

**Research and program evaluation in Illinois:
Studies on drug abuse and violent crime**

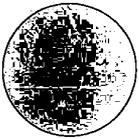
**An Interim Evaluation Report on the
Cook County Adult Sex Offender
Probation Program**

December 1998

Prepared by
Loyola University Chicago

Evaluation funded by
Illinois Criminal Justice
Information Authority

Jim Edgar, Governor
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**ILLINOIS
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INFORMATION AUTHORITY**

Evaluation of Cook County's Adult Sex Offender Probation Program:

**Interim Report Year One
July 1, 1997 to June 15, 1998**

**Prepared for the
Illinois Criminal Justice Information Authority**

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Executive Summary

The Cook County Adult Sex Offender Program (ASOP) is the first specialized intensive supervision probation program for sex offenders in Illinois. The ASOP unit is modeled after the containment approach, which emphasizes three central features of specialized sex offender units: (1) intensive surveillance, with importance given to field searches and verification of the information provided by sex offenders; (2) cognitive-behavioral treatment; and (3) effective and frequent communication between probation officers and treatment providers. This document describes the interim report for the first year of a three-year evaluation of the Cook County Adult Sex Offender Program.

The targeted offender group for the ASOP program offenders convicted of aggravated criminal sexual abuse or criminal sexual assault against a family member who reside in suitable residence away from child-care facilities, schools, or children in the Cook County area. Only 42 percent of the ASOP defendants have family-related charges; moreover, eligibility screenings did not produce a significant greater number of offenders with family-related sex offenses. As of May 21, 1998, the program had a caseload of 58 defendants, and an active caseload of 51 defendants. The Cook County program personnel originally projected that after one year of taking cases, they would have 75 defendants. The actual caseload size of 58 defendants is substantially short of the original projection stated in the Cook County grant. The delay in bringing treatment providers on board contributed significantly to the lower than expected caseload size. Of the 58 defendants in the ASOP unit, seven have been taken into custody, and two of these offenders have been sentenced to IDOC, and two other defendants await their sentencing. From February 1997 to May 1998, the ASOP unit had filed 19 violation of probation petitions, and of these petitions 12 had been granted, 4 had been dismissed, 2 had been withdrawn, and one is pending. Fifteen defendants have had a violation of probation filed against them. For the entire population of ASOP defendants, there have been a total of 10 arrests. These arrests include: four domestic battery arrests; one traffic violation arrest; two battery arrests; one arrest for failure to register; one arrest for driving while intoxicated; and one arrest for aggravated criminal sexual abuse.

Our evaluation to-date, indicates that, after a very slow start, the ASOP is finally up and running and beginning to accept cases at a more accelerated rate. We have found that many of the policies of the ASOP have been effectively implemented, but that some policies have not as yet been fully realized. The ASOP unit received excellent training, and its staff appear dedicated to learning more about the supervision of sex offenders. Treatment assignment was logically, carefully, and appropriately performed. The unit also has requested a drug test for most ASOP defendants, and has met its established standards for office contacts. The most significant area of improvement is the number of field searches performed. Over half of the defendants did not receive one field search per a month across the eight months that we sampled, which falls substantially short of ASOP policy to conduct six field visits per a month for each defendant. Four key issues, however, must be addressed in the near future: (a) reaching the standards set for field searches; (b) clarifying the role of the Advisory Committee; (c) clarifying the duties of

the Unit Supervisor and Deputy Chief and consistently submitting statistical reports on the unit's performance; and (d) the creation of uniform written guidelines about the graduated sanctions that will be used to respond to noncompliance with treatment rules.

I. Introduction

Sex offenders are manipulative, deceitful, and tenacious repeat offenders. Across the nation in the early 1990s, criminal justice professionals began to recognize that sex offenders were difficult to supervise on regular probation (See English et al., 1996). A 1993 study by the probation division of the Administrative Office of the Illinois Courts documented that more than 2,500 adult sex offenders were on probation in Illinois, but that few departments had either the necessary expertise or resources to monitor sex offenders. These data led key players in Illinois to stimulate the development of specialized intensive supervision probation programs for sex offenders in Illinois. The Cook County Adult Sex Offender Program is the first such specialized program. Consistent with the national containment model for the supervision of sex offenders (English et al., 1996), it has three major components: (a) intensive supervision of offenders which includes frequent field searches of offender's homes and the verification of information obtained verbally from offenders; (b) treatment which emphasizes a cognitive-behavioral group therapy approach supplemented with cognitive-behavioral individual counseling; and (c) a partnership between probation officers and treatment providers that includes frequent communication and the sharing of relevant information on specific offenders.

The evaluation team received a grant from the Illinois Criminal Justice Authority to conduct a three year evaluation of the Cook County Adult Probation Department's Adult Sex Offender Program (ASOP). This interim report after the first year of the evaluation focuses primarily on a process evaluation. The process evaluation examines the implementation of the program. It has three major components: (a) how the program was developed; (b) the timeliness and successfulness of implementing each of the major components of the program; and (c) the current operation of the program to date. The implementation process focuses on six major tasks: (a) the development of the administrative structure; (b) the formation of an advisory board; (c) the selection and training of probation staff; (d) the selection of treatment providers; (e) the assignment of ASOP defendants to treatment providers; and (f) the development of operational policy and procedures. The current operation of the program focuses on three major areas: (a) how cases are processed from charging to sentencing; (b) the extent to which cases meet pre-operational eligibility criteria; (c) the extent to which pre-operational surveillance standards are met; and (d) initial impressions on the quality of treatment services provided based on observations of group therapy sessions. The report also contains a description of the control group of sex offenders on regular probation that will be used for the impact evaluation.

II. Program Development

A. Concept Birth and Development

It is difficult to really pinpoint the beginning of a program concept that ultimately leads to a fully operational program because ideas are fluid and not readily categorized into time frames or easily attributed to one person or a single agency. However, our research suggests that the ASOP had its beginnings in 1990 in The Administrative Office of the Illinois Courts, and in particular in the Probation Division of that office. The Administrative Office of the Illinois Courts is an arm of the Illinois Supreme Court, which has the general administrative and supervising authority over all courts in the state. The Probation Division was established to develop, establish, promulgate and enforce uniform standard for probation services in the state¹. Part of the Division's activities include the identification and development of innovative probation programs.

In the early 1990s, key Probation Division staff, through analysis of probation data and a variety of contacts with other state agencies and organizations, became aware that the sexual offender population in community corrections was not particularly well served. Between 1991 and 1993, the Probation Division sponsored and facilitated several training sessions for probation officers and managers focusing on this special population and in November 1993 conducted a survey of probation administrators and probation officers concerning sex offenders on adult caseloads². The purpose was to assess the number and demographic profile of sex offenders on adult probation caseloads. The survey also requested information on the "existence and characteristics of specialized probation supervision strategies and availability of community treatment providers."³

The findings indicated that out of a total of 61,923 actively supervised adult probationers, 2,503 or 4% were probationers whose current conviction of record was an offense of a sexual nature. In addition, approximately 1,000 offenders were identified with either a prior history of sexual offending and/or with a current offense that, although not of a sexual nature, had certain behaviors or characteristics of a sexual offense. The vast majority of sexual offenses were felonies. Most victims were children. With respect to specialized programs, the survey report issued on January 18th, 1994 concluded, "...Illinois probation services currently offer no uniform standards for effective control and case management (of sexual offenders). Probation departments do not currently have either the expertise or resources to adequately monitor sexual offenders."⁴ Only 13% of

¹ The Probation and Probation Officers Act (730 ILCS 110/15).

² The survey was limited to adult caseloads because of funding limitations.

³ Administrative Office of the Illinois Courts, Probation Sex Offender Survey Results.
AOIC, Division of Probation Services, January, 1994. p. 1

⁴ Ibid., p 1

the respondents indicated that probation staff assigned to supervise sexual offenders had particular skills to effectively manage such offenders. Also, while 70% of the respondents indicated that treatment was offered through service providers or organizations, only about 1/4 assessed the quality and appropriateness of the services provided.

These survey findings led the Probation Division in two directions simultaneously. The first was to develop a program model and guidelines for sexual offender probation program development and operation. The second was to seek funding for sexual offender probation programs. The program development activity began in 1994 and resulted in a comprehensive document entitled "Intensive Specialized Sex Offender Probation Supervision"⁵ hereinafter referred to as the "Blue Book". As its subtitle indicates, this is a very extensive, detailed manual of how to design and implement a sexual offender probation supervision program. The program described is well grounded in the research in the field and emphasized both community protection and offender treatment. The key rationale for and elements of specialized sexual offender probation programs are perhaps best summarized in the Statement of Principles that were suggested for such programs. These are stated on page 5 of the "Blue Book" as follows:

Sex offenses create serious consequences for their victims.

Sex offenders are responsible for their abusive behavior and must be held legally accountable.

Sex offenders generally exhibit a repetitive or potentially escalating pattern of reoffending.

Effective probation intervention with sex offenders is necessary to prevent abuse patterns from developing further and to protect potential victims.

Effective probation intervention with sex offenders requires that decisions about the sex offender must first consider safety of the victim and the community.

Effective probation intervention with sex offenders must undertake multiple strategies that include:

Supervision and monitoring that is intensive, restrictive and very stringent, including registration with law enforcement, testing for substance abuse, contributing to the DNA data bank, psychometric testing, polygraph testing and plethysmography;

Sex offense specific conditions of probation that identify and control risk factors; Specialized and long-term sex offender treatment that is strictly coordinated with probation officer case management and monitoring activities; and a coordinated interdisciplinary approach.

⁵ James R. Grundel, Michael Tardy, and Mary Bass. Intensive Specialized Sex Offender Probation Supervision: Guidelines for a Coordinated System of Supervision, Control and Treatment of Adult and Juvenile Sex Offenders Sentenced to Probation in Illinois. Administrative Office of the Illinois Courts, Division of Probation Services, October 1996.

Funding support for sexual offender probation programs was first sought from the Probation Division funds. While the director and administrative staff of the Probation Division of AOIC were very supportive of such a program, there were insufficient funds available for the AOIC to offer financial support. The next step was to seek funding support from the Illinois Criminal Justice Information Authority.

