Purpose of Guiding Principle is to guide our work

1. **The highest priority of these Standards and Guidelines is to maximize community safety through the effective delivery of quality evaluation, treatment and management of sex offenders.**

2. **Sexual offenses are traumatic and can have a devastating impact on the victim and victim’s family.**

   Sexual offenses violate victims, and can lead to common and serious consequences across all areas of victims’ lives, including chronic and severe mental and physical health symptoms, as well as social, family, economic, and spiritual harm. Research and clinical experience indicate that victims of sexual abuse often face long-term impact and continue to struggle for recovery over the course of their lifetime. The impact of sexual offenses on victims varies based on numerous factors. By defining the offending behavior and holding offenders accountable, victims may potentially experience protection, support and recovery. Professionals working with sexual offenders should be alert to how offenders’ behaviors may inflict further harm on persons they have previously victimized.

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1 Center for Sex Offender Management (2007). Enhancing the Management of Adult and Juvenile Sex Offenders: A Handbook for Policymakers and Practitioners. Center for Effective Public Policy, U.S. Department of Justice, Office of Justice Programs, 2005-WP-BX-K179 and 2006-WP-BX-K008; Cite Statute
3. **Community safety and the rights and interests of victims and their families, as well as potential victims, require paramount attention when developing and implementing assessment, treatment and management of sex offenders.**

4. **Offenders are capable of change.**

Responsibility for change ultimately rests with the offender. Individuals are responsible for their attitudes and behaviors and are capable of eliminating abusive behavior through personal ownership of a change process. While responsibility for change is the offender’s, the therapeutic alliance between the offender and the therapist is a predictive and important facet of responsibility leading to behavioral change. A warm, direct, and empathic therapeutic approach contributes to an offender’s motivation to change, as does the supervising officer’s positive working alliance with the offender.

5. **The treatment and management of sex offenders requires a coordinated response by the Community Supervision Team (CST) and will be most effective if SOMB providers and the entirety of the criminal justice and social services systems apply the same principles and work together.**

Community safety is enhanced when treatment providers and community supervision professionals practice in their area of specialization and work together. This collaboration should include frequent and substantive communication about information that will assist in reducing an offender’s risk to the community. When the CST members respect the individual roles and mutually agree upon their goals, the offender can be treated and managed more effectively.

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6. Community supervision is an opportunity, the success of which is dependent upon a sexual offender’s willingness and ability to cooperate with treatment and supervision, and be accountable for their behaviors. Accordingly, members of the Community Supervision Team should employ practices designed to maximize offender participation and accountability.

7. Treatment and supervision are most effective when they are individualized, and incorporate evidenced based and research informed practices.

8. Risk for future sexual offending varies and may increase or decrease. The intensity and duration of treatment and supervision should respond to these variations in risk.

Individual assessment and evaluation of risk should be an ongoing practice. Treatment approaches and supervision plans should be modified accordingly. Effective management of risk balances the use of external controls with the development of individual protective factors and self-regulation in order to reduce risk, enhancing the offender’s ability to live safely in the community.

9. Victims have the right to safety, to be informed and to provide input to the community supervision team.

Physical and psychological safety is a necessary condition for victims to begin recovery related to sexual abuse. Victims experience additional trauma when they are blamed or
not believed, which may be more damaging than the abuse itself.\textsuperscript{16} Victim impact is substantially reduced when victims are believed, protected and adequately supported.

The community supervision team can assist the victim in this by providing information and affording the victim representation in the supervision and management of the offender. Victim input and knowledge of the offender are valuable information for the supervision team.\textsuperscript{17} Victims are empowered to determine their level of participation.

10. \textit{When a child is sexually abused within the family, the child’s individual need for safety, protection, developmental growth and psychological well-being outweighs any conflicting parental or family interests.}

11. \textit{The SOMB Standards and Guidelines are based on current and emerging research and best practices.}\textsuperscript{18}

Treatment, management, and supervision decisions should be guided by empirical findings when research is available. Since there is limited and emerging empirical data specific to sexual offending, decisions should be made cautiously to minimize unintended consequences.

12. \textit{A continuum of treatment and management options for sex offenders should be available in each community in the state. Additionally, efforts should be made to maximize continuity of care whenever a client transitions from one treatment setting to another to maximize positive treatment progress.}\textsuperscript{19}

It is in the best interest of public safety for each community to have a continuum of management and treatment options so that treatment is appropriately matched to the client.

13. \textit{Successful treatment and management of sex offenders is enhanced when the Community Supervision Team (CST) models and encourages family, friends, employers and other members of the community in pro-social support of the offender.}\textsuperscript{20}

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\textsuperscript{17} Center for Sex Offender Management (2007). The Role of the Victim and Victim Advocate in Managing Sex Offenders (training curriculum). Silver Spring, MD.

\textsuperscript{18} Cite Statue.


Families, friends, employers and members of the community who have influence in the lives of offenders can meaningfully contribute to their successful functioning in society. Family and friends should be included in the supportive network in a manner that is sensitive to the possible negative impact of the offense on them.\(^{21}\)

**14. Information sharing among CST members is vital to public safety and offender success.**

Sexual offense specific treatment is not conducted with the same degree of confidentiality as non-mandated treatment.\(^{22}\) Sex offenders waive confidentiality with regard to therapeutic and/or public safety goals. When sensitive and private information is shared, the dignity and humanity of all involved must be respected.

**15. Sex offense-specific assessment, evaluation, treatment, behavioral monitoring and supervision should be humane, non-discriminatory and bound by the rules of ethics and law.**\(^{23}\)

