves say than in response to what others say to them (Bem, 1972);

- Although many people start to make changes to their lives because of outside factors, they typically find their own internal reasons for change along the way (Deci & Ryan, 2002).

Unfortunately, many of these factors can conspire against professional attempts at self-improvement and establishing effective alliances with clients. Why work to improve our communication skills if we already think we're more effective than our peers? This is where approaches such as motivational interviewing come in. By practising an evidence-based communication style, we can improve our ability to make our other treatment approaches meaningful to clients.

At its heart, motivational interviewing (MI) is 'a collaborative, goal-oriented style of communication with particular attention to the language of change. It is designed to strengthen personal motivation for and commitment to a specific goal by eliciting and exploring the person's own reasons for change within an atmosphere of acceptance and compassion' (Miller & Rollnick, 2013, p. 29). Central to this definition are the following:

- Four key processes in MI are *engaging, focusing, evoking, and planning;*

- *Engaging* is the process of establishing a helpful connection and working relationship;

- *Focusing* is the process by which you develop and maintain a specific direction in the conversation about change;

- The process of *evocation* involves eliciting the client's own motivations for change and lies at the heart of MI;

- The *planning* process encompasses both committing to change and formulating a concrete plan of action;

- Five key communication skills used throughout MI are asking open questions, affirming, reflecting, summarizing, and providing information and advice with permission (p. 36).

Even today, the MI spirit factors of

partnership, acceptance, and compassion can seem very strange to professionals who find themselves concerned by their clients' past behavior. It is ironic, however, that professionals can have such a difficult time developing the MI spirit with people who have sexual behavior problems, when research shows that problems with developing and maintaining relationships are a strong risk factor for sexually abusive behavior. In any case, developing the MI spirit requires practice for people treating sexual behavior problems. However, practitioners using MI are often among the first people in these clients' lives to develop a healthy relationship with them.

Of course, developing the style, spirit, and skills of motivation can take years of work. Many go to motivational interviewing trainings but do not actively hone their skills. It is hoped that this brief overview serves to inspire readers to re-connect with this area of therapeutic practice.

David Prescott, Director of Professional Development and Quality Improvement, Beckett Family of Services, Maine, USATrust and member of NOTA NEC

References

Beech, A. & Fordham, A. S. (1997) Therapeutic climate of sexual offender treatment programs, *Journal of Sexual Abuse,* Vol. 9 (3): 219-237.

Bem, D.J. (1972) Self-perception theory. In L. Berkowitz (Ed.), *Advances in experimental social psychology,* Volume 6, 2–62. New York: Academic Press.

Deci, E. L. & Ryan, R. M. (Eds) (2002) *Handbook of Self-determination* Research, University Rochester Press.

Gendreau, P. & Ross, R. R. (1987) Revivification of rehabilitation: Evidence from the 1980s, *Justice Quarterly,* Vol. 4 (3): 349-407.

Lipton, D., Martinson, R. & Wilks, J. (1975) *The effectiveness of correctional treatment:* a survey of treatment evaluation studies, Praeger

Marshall , W. L. (2005) Therapist style in sexual offender treatment: Influence on indices of change. *Sexual Abuse: A Journal of Research & Treatment,* Vol. 17 (2):109-116.

Martinson, R. (1979). New Findings, New Views: A Note of Caution Regarding Sentencing Reform.

Hofstra Law Review, Vol. 7: 242-258.

Miller, W.R. & Rollnick, S. (2013) *Motivational interviewing: Helping people change,* 3rd Ed. New York: Guilford.

Parhar, K. K., Wormith, J. S., Derkzen, D. M. & Beauregard, A. M. (2008) Offender Coercion in Treatment: A Meta-Analysis of Effectiveness, *Criminal Justice and Behavior*, Vol. 35 (9): 1109-1135.

Salter, A. (1988) *Treating Child Sex Offenders and Victims: A Practical Guide,* SAGE Publications.

Shamai, M. & Buchbinder, E. (2010) Control of the Self: Partner-Violent Men's Experience of Therapy, *Journal of Interpersonal Violence,* Vol. 25 (7): 1338-1362.

Walfish, S, McAlister, B., O'Donnell, P. & Lambert, M. J. (2012) An investigation of self-assessment bias in mental health providers, *Psychological Reports* Vol. 110 (2): 639-44.