The Illinois Criminal Justice Information Authority is a state agency whose primary purpose, as its name implies, is to provide public policy-makers and criminal justice professionals with the "information, tools and technology needed to make effective decisions that improve the quality of criminal justice in Illinois."⁶ But of equal importance are two of the Authority's ancillary roles of providing "an objective, system-wide forum for identifying critical problems in criminal justice, developing coordinated and cost-effective strategies, and implementing and evaluating solutions to these problems."⁷ and of "Developing and implementing comprehensive strategies for using criminal justice funds awarded to Illinois by the federal government."⁸ As part of this critical problem identification process, each year the Authority sponsors a variety of meetings and other forums attended by representatives from key state and local criminal justice agencies, program staff from selected programs, researchers in various fields and a host of other individuals, all designed to inform the planning process. In December 1993 and early 1994, representatives from the Probation Division of AOIC attended a number of such meetings and reported on the sexual offenders on probation survey findings. Interviews with Authority staff indicate that there was considerable surprise expressed by Authority members at the numbers of sex offenders on probation and concern by some members regarding the public safety issues surrounding this population.⁹ It was clear that there was a need for special programs for sexual offenders on probation. Throughout October and November 1994, Authority staff, working closely with Probation Division staff, reviewed the sexual offender on probation survey data, examined caseloads and probation departments data statewide and tentatively selected Cook County Adult Probation Department as an appropriate location to develop and implement a pilot adult sexual offender probation program along the lines described in the "Blue Book". Deciding factors included: close to a third (759) of the sexual offenders on probation identified in the survey were on probation in Cook County, the Adult Probation Department was likely to have staff available for assignment to a specialized caseload and the County was capable of providing the matching funds required for all Authority grants. Thus, in a little less than a year after the 1993 survey findings indicated a clear need for special programming for sexual offenders, both a program and a location had been

⁶ Illinois Criminal Justice Information Authority, Illinois Strategy to Control Drug and Violent Crime, FFY97. December, 1996 p.1

⁷ Ibid. p. 1

⁸ Ibid. p.1

⁹ Interview with David Olson 7/28/97 and Memo to Authority staff from David Olson, 7/25/97.

identified. In December 1994, the Authority set aside \$375,000 for award to Cook County Adult Probation Department for an Adult Sexual Offender Probation program.¹⁰

B. Grant Proposal Development

While funds had been reserved for this project, considerable planning was required before a formal application was developed and submitted to the Authority, reviewed and funds actually awarded. A series of initial planning meetings, convened by the Probation Division and attended by key Probation Division, Authority and Circuit Court of Cook County staff were held in January 1995. More detailed data on the sex offender population were collected and analyzed; key program elements such as risk assessment, relapse prevention, and supervision strategies discussed. At subsequent meetings it was decided to focus upon incest offenders as the target group, that is offenders who were family members as defined by the Illinois statute. The Illinois Statute defines family member as:

a parent, grandparent, or child, whether by whole blood, half-blood or adoption and includes a step-grandparent, step-parent or step-child. 'Family member' also means, where the victim is a child under 18 years of age, and the accused resides in the household with such child continuously for at least a year.

The decision to limit the target group to family members was made for the following reasons:

- It fit with the purpose and intent of the federal funds available -- family violence.
- Research indicated that incest offenders had a better record of program success.
- The limited number of staff that could be devoted to this program required that the size of the caseloads and speed of intake be controlled.
- The Director of Cook County Adult Probation was strongly interested in this offender group by virtue of her membership on and close involvement with the Illinois Family Violence Coordinating Council.
- There was statutory provision for placing sex offender who were family members on probation (730ILCS5/5-3(e)).

After the Chief Probation Officer of the Cook County Adult Probation Department obtained approval from the Chief Judge of the Circuit Court to officially pursue a grant, a draft grant proposal was written by the Director of Research for the Cook County Adult Probation Department. The proposal was submitted for internal review in February 1995 and underwent a number of revisions and an extensive multi-level and time consuming review process before being sent to the Chief Judge for his approval. Interviews with the Director of Research indicated that the grant development process followed for this program was similar to that followed for most grant programs

¹⁰ Funds were identified in Illinois Strategy to Control Drug and Violent Crime FFY 1995 and required \$125,000 in matching funds.

except that there was a particular commitment and interest in this program and more time and resources devoted to it. This was so because the target population was particularly "politically sensitive"; the grant amount was considerable and multi-year; and there was a lot of interest in the Department and particularly in its leadership in serving this population. A final grant proposal was submitted to the Authority on August 5th, 1995.

C. Grant Proposal Review

The grant proposal was reviewed by Authority staff during August/September 1995. The Authority's grant file indicated that a number of specific issues that required further clarification and/or additional data were identified in a series of letters and addressed in meetings between Authority staff, Adult Probation Staff and Administrative Office Probation Division staff between September 29, 1995 and January 10th, 1996. There were few substantive issues raised concerning the program itself since it had been modeled on the program outlined in the "blue book" developed by the Administrative Office and Administrative Office Probation Division staff had been involved in its development. The main concerns appeared to be of a fiscal nature and specifically related to the source of the required \$125,000 in matching funds. A revised grant proposal was submitted on January 8th, 1996. There was continued discussion of some fiscal issues during January and February 1996. On March 19th, 1996 an interagency agreement (number 4547) between the Cook County Adult Probation Department and the Authority for the Specialized Sex Offender Probation Program was mailed to the Department. Once the necessary signatures on the agreement were obtained, disbursement of funds could begin. The program start date was set at April 1, 1996.

D. Realities of the Grant Process in Cook County

The interagency agreement for this program required the signatures of the Chief Judge of the Circuit Court of Cook County, the President of the County Board, the County Treasurer and the Chief Probation Officer. Obtaining such signatures is no simple task even in small counties. In a large and complex county like Cook it is often a time consuming and frustrating process. The interagency agreement was received by the Probation Department on March 21st, 1996. It was sent to the Chief Judge on March 28th and signed by him on April 22nd. A request was sent to the Cook County Board on May 7th requesting inclusion of this agreement on their meeting agenda. This request was denied because the source of the matching funds, probation service fees, was from an as yet unapproved budget. Such approval required submission of that budget to the Chief Judge which was done on May 23rd. Also, that budget required the approval of the Administrative Office of the Illinois Courts and was sent to them on May 28th. The Administrative Office approved the budget on June 5th and the Chief Judge signed the budget on June 11th. On that date, a request was sent to the County Board requesting inclusion of the agreement on their July 2nd meeting agenda. The County Board approved the agreement on July 2nd and the signed agreement was submitted to the Authority on July 26, 1996, four months after its receipt.

III. Program Implementation April 1996 to March 1997

There were six key tasks that needed to be accomplished before the program could actually begin operation by accepting clients. These tasks were:

- Develop the administrative structure
- Form an Advisory Board to aid in program implementation and operation
- Select and train staff
- Develop a Request For Proposals (RFP) and select treatment providers
- Assign ASOP defendants to treatment providers
- Develop operational policy and procedures

At the request of the Chief Probation Officer of the Cook County Adult Probation Department, the Administrative Office Probation Division assigned one of its key program development specialist to work two days a week on site to assist in program implementation.¹¹

A. Administrative Structure

Although monthly reports from the program on file with the Authority indicate that there was no program activity from April 1st through June 30th 1996, considerable activity actually occurred. One of the first tasks was to place this program within the administrative structure of a very large and complex organization. The Cook County Adult Probation Department's administrative structure consists of a Chief Probation Officer assisted by four Assistant Chief Probation Officers, one for administration, one for caseload units, one for specialized units and one for the pre-trial division. There are also 12 Deputy Chief Probation Officers, 69 staff supervisors and 493 line probation officers.¹² The chain of command was for line staff to report to supervisors, supervisors to report to deputy chiefs, deputy chiefs to report to assistant chiefs who reported to the director. Responsibility for the program's administration was established at the Deputy Chief level under the supervision of the Assistant Chief Probation Officer responsible for caseload units.

The unit supervisor reports to the Deputy Chief, and according to the Deputy Chief, such meetings occur almost daily. There is no formal protocol about staff meeting with administration, and the department is run pretty much with an open door atmosphere. This allows the program to adapt and adjust to circumstance on an as needed basis without need to invoke a cumbersome bureaucratic process to implement change.

¹¹ This person had actually been assigned in August , 1995 to assist in development of the grant proposal and began her on site technical assistance in January 1996.

¹² As of January 1, 1996 per Grant proposal document

Although the program was very slow getting started, all indications are that the program is beginning to function as planned. There are some administrative problems that the evaluation team believes need to be addressed to insure efficient operation of the program.

There is a need to clarify the role and duties of the Deputy Chief and the Unit Supervisor. Tasks have tended to be delegated to the Unit Supervisor because she is most closely involved with program operation. Such tasks include writing the first draft of the policies and procedures, checking on budget expenditures by treatment providers, seeking an information management (Tracker) system for the unit and holding negotiations with key decision makers, and so forth. We note that the Unit Supervisor, from our point of view, has performed all tasks with distinction. As the program grows, however, more and more of her time will and should be devoted to line staff case supervision, and the handling of problems with or the improvement of the quality of the treatment provider services. As the program grows, the Deputy Chief will need to handle administrative duties such as budget expenditures. ASOP administration needs to clearly delineate who is to be responsible for what administrative duties.

There also is an urgent need to improve program reporting. Review of the Authority Grant File on this program conducted on May 19, 1998 indicated that the last monthly program report was for the month of March 1997. There is no formal report on the number of cases in the program nor any program statistics whatsoever. The Grant File contains references to concern about the absence of program reports and most of the emphasis has been upon receiving fiscal reports. Discussions with Authority staff indicate that this matter has been repeatedly but informally discussed with program personnel, but this is not well documented in the Grant File. There is some suggestion in the Grant File that program statistical reports submitted by the program to the evaluation team should also be submitted to the Authority. However, the evaluation team has received only some summary reports on in person and field contacts; these reports need to be modified to be useful in comparing the set standards for the program to the current operation. The evaluation team developed program statistics presented later in this report from a case-by-case analysis of computerized event records. We must emphasize that the ASOP administration is responsible for submitting monthly reports on program statistics to the Authority and the evaluation team. One reason for the absence of statistical reports was that the program staff was awaiting implementation of a computerized case tracking system, which was to generate the program statistics required. However, the Department recently declined to approve such a system on the pretense that the current mainframe system can handle the required reports. There is a need to develop a program reporting system on aggregate statistics without delay. The ASOP administration, Authority, and evaluation team should discuss once again the specific aggregate statistics that should be reported to the Authority on a monthly basis.

Recommendations

The evaluation team offers the following recommendations to improve the administration of the program:

- **The administrative duties of the Deputy Chief and Supervisor of the ASOP program need to be clarified.**
- **A standardized form for reporting monthly statistics on the ASOP operation needs to be developed and submitted to the Authority on a monthly basis.**

B. Formation of an advisory board

The Deputy Chief, assisted by the department's executive management team, the Probation Division technical advisor and other department staff determined that the advisory board would be less formal than a "board" and was designated as an "Advisory Committee". Membership was to consist of representatives from the Judiciary, the State's Attorney's Office, the Public Defender's Office, treatment provider agencies, and the funding agency, the Illinois Criminal Justice Information Authority. Letters requesting participation on the committee were sent in early June and by early September all members had been selected. The initial Committee was made up of eight members from the agencies and offices noted above.¹³ The Committee also included an Assistant Chief Probation Officer, a Deputy Chief Probation Officer and the Program Supervisor.¹⁴ The first meeting of the committee was held on September 27th, 1996. Although a variety of sources¹⁵ indicate that the advisory committee was involved in making key operational decisions during this period, no meeting minutes were maintained, so information about program implementation was not available from that source¹⁶. For example, one key decision made at the December 6th, 1996 meeting was to defer start-up of the program to after the start of the new year (1997) because service provider contracts were not as yet signed.¹⁷

This initial report examines four key elements of the operation of the Advisory Committee from its inception in September 1996 through May 1998. These key elements are: membership and attendance; purpose; frequency of meetings; and administration.

¹³ A list of initial Committee members is attached to this report. A. The research position was temporary. The Public Defender representative was Mr. Pat Gleason.

¹⁴ Technically, representatives of the Probation Department are not members of the Committee since such membership would equate to their advising themselves.

¹⁵ These sources included a summary of field notes written by the Administrative Office Probation Division's technical advisor, a summary prepared for evaluation staff by Probation Division personnel, and copies of meeting agendas available in Authority grant file.

¹⁶ We comment on the Advisory Committee's failure to document its discussions in a later section of this report.

¹⁷ Field note summary report.

