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Research at a glance

Outcomes for Sex Offenders with Concurrent Substance Abuse and Mental Health Disorders

KEY WORDS: *sex offenders, concurrent disorders, mental disorder, substance abuse, reoffending*

What it means

Sex offenders with concurrent mental health and substance abuse disorders experience more negative outcomes than sex offenders with a mental disorder only or the general sex offender population. Offenders with concurrent disorders require a correctional plan that includes both specific correctional programs to reduce their multiple criminogenic needs as well as specialized interventions to stabilize mental health. Sex offenders with a mental disorder only also experience more negative outcomes than the general sex offender population. Programs for Aboriginal sex offenders should consider that there are higher rates of concurrent mental health and substance abuse disorders than among non-Aboriginal sex offenders.

What we found

Compared to the population of sex offenders, those with concurrent disorders had significantly higher criminal risk and criminogenic need ratings, higher rates of serious and minor institutional charges, more admissions to administrative segregation, and lower correctional program completion rates. They were more likely to have adult women victims than the other sex offender groups. On release, 29% of sex offenders with concurrent disorders returned to custody with an offence within one year, a rate over three times higher than the general sex offender population (8%). However, survival analyses revealed much of this gap was accounted for by group differences in sentence length, age at release, prior adult convictions, the rating on the associates and employment needs domains. Aboriginal offenders are over-represented among sex offenders with concurrent disorders, representing 42% of offenders with a concurrent disorder, but only 25% of the general sex offender population.

Sex offenders with a mental disorder only also had poorer outcomes than the population of sex offenders, but not as poor as those with concurrent disorders. The mental disorder only group had slightly but significantly greater need and criminal risk ratings, more institutional charges, and more

admissions to segregation than the population of sex offenders. They were more likely to have only child and adolescent victims than the other two sex offender groups. Rates of returns to custody with an offence within the mental disorder group were approximately double that of the sex offender population, but this difference was not significant.

Why we did this study

Past research has shown that offenders with concurrent disorders have more negative outcomes than other offenders and substance abuse appears to be a contributor to these results. Information on sex offenders with mental disorders and concurrent disorders is important to inform case planning.

What we did

Sex offenders with accepted referrals to the Community Mental Health Initiative were divided into two groups – offenders with a confirmed mental disorder only ($n = 86$) and those with concurrent substance abuse disorders ($n = 99$). A substance abuse disorder was defined by moderate or greater ratings on the Alcohol Dependence Scale or the Drug Abuse Screening Test. These groups were compared on profile characteristics and outcomes to the population of sex offenders admitted to custody between April 2001 and December 2010.

For more information

Wilton, G., Stewart, L.A., & Mossière, A. (2014). *Outcomes for sex offenders with concurrent substance abuse and mental health disorders* (Research Report R-335). Ottawa, ON: Correctional Service of Canada.

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