Membership and Attendance

The membership on the committee was ideal in that it included members from the Administrative Office of the Illinois Courts who had been very involved in the design of sex offender probation programs in Illinois, members from the three key operational elements (Judiciary, Prosecution and Defense) necessary for the program to function effectively, and members from the treatment community and the funding agency. While the representatives from the Administrative Office and the Authority have changed from time to time, the representatives from the Judiciary, State's Attorneys Office, the Office of the Public Defender, and the treatment community have remained the same throughout this period. Two suggestions from some members for expanded membership included adding a treatment therapist (as opposed to treatment administrators) and a legislator to aid in changing laws as needed. Interviews indicate that most of these committee members have attended most if not all of the committees meetings since September 1996 with the exception of the representative from the Judiciary who has not attended any meeting. The absence of Judicial participation was a matter of deep concern to all Committee members interviewed and to Probation Department and program staff as well. The appointment of more than one judicial representative was suggested as a way to address this problem.

Purpose

There appears to be some uncertainty about the purpose or role of the advisory committee. As noted in the grant application, the purpose was to assist in the development, implementation and operation of the program. However, the letter to potential Committee members inviting their participation suggested that the Committee's purpose was "...to aid in the development of our Specialized Sex Offender Probation Program."¹⁸ A review of meeting agenda items suggests that at least one of the Committee's purposes was to update members on the implementation and operation of the program. Interview data suggests that the purpose is program development and operational oversight. Four of the six members interviewed stated they had little or no knowledge of how the program was operating. Three of the four believed that they should have such information as committee members in order to provide experience-based suggestions if appropriate. The desire for operational information appeared to stem from a real interest in how the program was "doing" and not from a desire to interfere in its operation. Two members stated they felt very much left out. One other member believed the purpose was limited to program development and another stated the purpose was to evaluate effectiveness. There needs to be a clear conceptualization and statement of the Committee's purpose.

¹⁸ See attached example.

Frequency of Meetings

The Grant File on this program maintained by the Illinois Criminal Justice Authority contains agendas for three Committee meetings in 1996 on September 27, November 1, and December 6 and for two Committee meetings in 1997 on May 2 and June 13. The April 1997 monthly report from the program to the Authority referred to a Committee meeting in March. The evaluation team attended three other Committee meetings during 1997 on July 25, August 25, and September 9. This comes to a total of 9 Committee meetings in a 12-month period since the Committee was formed in September 1996. In addition, a number of meetings were canceled. By most standards, this represents a very active Committee. However, the Committee has not met since September 1997. Committee members interviewed all commented on this fact and expressed surprise that the Committee was not more active. Although all are busy people who don't want to attend meaningless meetings, four of the six interviewed believed this Committee was important. Information from a variety of sources indicate that when Committee meetings were well attended there was lively and spirited discussion that proved to be very useful especially in early meetings that were concerned with the design of the program. In addition, the evaluation team's observations suggest that important operational issues were also reviewed. One suggestion from a Committee member is that the Committee meet at least quarterly.

Administration

There are a number of administrative issues that have perhaps contributed to this Committee being less effective than it could be. While the Judicial representative was appointed Committee chair, he has not attended any meetings and thus the Committee has been officially without a Chairperson. In actuality, the activities of Chair were assumed by the Deputy Director and delegated to the program supervisor. While it is not uncommon for actual agenda preparation to be done at the staff level in many organizations, the policy and direction of such committees is set by the Chair. Absence of a Chair has contributed to a lack of direction and purpose for the Committee. One member described the Committee as "a great bunch of people who had no leadership." The decision to designate this group a "Committee" rather than a "Board" to make the group less formal perhaps introduced too much informality. No minutes of each meeting were kept so there is no official record of the Committee's deliberations or decisions. Also, there was no continuity from meeting to meeting that formal minutes tend to insure. Members interviewed have only vague recollections of topics discussed but do remember that the meetings were lively and useful. Because this program was the first and largest Sex Offender Probation Program funded in Illinois and because it was designated as a pilot program, the absence of Committee minutes documenting developmental and implementation decisions is unfortunate.

We offer the following four recommendations to improve the functioning of the Advisory Committee:

- **Judicial representation on the Committee is essential. This should be discussed with the Chief Judge as soon as possible and the option of appointing more than one Judge to the Committee considered so that the Judiciary is represented at each meeting.**
- **The Committee should meet as soon as possible to decide on its purpose and to resolve the issue of the Chairmanship.**
- **Minutes of each meeting should be kept. These need not be extensive, but should record the issues discussed and the Committee's decisions reached.**
- **The Committee should meet on a quarterly basis, and every attempt made to avoid canceling such meetings.**

C. Staff Selection

Interviews for program supervisor were held on July 11, 1996 and selections were made July 26. Interviews for probation line staff were held on August 14 and 15, 1996 and selection made on August 16. The posting of the availability of line staff positions was made prior to the selection of the unit supervisor. Probation officers, like most human service staff, are often hesitant to apply for new units without knowing who the unit supervisor will be. Only five officers applied for the four available positions. One candidate was rejected as ineligible because she was on "light duty" status and not eligible to transfer to another unit, leaving the program administration to select four officers from the four that applied. The unit supervisor's position was posted, and the one applicant was interviewed by a panel composed of the Deputy Chief and the AOIC technical advisor. The applicant met the selection criteria, and was placed in the position.

D. Training of Probation Staff

This section describes the extent, nature, and quality of ASOP probation officers' training on topics related to sex offenders. Two methods were used to assess the extent of probation officers' training: self-reported surveys and the examination of training materials. All of the training workshops occurred during 1996 or 97; thus, it was necessary to use retrospective surveys and to examine the materials and notes obtained by ASOP officers from these workshops.

Extent of Training

Eleven workshops on topics related to sex offenders were attended by at least one of the five ASOP officers.¹⁹ Table 1 describes the dates, instructors, length of time, and title of the workshops. Most of the training workshops occurred in 1996, with only two workshops occurring in 1997. Treatment providers who have worked directly with sex offenders served as instructors for most of the workshops. Two of the workshops were national conferences

¹⁹ All data are reported at the group level to protect the confidentiality of individual respondents. The data consist of the combined responses from one ASOP supervisor and four ASOP officers; these officers comprise the entire ASOP unit.

for professional groups (American Probation and Parole Conference; ATSA conference); these conferences offered a variety of presentations related to sex offenders from which participants could choose. The other workshops typically were in lecture/discussion format, and provided information on classification/profiles of sex offenders, treatment for sex offenders, interviewing skills, and coping with secondary trauma. The week long training in California provided needed hand-on experience in searching homes, searching defendants, interviewing defendants, completing reports, and observing group therapy sessions.

Table 1. Description of Training Workshops on Sex Offenders
Attended by ASOP Probation Officers

| <u>Date of Workshop</u> | <u>Title of Workshop</u> | <u>Length of Time</u> | <u># of officers</u> |
|-------------------------|---|-----------------------|----------------------|
| 5/96 | "Sex Offender Symposium at Loyola University" | 8 hours | 3 of 5 |
| 5/22/96 | "Sex Offenders: A Challenge for Community Corrections" Instructors: Terry Childers, Mary Bass, Rebecca Palmer | 8 hours | 4 of 5 |
| 7/1-3/96 | "American Probation and Parole Conference" | | 3 of 5 |
| 7/24/96 | "Profiling and Treatment of Child Molesters" Instructors: Terry Childers and Rebecca Palmer | 8 hours | 3 of 5 |
| 8/21-23/96 | "Supervision of Sex Offenders" Instructor: Gary Lowe | 24 hours | 5 of 5 |
| 10/96 | "Field Experience with the California Sex Offender Unit" Instructor: Gary Lowe | 50 hours | 5 of 5 |
| 11/13-16/96 | "ATSA Conference" | | 4 of 5 |
| 4/97 | "Task Force for the establishment of Sex Offender Unit" | 8 hours | 1 of 5 |
| 5/97 | "Interviewing Skills" Instructor: Rebecca Palmer | 3 hours | 4 of 5 |
| 8/97 | "Evaluating the Sexual Abuser" Instructor: Robert Sobo | 8 hours | 2 of 5 |
| 9/97 | "Changes in Law for Registration and DNA testing" | 8 hours | 1 of 5 |

ASOP officers participated in an average of 6 training workshops on sex offenders in the past two years.²⁰ All officers had at least 67 hours of training, with a median average of 108 hours. Officers were asked to indicate the number of hours that they received training on specific topics related to sexual offenders. Officers spent the longest amount of time on interviewing sex offenders (median hours = 20), group therapy (median hours = 10), and the classification or profiles of sex offenders (median hours = 8). Officers' training also focused an average of four hours on each of the following topics: risk assessment of sex offenders, needs assessment of sex offenders, and home searches. Officers also spent some time on other field-related topics such as searching defendants, computer tracking, completion of reports, and learning about other specialized sex offender probation units in their week long trip to California. Officers also mentioned that they had received a few hours of training on secondary trauma, partner safety, and the team approach. All officers indicated that they had received the least amount of training time on victim's trauma (median = 3 hours) and interviewing victims (median = 1.5 hours).

Nature and Quality of Workshops

Officers viewed most workshops as informative and helpful. Some workshops, however, were more informative and helpful than others. Officers were asked which workshop was the least informative. All four officers who attended the ATSA Conference indicated that it was not very informative and they did not obtain much information from this conference. The ATSA Conference appears to be oriented more toward treatment providers, and provides very limited information on the issues that arise during the supervision of sex offenders. At least one officer indicated that the training workshop on "Interviewing Skills" and the training workshop on "Evaluating the Sexual Abuser" were not very helpful or informative. At the training workshop on "Evaluating the Sexual Abuser", the instructor provided very limited information, and had little control over the group discussion; primarily, people were just sitting around and talking about their experiences.

Officers also were asked which workshop was the most informative. Two officers indicated the three day workshop on the "Supervision of Sex Offenders", and two officers indicated the week-long trip to the California's Sex Offender Unit was most informative. One officer thought the workshop, "Profiling and Treatment of Child Molesters" was most informative. Clearly, officers valued and obtained much information in all three of these workshops. Each workshop provided numerous handouts and several articles about sex offenders aimed at a professional nonacademic audience. One indication of the extent of information provided at the workshop is the amount of notes each officer took during the workshops. All officers indicated that they took notes during the workshops, which was confirmed by an examination of their notes. Each officer on the average took 65 total pages of notes across all the workshops. Two officers indicated that they took the most notes and received the most material during the "Supervision of Sex Offenders" Workshop. One officer took the most notes during the "Profiling and Treatment of Child Molesters", and

²⁰ Given the small sample size and the greater influence of outlying responses, the median is used as the average. The median is the midpoint at which an equal number of scores lie above and below that point.

received the most material during the California trip. ASOP officers had from each of these workshops obtained much written information consisting of about 150 pages of material ranging from notes, professional articles, handouts, and tables. These workshops also provided information on additional reading materials.

Most officers organized their material in binders so that they could refer to the material in the future. Officers indicated that on the average they referred back to their notes an average of 6 times during the past six months, which indicates that they examined material about once per month. The evaluation team's review of their materials indicated that the ASOP unit had relied on their training in creating an interview schedule, and in creating policies on conditions of probation, on home searches and on communication between treatment providers and probation officers. Additionally, probation officers refer to their notes to determine the type of interview approach to take with certain categories of sex offenders.

Officers were asked to identify the topics about which they felt best trained. Officers provided a variety of responses which included the following topics: profiling sex offenders; interviewing; secondary trauma/coping, supervision of sex offenders, group therapy, searching homes, and searching the defendant. When asked how training could be improved, four of the officers mentioned joint training with treatment providers. Although most officers participated in one workshop with treatment providers (e.g., ATSA conference), the sessions included a very large number of participants and did not allow for much communication between probation officers and treatment providers. Most officers also wanted additional training on interviewing techniques and therapies for offenders.

Sex Offender Training Received By Probation Officers on Regular Caseload

The ASOP grant indicated that the department would also provide sex offender training to probation officers who supervised sex offenders on regular probation. Based on a memorandum from the training coordinator, the three day workshop "Training for Supervision of Sex Offenders" held on August 21-23, 1996 was attended by fourteen probation officers who supervise sex offenders on regular probation. Using this list, we distributed a survey to these officers as well as four other officers who supervised sex offenders on regular probation. The response rate to this survey was poor--33.3 percent. Of the six officers who completed the survey, they had only attended the three-day workshop on sex offenders; except two officers also attended the American Probation Association meeting. It is recommended that these regular caseload officers receive additional training on sex offenders in the future.

Sex Offender Training Received By Deputy Chief and Assistant Chief

Both the Deputy Chief and Assistant Chief of the ASOP unit have received training on sex offenders. The Deputy Chief attended 32 hours of training with Gary Lowe, which included the workshop "Supervision of Sex Offenders." He also was present at the one-day symposium held at Loyola University. The Assistant Chief attended 80 hours of training on

sex offenders aimed at program development which was presented by the National Institute of Corrections, and attended a one day symposium on the supervision of sex offenders co-sponsored by Loyola and the Adult Probation Department. The Assistant Chief also has spoken with Kim English and frequently uses her book as a reference to assist with program development and operation. The Assistant Chief believes that Kim English's book and input have been valuable resources.

Previous Experience

Probation officers had a median average of three years as probation officers and three years supervising sex offender cases. The years of experience supervising sex offender cases ranged from one year to ten years. All probation officers reported that they had supervised some sex offender cases, with a range of nine to fifty previous sex offender cases. Most line officers had not read any books on sex offenders with the exception of one officer who read a recently published 1997 book on supervision of sex offender cases. The supervisor of the program had read several books, and had made these books available to ASOP probation officers as reference material.

Recommendations

Overall, training appears to have been appropriate and beneficial for the ASOP probation officers. The research team makes the following recommendations to consider in future training:

- **Most officers mentioned they wanted joint training with treatment providers, and such training may also enhance communication with treatment providers.**
- **It may be beneficial to organize an all day training seminar for probation officers and treatment providers across jurisdictions to share experiences and knowledge.**
- **In light of the comments regarding the seminar, "Evaluating Sexual Abusers", future training seminars with this instructor should be reconsidered.**
- **Most officers want additional training on interviewing skills for specific profiles of sexual offenders; such training is warranted given the importance of interviewing in the detection of noncompliance.**
- **Line officers should take advantage of reference books, and in particular read Kim English's book on the Management of Sex Offenders on Probation to have a complete understanding of the model for the ASOP program.**

E. Selection of Treatment Providers

Agencies, which were to provide the assessment and treatment of sexual offenders in the program, were selected from responses received from a Request for Proposals (RFP). The RFP, developed by ASOP managers and the AOIC technical advisor, was a very detailed statement of sexual offender assessment and treatment expectations as well as treatment provider responsibilities for reporting and working with program staff throughout the treatment process. It was mailed in early November 1996. A bidders

conference was held on November 12th for those agencies interested in providing treatment services. Seven service providers participated in this process and were advised to submit proposals by December 2, 1996. After a careful review process participated in by program staff and administrators as well as the advisory committee, five service provider agencies were selected in late January 1997. Individual contracts between the Department and service providers were developed, mailed, signed and returned during February, but such contracts could not become operational until approved by the County Board which was estimated to take from two to four months. The County Board did not approve the contracts until November of 1997.

The assessment of the process of selecting treatment providers is based on two interviews and a review of the 6 proposals submitted in response to the Request for Proposals (RFP) issued by ASOP in October of 1996.²¹ The first interview was conducted by the evaluation team PI (LS) with a staff member of AOIC, who served on the ASOP selection committee. The second interview was conducted by the evaluation team Co-PI (JS) with Probation Department Staff: the Assistant Chief; the Deputy Chief; and the ASOP Supervisor. Along with the AOIC representative, these three members of the probation department formed the treatment providers selection committee.

The process of bringing a formal, specialized probation program for sex offenders and establishing the treatment capacity for such began with AOIC sending out surveys to Illinois providers known to be working with sex offenders. The survey examined the level and type of services that providers were then delivering. Subsequently, outside trainers from other states with expertise in the treatment of sex offenders were brought to Illinois to conduct workshops for interested providers. Concurrently, the director of the Cook County Probation Department began an effort to secure funding for the establishment of a specialized program for sex offenders. The availability of federal block grant funding through the Illinois Criminal Justice Information Authority (ICJIA) provided the opportunity for such a program. After successfully applying for the block grant funds to develop a sex-offender program, ASOP mailed notification letters and an RFP to the 20 Illinois providers who had indicated by their responses to the AOIC survey that they had programming for adult sex offenders. Following a bidder's conference held by ASOP, complete proposals were received from 6 providers: 1) The Isaac Ray Center; 2) Clinical Behavioral Consultants; 3) Central Baptist Family Services; 4) Adelante, P.C., 5) The Center for Contextual Change; and 6) Associates in Family Therapy Limited.

The six complete proposals were reviewed by each of the four members of the selection committee. The process for review was kept informal in the respect that a specific ratings system was not developed or used for ranking the proposals. One review member expressed the opinion that such a system would have been somewhat arbitrary and that it would be hard to reject a proposal on the basis of rated factors such as the

²¹ Actually, ASOP received a total of seven proposals. However, one proposal was so incomplete and fragmentary that it did not merit an initial review. This report will focus on the six proposals that were submitted as complete and subject to review by the ASOP selection committee.

organization and style of the proposal. Instead, the review committee checked each proposal to see if it met a set of basic criteria enumerated in the RFP. These were:

- 1) The facility should be located within Cook County to be accessible to clients.
- 2) The facility should have adequate staffing to provide services to the required number of clients.
- 3) The treatment staff should have documented evidence of 3 years prior experience working with adult sex offenders.
- 4) The programming available should include both group (1 time per week) and individual therapy (2 times a month) at the levels prescribed in the RFP.
- 5) The treatment providers should include a specific group for "deniers".

The RFP included several other additional requirements. Some of the more important of these include: that the provider produce timely assessments and immediate reports on attendance; the provider allow the probation officer to be part of the treatment team through regular communications of treatment progress and, if necessary, participation of the probation officer in the group sessions; the provider must have specific criteria for discharge but that all treatment must be for a minimum of two years; and the provider will testify in court as necessary.

To a greater or lesser extent, all six of the applicant organizations met these criteria in their proposals. All had staff members with at least 3 years prior experience working with adult sex offenders ranging from a minimum of about 3-4 years (Central Baptist) to Adelante and Isaac Ray, whose staff have worked with sex offenders for over 8 years. Most staff were Master's level with many also certified by the Association for the Treatment of Sexual Abusers (ATSA).

All applicants indicated they would subcontract with a licensed professional for the administration of polygraph and/or plethysmograph testing. Although two of the providers were at some distance from where the majority of clients resided, they were close enough within the geographical boundaries delimited by the proposal to be considered for an award.

All providers had a formal assessment process that incorporated one or more of the following: interviews with the client and collaterals; either plethysmograph testing (i.e., phallometry) or the administration of the Abel Assessment for Sexual Interest; full-disclosure polygraphs; and formal psychological testing utilizing standardized instruments such as the MMPI, the MCMI, or the HARE Psychopathology Check List. In addition, because of their unique emphasis on medication management, the Isaac Ray Center assessment also included medical examinations and testing.

All providers were willing to offer both individual and group therapy at the required levels, with all emphasizing group as the primary treatment modality. The frequency of group sessions offered was in keeping with the RFP requirements though the length of time per group appears to vary by provider. One specified that groups lasted 90 minutes per session while another proposed running groups of 2 hours duration. The other proposals did not specify a given duration but it may be assumed they will range from 1 1/2 to 2 hours also. The potential effects of the varying duration of group sessions — and hence treatment dosage — will be interesting to track during the evaluation if that is possible. To avoid such variation, future RFPs, in addition to specifying the frequency of contact, must be more specific about the length of time for group or individual sessions.

Every provider also stated that their therapy methods were cognitively-behaviorally oriented but there was a marked lack of specifics in some of the proposals as to what this meant in practice. One proposal, however, provided a clear and detailed explanation of what their model of cognitive-behavioral therapy involved. Given that there can be considerable variation in what actually occurs in treatment sessions, it may also be wise in the future to either specify in the RFP what is meant by cognitive-behavioral treatment or to ask the applicants to do so. Content variations in the delivery of treatment will be one of the factors tracked during the process evaluation.

There was also some variation among the providers on when to incorporate individual therapy. Some expressed that individual therapy would be an ongoing adjunct to group therapy (along with family sessions) while other providers indicated that they would use individual therapy only if necessary to deal with specific issues such as denial. Indeed, the whole issue of what to do about offender denial was one of the points that most distinguished the provider applications. It seemed that the RFP requirement for a separate group run for deniers was, at best, complied with half-heartedly by most of the applicants. Four of the six providers proposed an alternative method of dealing with the issue of denial that did not include running a separate group. These alternatives ranged from having additional individual sessions to managing the denial within the context of the assessment. In light of these somewhat tepid responses from the treatment community, it is suggested that this requirement of a separate deniers group be reconsidered and possibly dropped from future programming.

Another point of difference among the providers, though less dramatic, was the emphasis on the involvement of family members and victims in the treatment process. Two of the providers had an especially heavy emphasis on this point as being an important part of the treatment with formal components and criteria designed to include family members in the treatment regimen. The other providers said that they *had* family and couples therapy available, but were less specific about when and how such “adjunctive” therapy would be conducted. Implicit in this lack of specifics is a lesser emphasis on formal inclusion of the families in the therapeutic process. Again, it will be interesting to track variations among the providers in the inclusion of families in the therapy and the possible effect this may have on outcome.

Because, broadly conceived, 5 of the 6 providers who submitted completed proposals met the criteria enumerated in the RFP, they were offered contracts to provide treatment services to ASOP clients. In effect, no provider meeting the nominal requirements of the RFP was turned down. The amount of the contract offered to each provider was based on two factors. The first factor was a fee and frequency associated with each type of service set out in the RFP, which did not vary from provider to provider. The second was based on an analysis of the geographical distribution of sex offenders who had been on probation prior to the start of the program. The larger the number of offenders living within a region serviced by a provider, as determined by zip codes, the higher the contract ceiling established for that provider. Thus, providers serving areas likely to have large numbers of clients received the largest contracts. The underlying and reasonable assumption here is that new offenders will show the same geographical distribution as prior offenders.

The sixth provider, the Isaac Ray Center, proposed a significantly different and significantly more expensive treatment model than the other providers and than specified in the RFP. Specifically, Isaac Ray proposed a much more medically oriented model of care involving the routine administration of psychotropic drugs to all clients seen. A large portion of their proposal was devoted to discussing the efficacy of two particular classes of psychotropic medications, which they would be using to treat sex offenders. Their proposal requested that the most recalcitrant and highest risk cases be referred to Isaac Ray either directly or from the other providers. Because of the high costs of their proposed services, the Isaac Ray Center was the sole applicant who rejected the offer of a contract due to financial differences.

Despite the fact that the Isaac Ray Center will not be providing services within the program, their response contained some interesting proposals. Among these were the use of medication management. They state that in lieu of medication management, the frequency of treatment sessions should be increased to 2-3 times per week. This is an interesting assertion given that the prescribed number of sessions in the RFP is 1 time per week and that medication management will not be incorporated by the other providers. It is possible that the Isaac Ray proposal was only referring to the most high-risk cases; it is not clear from the writing whether this is the case. However, it is recommended in light of these assertions, the evaluation team and ASOP staff pay close attention to this specific aspect of treatment programming to determine if, in fact, the intensity level provided is adequate. Another interesting and instructive aspect of the Isaac Ray proposal was that they included in an Appendix, copies of assessments done on a couple of cases representing what their assessments of sex offenders would look like. Reading through these assessments was instructive and gave the evaluator a clear idea of the kinds of information gathered by Isaac Ray as well as a sense of their level of clinical acumen. It may prove useful to explicitly include a requirement for example assessments in future proposals so that the quality of the assessments likely to be provided may be ascertained by the selection committee.

In conclusion, the following observations regarding the process by which treatment providers were selected are offered for further consideration. First, it appears that ASOP staff made a conscientious and good-faith effort to begin developing a network of appropriate treatment providers for their program. This was no small task given the newness of such targeted programming in Illinois and the current lack of any state certification or licensing of providers for sex offender treatment. For the most part, this reviewer feels that the providers selected were appropriate. Second, the RFP selection criteria were also appropriate though they lacked some detail, especially in areas like requesting specifics on how a provider's treatment was cognitive-behavioral and more on what the content of the treatment sessions would involve and so on. Third, developing ceiling-amounts on contract awards based on geographical analysis makes sense. However, there are three concerns that should be addressed in future contracts: the low number of proposals submitted; insufficient weight given to the quality of the proposal; and the inclusion of probation officers in the group therapy sessions.

The low number of proposals received is cause for some concern. Basically, only one provider for each geographical area submitted a completed proposal. Thus, there was no real competition for the awards. In part, this reflects the newness of this type of treatment and the fact that there were only 20 programs eligible for the RFP based on their program experience.

The research team found that of the five proposals submitted by programs that were funded, one proposal clearly stood out from the rest not only in terms of the quality of the document submitted, but also in terms of the level of programming and clinical sophistication. In contrast, another proposal was relatively poorly organized and presented, and amateurish in terms of the description of the treatment services offered, their rationale, and program organization. Though this program nominally met the requirements of the RFP, the quality of the services provided may be questionable. The other three providers were in between these two in terms of content and presentation, presenting on the whole, thoughtful and adequately organized proposals. In line with this, it is suggested that the selection committee attempt to include an outside clinician experienced in working with sex offenders as a help in judging the likely quality and reasonableness of the clinical services from a given provider.

Finally, the point raised by Adelante regarding hesitation over the inclusion of the probation officer in the treatment groups is one that merits further study. Adelante argued in their proposal that this kind of arrangement might undermine treatment integrity and should be discussed further with ASOP. They feel that allowing outside individuals to "drop-in" on treatment groups is extremely disruptive to the treatment process and may diminish the effectiveness of the therapy regimen. For example, offenders may be very reluctant to disclose sensitive information if an officer is present. Secondly, clients in treatment who are not Cook County offenders may be uneasy with the probation officer's attendance in their group therapy sessions. On the other hand, one potential benefit is that offenders may realize that probation officers and treatment providers are working closely together. Another potential benefit is that probation officers will be able to continue

discussions with defendants about the defendant's sexual fantasies, urges, and self-statements. These two benefits, however, can be met through other strategies such as having probation officers meet offenders before or after therapy sessions at the treatment providers' agencies and by having staffing meetings that include both probation officers and treatment providers to discuss the problems of any resistant offenders. Because of the importance of this issue, the evaluation team will attempt to monitor the involvement of probation officers in the group sessions to determine if it has any deleterious effects on the treatment process. We will include questions in the monthly treatment progress reports to determine when and how often a probation officer has attended group meetings. We will also include interview questions with providers and participants that address their feelings and reflections on the probation officers' group attendance. In this way, we will get an empirically based estimate of whether or not this specific programming requirement affected either group participation or outcome in any significant way.

Summary of Recommendations

In summary, the research team provides the following nine recommendations for consideration by Cook County Adult Sex Offender Unit to improve the selection process in the future:

- **Future RFPs and contracts with treatment providers should be specific about the length of time for group and individual sessions to avoid variation from agency to agency. One and half to two hour sessions should be required for group therapy.**
- **Future RFPs should either specify what is meant by cognitive behavioral treatment or ask the applicants to do so.**
- **Given the variation in the quality of proposals and the treatment assessments obtained to date from agency to agency, it may be informative to explicitly include a requirement for example assessments in future proposals so that the quality of the assessments likely to be provided can be judged by the selection committee. This procedure may avoid sub-quality assessments that have been submitted by two of the treatment agencies to date.**
- **The selection committee should consider the overall quality, completeness, and professionalism evidenced by the proposal in their decisions about awards. To the extent that the quality of the treatment provided is reflected in the quality of the proposal submitted — there must be some relationship between the two — this factor needs to be considered in making an awards determination.**
- **Future RFPs should enumerate a rating system that will be used for evaluating proposals, and the selection committee should subsequently employ this rating system as part of their review process. Specific scoring mechanisms for rating proposals, while having some degree of arbitrariness, are used by many federal agencies to evaluate research grants.**
- **The unit or the Criminal Justice Information Authority may want to determine why so few treatment providers responded to the RFP to generate greater competition for future awards and presumably allow the weeding out of weaker**

proposals. Some factors that may have contributed include: lack of experience or qualified staff at other treatment agencies; the funding amounts for services were below market value; or the time provided for a response to the RFP was too short.

- After discussions with treatment providers and the observed experience during group therapy, ASOP may want to reconsider and possibly drop the requirement of a separate deniers group. The effectiveness of a separate deniers group has received mixed reviews in the academic and evaluation literature.
- The selection committee may want to consider including an outside clinician experienced in working with sex offenders as a help in judging the likely quality and reasonableness of the clinical services from a given provider.
- ASOP, the evaluation team, treatment providers, and the advisory committee after some experience and data are available should reexamine the extent to which probation officers should have access to the group therapy sessions.

F. Treatment Assignment

This section summarizes the process used by the Cook County Adult Sex Offender Program (ASOP) staff to assign offenders to a treatment program. The report findings are based on an interview with the ASOP Supervisor that took place at the Cook County Adult Probation department on January 20, 1998 and a review of the referrals for the 36 ASOP offenders who had been assigned to a treatment program as of February 24, 1998. In addition to these two sources of information, we also reviewed the files of 9 active cases to determine if these contained any information on treatment assignment. In general though, neither the supervisory plan in the files nor any other documents that we came across in the files reviewed contained any data relevant to treatment assignment. This is not a criticism of the charting process, since the ASOP Supervisor indicated that treatment assignment decisions were part of the verbal supervisory process and were not routinely charted by staff. It is noted here in case the Authority would want such documentation in the future.

One of the main criteria for treatment assignment is the location of the treatment program *vis a vis* where the offender resides. Per the ASOP Supervisor, treatment assignment of new cases is primarily based on the logistics of where the agency is located relative to the offender's residence. Treatment assignment usually occurs after the ASOP Supervisor reviews the file for completeness and the case officer has completed their interview. A supervision plan is then completed within 30 days of receiving the case in ASOP. During this period, the case officer, with the ASOP Supervisor's approval, assigns the offender to a treatment program. The ASOP supervisor described the assignment of cases as being a "fairly standard" process. She noted though, that complications can arise if the case is referred to ASOP after they have already begun some form of treatment while on general probation or if there were additional problems requiring treatment such as substance abuse. In the former circumstance, cases have been transferred to ASOP after they have been in a general probation program for some time. Such cases may already be receiving treatment at an agency that is not among the 5

treatment programs selected specifically for the ASOP program. The ASOP Supervisor noted that there were 5 such cases as of February 24th. These cases were in addition to the 36 on the list of active cases in treatment mentioned above.

With regards to additional complicating factors, the ASOP Supervisor noted the need for anti-depressant medications and substance abuse treatment as two factors that have already occurred and which need to be handled within the context of treatment planning. Neither of these two factors, however, appeared to influence the decision of where to send an offender to sex offender treatment. Of the cases seen by ASOP officers thus far, 5 have been recommended for anti-androgen medication to help control their impulsive behavior. Carefully conducted psychiatric evaluations for the Adelante cases, some of which recommended medications were noted in the charts that we reviewed. (Assessment documentation including psychiatric evaluations was missing for all of the cases assigned to the Center for Contextual Change. None of the 9 cases whose charts we reviewed had been assigned to Central Baptist.) She estimated that although 80% of the offenders said that they committed their offenses while drunk and that drinking was the cause of their offending, only about a third of the cases actually had an alcohol-related problem. We did not try to obtain a listing of those cases referred to drug treatment, however, of the 9 charts we reviewed, we did note that 2 cases were in drug treatment.

As mentioned, an offender is usually referred to the treatment program located closest to where he is residing. This is a reasonable strategy given that ASOP pays for the same amount and type of services from each treatment program. Thus, there should be relatively little variation from treatment program to treatment program with respect to the type and intensity of services offered. Given this service homogeneity, it makes sense to refer an offender to the nearest treatment program. There are, however, several principal exceptions to this general assignment rule. These are:

- **Problem Severity:** Offenders who appear to be more severely disturbed or problematic are more likely to be referred to the Center for Contextual Change. The rationale for this exception is that the Center for Contextual Change has a longer history than the other programs of working with sex offenders, and therefore their staff should be more experienced in handling difficult cases. Cases defined as being more difficult are those who have a longer history of offending, those who are judged to have committed a more severe crime (e.g., repeated intercourse over a several year span versus one or two instances of fondling occurring only recently), those who possess large amounts of child-related pornographic materials, and those who exhibit more extreme denial of the consequences of their actions and the nature of their offenses.
- **Language Requirements:** A number of the offenders only speak Spanish or speak only very little English. Of the five contracted treatment programs, only Adelante can reasonably accommodate such offenders at the present time. Spanish-speaking clients are therefore referred to Adelante for participation in their Spanish-speaking groups and to work with a Spanish-speaking counselor, regardless of where the offender

lives. In one instance to date, an offender was deaf. None of the five programs specifically contracted for providing treatment services to deaf clients but the ASOP Supervisor felt that Central Baptist might be able to accommodate this individual.

Of the 36 active ASOP, cases 32 had been assigned to a treatment program with 4 cases pending. Of the 32 assigned cases, 13 were assigned to the Center for Contextual Change, 14 had been assigned to Adelante, and 5 had been assigned to Central Baptist. Central Baptist was originally going to have treatment services at a facility in Oak Park. However, this was changed when it was discovered that the same facility provided day care services to children. Subsequently, treatment for ASOP cases was moved to a Central Baptist facility located on the south side of Chicago. The delay associated with the relocation of the treatment program may, in part, explain why Central Baptist has a smaller number of cases compared to the Center for Contextual Change or Adelante. Two providers, Associates in Family Therapy in Lake Bluff and Clinical Behavioral Consultants in Downers Grove, had not yet received any referrals at the date of the interview (01/20/98). According to the ASOP supervisor, this is because the suburban courts have been slow to refer cases to the program. Thus, for these two treatment programs, which are the most geographically distant from Chicago, there has not yet been an appropriate referral stream. The ASOP Supervisor commented that she expected and hoped that this situation would change within the next few months.

Recommendations

In summary, it appears that the assignment of cases to treatment programs has been appropriate given the programmatic and treatment contexts (i.e., the relative homogeneity of the type and intensity of the treatment services offered.) The research team offers these suggestions to enhance treatment assignment:

- **The ASOP Supervisor and case manager should document the decisions underlying the treatment assignment in the offender's chart.** This will allow for a more careful review of the rationale for these decisions, especially in circumstances where there may be complicating or mitigating factors such as the need for substance abuse treatment.
- **The criteria for determining how "severe" a certain case is should be formalized and documented.** Since these criteria appear to be related to treatment assignment, it would serve the program better if there were a more or less standard set of rules that could be applied evenly to all cases.
- **In light of Adelante's performance and adherence to standards, ASOP may want to reevaluate which program receives the more problematic cases.** It appears from our chart reviews that Adelante has, among the 3 programs where cases have been assigned to date, been the strongest in terms of complying with program requirements and providing detailed and thoughtful documentation on referred cases.
- **If as many as a third of ASOP cases actually have a drug use problem, it may be prudent to consider adding a more formal assessment to determine drug abuse and dependence and to making treatment assignments that include drug abuse**

treatment. Presently, applicants are screened through periodic urine monitoring, a semi-structured interview, and a pre-sentence investigation report. None of these sources collect enough detailed information to determine drug abuse and dependence. And urine monitoring, in and of itself, cannot measure abuse or dependence nor can it reliably detect alcohol use, the drug most likely to be abused by these offenders.

G. Development of operational policies and procedures

Responsibility for the development of a formal policy and procedures document was assigned to the unit supervisor and work on this document began in June 1997. This task, which under the best of circumstances can be demanding and time consuming, was made more difficult by the fact that no model for such document existed within the department. The ASOP was the first specialized unit at the Cook County Adult Probation Department to develop a formal policies and procedures document. The supervisor of the ASOP unit drafted the initial document, which was reviewed and revised by program administrators and the internal policy committee. The final document has been approved.

H. Timeline of the Implementation Process

An important part of a process evaluation is an assessment of whether the program was implemented in a timely fashion. We used the proposed time periods in the Cook County grant application (p. 56) as the proposed time period and compared the actual amount of time taken to the proposed amount of time that a specific task would take. The time period starts with the signing of the interagency Grant Agreement, which was sent to the Cook County Adult Probation Department on March 19th, 1996. Table 2 presents a timeline of the proposed implementation process compared to the actual amount of time taken to implement key phases of the program.

Table 2. Timeline of the Implementation Process

| Activity and completion dates | Proposed Time Period and completion dates | Actual Time Period |
|--------------------------------------|--|------------------------------|
| Obtain County Approval | 2 months - May, 1996 | 4 months - July, 1996 |
| Establish Advisory Committee | 2 months - May, 1996 | 4 months - July, 1996 |
| Hire Staff | 3 months - June, 1996 | 4 months - July-August, 1996 |
| Design Training | 3 months - June, 1996 | 3 months - June, 1996 |
| Select Service Providers | 4 months - July, 1996 | 10 months - January, 1997 |
| Inform Judges etc. | 4 months - July, 1996 | 12 months - March, 1997 |
| Provide Training | 4 months - July, 1996 | 5 months - August, 1996 |
| Accept Cases | 5 months - August, 1996 | 12 months - March, 1997 |

Much of the delay in the program implementation resulted from the inordinate delay in obtaining approval from the County Board, which was planned for May but did not occur until July. Another major source of delay was in the selection of service providers, an activity that proved to be much more time consuming and complex than originally thought. Program staff and the advisory committee elected to delay accepting clients into the program until service providers were selected and contracts signed resulting in the considerable delay in the start of the program. This was planned for August 1996, five months after receipt of the interagency agreement but the first case was not accepted until March 4th, 1997, almost a year after receipt of the interagency agreement.

IV. Processing Cases Through the System

In this section, the research team describes the proposed target group and case selection process. Cases first enter the criminal justice system typically through a victim or the victim's guardian or teachers reporting the alleged crime. Only rarely do police officers actually catch sex offenders in the act of the crime, though the ASOP unit is supervising one case where officers detected the criminal sexual assault against a minor in progress. For the cases in the ASOP unit as of May 8th, 1998, the average number of days from the arrest of the defendant to the start of the defendant's probation in the unit was 332 days with the time between arrest and a sentence to the ASOP probation being less than 217 days for half of the cases. The time period between arrest and sentencing ranged from 59 to 1,403 days.

A. Target Group

The initial target group for this program was to be adult defendants sentenced under Chapter 730 of the Illinois Compiled Statutes, section 5/5-5-3(e). Such defendants have been convicted of either criminal sexual assault (5/12-13(3) which is an act of sexual penetration with a victim who was under the age of 18 when the act was committed and the accused was a family member, or of aggravated criminal sexual abuse (5/12-16(b) which is an act of sexual conduct with a victim who was under the age of 18 when the act was committed and the accused was a family member as defined by statute. Both offenses are felonies.

B. Target Case Selection Procedure

There are nine discrete steps in the typical case selection process. The following paragraphs describe how defendants who are screened on eligibility for supervision by the ASOP unit are processed through the system. The developers of the program originally planned eligibility screening to occur in most cases to control the caseload size and the nature of the caseload.

Step 1. Case Identification:

The case selection procedure starts in the State's Attorney's Sexual Offender Division which handles all cases charged with sexual offenses. It is common for such cases to be charged with multiple offenses, only some of which may be target offenses. All cases which have at least one charge that fits the target group criteria are flagged as cases potentially eligible for placement on ASOP probation. There are a variety of reasons why a target offense case may not be further considered for the program at this stage. These can include situations where: the State's Attorney's Office decides to prosecute on more serious charge(s); the defendant is not a qualifying family member; the defense attorney and/or the defendant refuse to consider placement in the program; the Judge does not agree to consider placement in the program; prior criminal record excludes the defendant from being eligible for the ASOP unit (e.g. more than two Class 2 felony

convictions in the past 10 years) or non-acceptable (prior felony conviction); or the defendant elects to go to trial and only if convicted would accept placement in the program.

Target offense defendants who agree to at least consider placement in the program proceed to step 2.

Step 2. 402 Conference:

Target offense cases are handled through plea bargaining since a guilty plea is seen as indicative of some level of acceptance of responsibility and is suggestive of some motivation to change. If a plea appears likely, the judge, defense attorney and the Assistant State's Attorney meet in a 402 Conference (per Illinois Supreme Court rule 402). The State reviews the ASOP in outline form and recommends that, if the defendant is eligible, he be sentenced to ASOP probation. If the defense, the judge, and the defendant through consultation with his attorney agree in principle on an ASOP probation sentence, the supervisor of ASOP is invited into the conference or is otherwise contacted to indicate ASOP's willingness to accept the case for eligibility screening.

Step 3. Submission of Request for Screening:

If all parties agree at this point, a **Request For Screening For Eligibility form** (attachment A) is completed, usually by the defense attorney, and sent to ASOP. The case is continued to a date stated on the form, most often for 30 days.

After the conference, if they are available, the ASOP director meets briefly with the victim(s) and victim's family to explain what has happened. She also meets briefly with the defendant to schedule an appointment in the office as soon as possible.

ELIGIBILITY CRITERIA

Cases are screened with the following eligibility criteria:

- Defendant signs the Three-Stage Plan of Probation form
- Defendant agrees to abide by conditions of ASOP probation
- Prior criminal history confirms offender is probationable
- Offense is against a family member and is charged as either Criminal Sexual Assault or Aggravated Criminal Sexual Abuse

Step 4. Initial Office Meeting With Defendant:

The **Three-Stage Plan of Supervision form** (attachment B) stating the stages and the requirements at each stage are reviewed by the defendant. This form must be signed by the defendant for the case to proceed. Failure to agree to sign this document results in

case rejection. The **Specifications and Certificate of Conditions of Sex Offender Supervision** form (attachment C), that describes conditions that apply to most offenders in the ASOP, is also reviewed with the defendant at this point so he will be acquainted with what will be expected of him if he is indeed sentenced to ASOP. No document containing such conditions is signed at this point since the defendant has not yet been sentenced.

Step 5. Intake Interview:

Following the review of the above two items, the case is assigned to the ASOP probation officer covering the geographic area in which the defendant lives. On the day of the initial visit, or as soon as possible, the assigned PO meets with the defendant to complete the **Adult Probation Sex Offender Intake** form (attachment D) except that the addendum on sexual history and the defendant's version of the offense are not recorded until after sentencing.

Step 6. Review of Collateral Information:

As part of the intake process, the State's Attorney file on the defendant, the police report and the defendant's criminal history record are reviewed by the PO or ASOP director to confirm that the defendant is indeed legally probationable, to obtain an official statement of the offense, obtain a copy of the victims' statements and obtain a basic understanding of how the charges were brought about and to estimate the defendant's degree of denial about the offense.

Step 7. Residence Verification:

A home visit at the defendant's residence is conducted to insure that the defendant is not living in the household of the victim, nor in close proximity to where children gather, e.g. a day care center. The defendant is advised that he will be expected to move to another residence if these conditions are not met. The residence is inspected for the presence of pornographic and other sexually explicit material. If such is found, the defendant is advised to remove this material since once on probation the presence of such material will constitute a violation of probation. During this visit, the defendant's relatives are informed of the conditions and procedures of the ASOP so they too will know what to expect and also to enlist their assistance and cooperation.

Step 8. Submission of Eligibility Letter:

The case file containing all the above referenced material and forms is reviewed by the ASOP director. If all the selection criteria are met, the director signs an **Eligibility Letter** (Attachment E) which notifies the Court that the defendant is eligible for sentencing to ASOP.

Step 9. Sentence to ASOP:

At the sentencing hearing, the defendant is sentenced to a specific term of probation and the **Specifications and Certificate of Conditions of Sex Offender Supervision** (attachment C) is filled out and signed by the Judge and the defendant. The defendant then meets immediately with his ASOP probation officer to establish a schedule of face-to-face visits.

C. Deviations from Target Case Selection Procedure

Steps 1 through 8 represent the case selection procedure for cases which meet the target offense criteria. It is possible that non-targeted cases may be referred to and accepted into the program as a result of Judicial action or State's Attorney's Office request. In addition, target cases may be directly sentenced to ASOP without going through the eligibility review stages. Although every attempt is made by program and State's Attorney's staff to control referral of such "illegitimate" cases, the reality of court-based programming suggests that such control will not be 100% effective. With this in mind, we have elected to record such "deviations" when they occur.

D. State's Attorney's Targeting and Referring Cases

In order to assess the extent to which the State's Attorney's Office targeted and referred eligible offenders to the ASOP program, we initially planned to obtain a random sample of 150 cases charged with sexual assault or aggravated criminal sexual abuse from the SA's office computerized data base. The Director of the Sexual Crimes Division of the SA's office indicated (interview 7/1/97) that the computerized system was not reliable for this type of analysis since all charges were listed, and any run would produce an inflated count of cases. Since the Director of the Sexual Crimes Division reviews all cases referred to the division, he agreed to identify cases with at least one target offense and provide the evaluation team with a monthly report on cases received.

We received data on a total of 413 cases referred to the Sexual Crimes Division from July through December 1997. Data included the case number, defendant's age and relationship to the victim(s), victim(s)' age and gender, whether or not the defendant had a prior felony conviction, whether or not the defendant gave a written statement admitting to the offense, and whether there was an indication of violence. No data were available on specific charges or disposition at this early stage since the data were for cases referred to, but not yet processed by, the division. We were able to identify those cases that fit at least three eligibility criteria. These were: victim was under 18; defendant was a family member; and defendant was not excluded because of a prior felony conviction. These are designated in Table 3 as Eligible Cases.

In addition, we included as expanded eligibility criteria, defendants who were uncles of the victim simply because in our view, the definition of family member could possibly be expanded to include this relationship. Also included in this category are cases

in which the defendant is the mother's boyfriend but there is no confirmation that he was living in the home at the time of the offense. However, because we believe that in many instances the boyfriend is or was living in the home when the offense occurred, we have added him to this classification as well. Thus, cases designated as Expanded Eligible cases in Table 3, meet the basic criteria of eligible cases plus the additional criteria of "uncle" and "mother's boyfriend".

It should be noted that cases identified from this data set are not likely to be decided for a number of months and therefore this data set is not at this point a reflection of the number of eligible cases actually referred to ASOP. These data are useful at this point in providing a glimpse of the Sexual Crimes Division's intake, a count of how many cases meet the basic and expanded criteria, a comparison of total caseload to eligible cases and a comparison of eligible cases with a sample of 42 cases currently active in the ASOP program.²²

Data and comparisons are presented on age of defendant, gender and age of victim²³, and relationship to victim .

These data indicate that during this time period 41 or 9.9% of the Sexual Crimes Division's intake cases met three of the ASOP criteria and 63 or 15.2% met the criteria expanded to include uncles and mother's boy friend.

There is need at this point to decide on a program definition of family member since ASOP cases are not adhering to the statutory definition and, in our view, the program would not be compromised were the definition of family member broadened at least to include uncles.

²² As of May 21, 1998, the ASOP program had admitted 58 cases to the program; all tables in this report are based on a sample of 42 cases that were coded by May 1, 1998.

²³ In cases of multiple victims, the age of the youngest victim was used.

Table 3. Selected Offender Characteristics of State's Attorneys Cases by Eligibility Status Compared to 42 ASOP Cases

| Cases | Total Sexual Division N=413 | Eligible Cases N=41 | Expanded Eligibility Cases N= 63 | ASOP N=42 |
|----------------------------|-----------------------------|---------------------|----------------------------------|-----------|
| Defendant's Average Age | 29.2 | 33.8 | 34.2 | 32.6 |
| Victim's Average Age | 17.3 | 11.0 | 10.9 | 11.0 |
| Family Member | 13.7% | 100% | 100% | 38.1% |
| * Father | 5.3 | 41.4 | 22.2 | 16.7 |
| *Stepfather | 4.6 | 31.7 | 15.9 | 14.3 |
| *Grandfather | 1.0 | 7.1 | 4.8 | |
| *Brother | 1.0 | 9.5 | 4.8 | 2.4 |
| *Stepbrother | .7 | 4.8 | 3.2 | |
| *Defendant living in house | .5 | 2.5 | | 7.1 |
| Uncle | 6.1 | N/A | 31.7 | 11.9 |
| Mom's boy friend | 5.1 | N/A | 17.5 | |

V. Program Operation

A. Size of Current ASOP Caseload and Noncompliance

The Cook County Adult Sex Offender Program as of May 21, 1998 currently has a caseload of 58 defendants, and an active caseload of 51 defendants. These caseload counts do not include defendants who are supervised by ASOP probation officers, but have the requirements of regular adult probation. Table 4 provides a summary of the number of intakes and revocations from February 1, 1997 to May 21, 1998.

Table 4. Caseload and Number of VOP filed from February, 1997 to February, 1998

| Month / Year | Number of New Cases Sentenced To ASOP | Number of Cases In Which Probation Is Revoked | Total Number Of Cases On ASOP | Number of VOP Petitions Filed |
|-----------------|---------------------------------------|--|-------------------------------|-------------------------------|
| February, 1997 | 0 | 0 | 0 | 0 |
| March, 1997 | 0 | 0 | 0 | 0 |
| April, 1997 | 6 | 0 | 6 | 0 |
| May, 1997 | 2 | 0 | 8 | 0 |
| June, 1997 | 5 | 1 (3 yrs. DOC) | 12 | 1 |
| July, 1997 | 8 | 0 | 20 | 0 |
| August, 1997 | 4 | 1 (warrant status) | 23 | 1 |
| September, 1997 | 2 | 0 | 25 | 2 |
| October, 1997 | 3 | 1 (deported by INS) | 27 | 2 |
| November, 1997 | 1 | 0 | 28 | 1 |
| December, 1997 | 5 | 1 (in custody as of 3/23) | 32 | 2 |
| January, 1997 | 0 | | | |
| February, 1998 | 5 | | 37 | 2 |
| March, 1998 | 5 | | 42 | 2 |
| April, 1998 | 6 | 1 (received 3 years DOC) 1 (in custody as of 4/20/98) | 46 | 3 |
| May, 1998 | 6 | 1 (in custody as of 5/7/98) | 51 | 3 |
| Grand Totals | 58 | 7 | 51 | 19 |

As shown in Table 4, the ASOP unit initially had a very slow start, with a lull in the fall, and since the new year has consistently obtained 5 or 6 new defendants per month. After a year of taking cases, it was projected that the unit would have 75 defendants by March of 1998 in the Cook County ASOP grant, and these projections were revised on February 27, 1998 to estimate 50 offenders by the end of April, and 57 offenders by the end of May.²⁴ The actual caseload size is substantially short of the original goal stated in the Cook County grant; however, it appears that the new estimates are more on target with actual practice. It was estimated in February that at the end of

²⁴ Letter to Authority written by Chief Probation Officer of Cook County Probation on February 27th, 1998.

May, the unit would have 57 defendants as of May 21, it has 58 defendants, which includes the revocations.

Several factors have contributed to the fact that the unit is substantially short of the original goal stated in the Cook County ASOP grant. The most significant factor appears to be the delay in obtaining the treatment contracts to bring treatment providers on board so that defendants could be assigned to treatment. Program officials wanted the treatment providers on board before taking a substantial number of cases, which was a reasonable decision given the importance of treatment to the program. Due to delays at the Cook County Board, treatment providers did not obtain contracts until the beginning of November and defendants were assigned to treatment at the end of November of 1997. Another significant factor is the very slow start in obtaining referrals from the suburban courts.

Of the 58 defendants in the ASOP unit, seven have been taken into custody, and two of these offenders have been sentenced to IDOC, and two other defendants await their sentencing. From February 1997 to May 1998, the ASOP unit had filed 19 violation of probation petitions, and of these 12 petitions had been granted, 4 had been dismissed, 2 had been withdrawn, and one is pending. Fifteen defendants have had a violation of probation filed against them. For the entire population of ASOP defendants, there have been a total of 10 arrests. These arrests include: four domestic battery arrests; one traffic violation arrest; two battery arrests; one arrest for failure to register; one arrest for driving while intoxicated; and one arrest for aggravated criminal sexual abuse.

B. Adherence to Eligibility Criteria

During the creation of the ASOP unit, the developers anticipated screening potentially eligible defendants before defendants were sentenced to the unit. The developers established criteria that a defendant had to meet in order to be sentenced to the unit. These criteria included:

- Offense charge of either Aggravated Criminal Sexual Abuse or Criminal Sexual Assault
- Offense charge of a family related crime (the statutes define a family member as a father, stepfather, grandfather, step-grandfather or anyone who has lived with the victim in the same home for one year)
- Would be sentenced to probation for 48 months
- Reside in Cook County Area
- Reside in a suitable residence away from child-care facilities or children

Table 5 presents the number and percentage of ASOP defendants who met each one of these criteria for the entire sample, and for the defendants who received an eligibility screening or were directly sentenced to the ASOP unit. As shown in Table 5, only about 36 percent of the ASOP defendants received an eligibility screening whereas about 64 percent were directly sentenced to the unit. It appears that judges have been

made aware of the program and are eager to use the program; however, judges also appear to want to use the program for defendants who do not meet the initial eligibility criteria.

Table 5 shows that 42 percent of the ASOP defendants have a family-related sexual offense charge, which indicates that these defendants are legally family members. Legally, the term family member is limited to parents, grandparents, step-parents, step-grandparents, and any household member who has lived with the victim for at least one year in the same home. When this legal definition of family member is expanded to include uncles, 52 percent of the defendants are related to the victim. Thus, almost 48 percent of the defendants are not related to the victim, but are acquaintances (neighbors, sister's boyfriend, maintenance helper) of the victim or in a position of trust over the victim (school teacher, photographer) or a distant relative.

Though the research team expected that defendants who were directly sentenced would be more likely to deviate from the eligibility criteria such as having a family relationship with the victim, this hypothesis was not supported. Sixty percent of the defendants who received an eligibility screening and 57.7 percent of the defendants who were directly sentenced were not legally family members; a difference that is not substantially or significantly different, $X^2 (1) = .02, p < .88$.

It is inherently difficult to use the convicted offense as eligibility criteria for inclusion in the ASOP program. Defendants who commit similar crimes may be charged with different offenses due to plea-bargaining and the amount of evidence against them. Moreover, most sex offenders are charged with and convicted of more than one crime; thus, the offender often has several offenses and the selection of one offense is both arbitrary and misleading in that it distorts the true nature of the crime. For example, aggravated criminal sexual assault is a Class X felony, and is not probationable. Aggravated criminal sexual assault also is not one of the initial eligible offenses for the ASOP unit; however, almost thirty-eight percent of the defendants had at least one charge of aggravated criminal sexual assault on the original indictment. Most defendants have at least one charge of either criminal sexual assault or aggravated criminal sexual abuse. However, seven defendants have some other charge such as distribution of pornography or attempted aggravated criminal sexual abuse, and four of these defendants were directly sentenced. All defendants, with one exception, have committed sexual offenses against children under the age of 18.

Another important criteria of the ASOP unit is that the defendants are sentenced to 48 months, or 4 years probation. By statute, 48-month probation sentence for a Class 1 or 2 felony is the maximum length. The average probation sentence for sex offenders in Illinois in 1997 was about 30 months; perhaps, a 48 month sentence may appear to be too long to judge who are reluctant to impose a maximum sentence. This length of time seems both necessary and reasonable. Sex offenders are one of the most difficult offenders to supervise and treat because their inappropriate sexual behavior stems from both inappropriate socialization and attitudes that allow them to justify repeating their

crimes. To expect sex offenders to desist with a "slap on the wrist" is unrealistic and a waste of resources. The criminal justice system must make special efforts to provide intensive supervision and treatment for an appropriate length of time. Four years seems to be the minimum amount of time necessary to fulfill treatment goals; the ASOP program is designed to provide two years of treatment, after which the defendant should be closely supervised to insure that the defendant does not relapse back to sexual offending. Unfortunately, many of the judges seem not to understand the importance of supervision after treatment or the importance of a four-year probation sentence for sexual offenders. Only 44 percent of the defendants were sentenced to four years probation, and interestingly defendants were more likely to be sentenced for four years probation if they were directly sentenced (51.9%) rather than screened (20.0%), $X(1) = 4.06, p < .04$. Two recommendations can be made from these data. First, judges need to be educated in a sex offender workshop about the reasons why a four-year probation sentence for sexual offenders is necessary. Second, ASOP probation officers and the state's attorney should recommend a four year sentence and make it a condition of ASOP probation when they screen defendants.

To summarize, many defendants do not meet the initial offense-based eligibility criteria. There also is a substantial departure from the initial process of eligibility screening. Over sixty-four percent of the defendants are directly sentenced to the program. This departure from the eligibility screening, however, does not explain, as one would expect, why defendants do not meet the initial eligibility criteria. We will need to explore further the explanations for why even eligibility-screened defendants sometimes do not meet the eligibility criteria. One explanation is that the prosecutor may request that the ASOP probation officers support placement to insure that a sexual offender is not sentenced to regular probation; at least one case in which a member of the research team observed the sentencing hearing can be explained as a deviation due to the prosecutor's request.

Additionally, ASOP probation officers have rejected some cases due to the fact that the eligibility criteria were not met. To date, nine cases have been rejected after an eligibility screening. All rejected defendants except one were charged with some other offense (e.g., Misdemeanor Battery; Public Indecency; Official Misconduct; Stalking; Aggravated Criminal Sexual Assault). One defendant was rejected due to an illegal alien status and the fact that deportation was in process. Two other defendants lived in other jurisdictions and were rejected for this reason. Two defendants who had an ineligible offense also were rejected due to mental health issues and lack of a suitable residence.

Comparison of eligibility screened and directly sentenced defendants

Although eligibility screened and directly sentenced defendants do not differ substantially on the eligibility criteria for the program, they may differ on other criteria such as amount of denial, willingness to undergo treatment, and type of sexual paraphilia. Some data already support this conclusion. Whereas 30 percent of the directly sentenced defendants admitted that they sometimes or often fantasized about sadistic or forced

sexual acts, none of the eligibility-screened defendants admitted to having these fantasies. Additionally, 39.1 percent of directly sentenced defendants compared to 18.2 percent of the eligibility screened defendants admitted to sometimes or often having sexual fantasies about sex with minors. The directly sentenced defendants also are more likely to admit to sexual fantasies that are less inappropriate (multiple partners, sex with virgins, pregnant women): 69.6% of the directly sentenced defendants compared to 41.7% of the eligibility screened defendants had these fantasies. Whereas 80% of the eligibility screened defendants are currently in active sexual relationships at the time of intake, only 37.5% of the directly sentenced defendants are. As we code the treatment evaluations, we can begin to discover additional differences between these two groups of offenders. It also will be important to analyze treatment effectiveness separately for these two groups of offenders to educate judges about the risks associated with sentencing defendants to ASOP without an eligibility screening.

Table 5. Eligibility Criteria on Defendants in the Adult Sex Offender Program
(N = 42)
May 8, 1998

| Characteristics | Total Population | Eligibility Screened | Directly Sentenced |
|--|------------------|----------------------|--------------------|
| Whether Eligibility Screening Was Conducted? | | | |
| No | 27 (64.3%) | | |
| Yes | 15 (35.7%) | | |
| Length of Probation | | | |
| 12 or 18 months | 3 (7.1%) | 1 (6.7%) | 2 (7.4%) |
| 24 or 30 months | 11 (26.2%) | 8 (53.3%) | 3 (11.0%) |
| 36 months | 11 (26.2%) | 3 (20.0%) | 8 (29.6%) |
| 48 months | 17 (40.4%) | 3 (20.0%) | 14 (51.9%) |
| # of family-related charges | | | |
| None | 24 (58.5%) | 9 (60.0%) | 15 (57.7%) |
| 1 to 2 | 9 (22%) | 2 (13.3%) | 7 (26.9%) |
| 3 to 18 | 8 (19.5%) | 4 (26.7%) | 4 (15.4%) |
| Missing | 1 | | 1 |
| Offender's Relationship to Victim | | | |
| Father | 7 (16.7%) | 2 (13.3%) | 5 (18.5%) |
| Stepfather | 6 (14.3%) | 3 (20.0%) | 3 (11.1%) |
| Other live-in member | 3 (7.1%) | 1 (6.7%) | 2 (7.4%) |
| Uncle | 6 (14.3%) | 3 (20.0%) | 3 (11.1%) |
| Other distant relative | 6 (14.3%) | 2 (13.3%) | 4 (14.8%) |
| Unrelated | 14 (33.3%) | 4 (26.7%) | 10 (37.0%) |
| Characteristics of Offense | | | |
| Convicted Charge | | | |
| Criminal Sexual Assault | 12 (28.6%) | 4 (26.7%) | 8 (30.8%) |
| Aggravated Criminal Sexual Abuse | 22 (52.4%) | 9 (60.0%) | 13 (50.0%) |
| Other | 7 (16.7%) | 2 (13.3%) | 5 (19.2%) |
| Missing | 1 | | 1 |
| # of Counts of Aggravated Criminal Sexual Assault | | | |
| None | 26 (61.9%) | 10 (66.7%) | 16 (61.5%) |
| 1 to 3 | 9 (21.4%) | 2 (13.3%) | 7 (26.9%) |
| 4 to higher | 6 (14.3%) | 3 (20.0%) | 3 (11.5%) |
| Missing | 1 | | 1 |

Risk Characteristics of ASOP Defendants

Prior research has identified several static characteristics of the offense that increase the likelihood that sex offenders will reoffend. Table 6 presents these risk characteristics. Prior research indicates that sex offenders who prey upon non-family members are at a higher risk of reoffending than are sex offenders who prey upon their own children. As Table 5 indicated, 57.2 percent of the sex offenders are in this high risk category of victimizing non-family children. Prior research also has consistently found that homosexual or bisexual sex offenders are at a higher risk of reoffending than are sex offenders who victimize only the opposite sex. Table 6 shows that only six defendants in the unit have victimized only boys or both girls and boys. Another rather consistent predictor of reoffending is whether offenders have committed or have the propensity to commit "hands-off" sex offenses such as voyeurism or exhibitionism. About one third of the ASOP defendants admit to sometimes or often fantasizing about "hands-off" offenses. Research also has shown that defendants who use aggressive force or commit sadistic acts are more likely to reoffend. Twenty percent of the ASOP defendants sometimes or often fantasize about sadistic or forceful sexual acts, and twenty-four percent of the defendants were charged with using force to complete the sexual act.

Several other characteristics are presented in Table 6 that may be related to the risk of reoffending, but have not been examined in the prior literature. Offenders who fantasize about sexual acts with children may have more difficulty from refraining from the behavior; about one-third of the defendants admitted to fantasizing about sexual acts with children. Prior research has not addressed whether fantasies about masochistic sexual acts or sexual acts that are less inappropriate (e.g., sex with virgins, multiple-partners, prostitutes, pregnant women) are related to risk of reoffending. It is clear from these data that the majority of sex offenders (64%) admitted to having at least one sexual fantasy about sex in less conventional forms. These data are all the more interesting when one realizes that due to withholding of information by some defendants that these data probably represent lower-bound estimates of the population's actual sexual fantasy life.

Three characteristics of the offense have not received adequate examination as predictors of reoffending in previous studies: age of victim, whether penetration occurs, and the number of months abuse has been occurring. Though the majority of ASOP defendants have victimized adolescents, 48.8 percent have victimized children under the age of 12, and of these 60 percent have victimized children under the age of nine. In 52.5 percent of the cases, penetration occurred and typically was vaginal. Five defendants were convicted of a single incident whereas the majority had committed several offenses across a number of months ranging from three months to seven years. Defendants who continued their abuse over several years may be at a higher risk of reoffending, about 23 percent committed sex offenses between one to two year time frame, and about 23 percent committed sex offenses between 25 months to seven years.

Table 6. Assessment of Risk Characteristics of ASOP Defendants
(N = 42)

| Characteristics | Total Population | Eligibility Screened | Directly Sentenced |
|--|------------------|----------------------|--------------------|
| Gender of Victim | | | |
| Girls | 36 (85.7%) | 13 (86.7%) | 23 (85.2%) |
| Boys | 5 (11.9%) | 1 (6.7%) | 4 (14.8%) |
| Both Girls and Boys | 1 (2.4%) | 1 (6.7%) | 0 (0.0%) |
| Age of Victim | | | |
| 3-8 | 12 (29.3%) | 4 (28.6%) | 8 (29.6%) |
| 9-11 | 8 (19.5%) | 3 (21.4%) | 5 (18.5%) |
| 12-14 | 15 (36.6%) | 6 (42.9%) | 9 (33.3%) |
| 15-17 | 4 (9.8%) | 1 (7.1%) | 4 (14.8%) |
| 18-21 | 1 (4.8%) | 0 | 1 (3.7%) |
| Missing | 1 | 1 | |
| Did Penetration Occur? | | | |
| No | 20 (47.6%) | 8 (53.3%) | 12 (44.4%) |
| Yes, only vaginal | 13 (31.0%) | 6 (40.0%) | 7 (25.9%) |
| Yes, either anal or oral | 5 (11.9%) | 0 (0%) | 5 (18.5%) |
| Yes, vaginal, and anal or oral | 4 (9.6%) | 1 (6.7%) | 3 (11.1%) |
| Number of Months Abuse has been occurring? | | | |
| Single incident | 5 (14.3%) | 1 (8.3%) | 4 (17.4%) |
| 1 to 6 months | 11 (31.4%) | 4 (33.3%) | 7 (30.4%) |
| 7 to 12 months | 3 (8.6%) | 0 (0%) | 3 (13.0%) |
| 13 to 24 months | 8 (22.9%) | 5 (41.7%) | 3 (13.0%) |
| 25 to 36 months | 2 (5.7%) | 0 (0.0%) | 2 (8.7%) |
| 37 to 84 months | 6 (17.1%) | 2 (16.7%) | 4 (17.4%) |
| Missing Information | 7 | 3 | 4 |
| Number of Force-related Charges | | | |
| None | 31 (75.6%) | 11 (73.3%) | 20 (76.9%) |
| One to Twelve | 10 (24.4%) | 4 (26.7%) | 6 (24.1%) |
| Missing | 1 (0.0%) | | 1 |
| Number of Sexual Fantasy Categories in which Offender Fantasizes Often or Sometimes | | | |
| # About Sex With Minors | | | |
| None | 23 (54.8%) | 9 (81.8%) | 14 (60.9%) |
| One to Three | 11 (32.4%) | 2 (18.2%) | 9 (39.1%) |
| Missing | 8 | 4 | 4 |
| # About "hands-off" Sex Offenses | | | |
| None | 24 (68.6%) | 8 (66.7%) | 16 (69.6%) |
| One to Three | 11 (31.4%) | 4 (33.3%) | 7 (31.4%) |
| Missing | 7 | 3 | 4 |

Continued – Table 6 Assessment of Risk Characteristics of ASOP Defendants
(N = 42)

| Characteristics | Total Sample | Eligibility Screened | Directly Sentenced |
|---|--------------|----------------------|--------------------|
| # About Masochistic Sexual Acts | | | |
| None | 32 (91.4%) | 11 (91.7%) | 21 (91.3%) |
| One to Two | 3 (8.6%) | 1 (8.3%) | 2 (8.7%) |
| Missing | 7 | 3 | 4 |
| # About Sadistic/Force Sexual Acts | | | |
| None | 28 (80.0%) | 12 (100.0%) | 16 (69.6%) |
| One | 7 (20.0%) | 0 | 7 (30.4%) |
| Missing | 7 | 3 | 4 |
| # About Other Sexual Acts | | | |
| None | 14 (40.0%) | 7 (58.3%) | 7 (30.4%) |
| One to Two | 13 (37.2%) | 2 (16.7%) | 11 (47.8%) |
| Three to Six | 8 (22.8%) | 3 (25.0%) | 5 (21.8%) |
| Missing | 7 | 3 | 4 |

Demographic Characteristics of ASOP Defendants

Table 7 presents the demographic and background characteristics of ASOP defendants to date. The table is based on forty-two ASOP defendants admitted to the program by May of 1998.

All of the defendants are males with an age range between 16 to 64 ($M = 32.6$). Most defendants are between 27 and 43 years of age. The program, however, includes three juvenile defendants who were tried as adults, and includes one sixty-four year old defendant. About sixty percent of the defendant are employed with most of these defendants holding full-time jobs. Despite this employment rate, almost 65 percent of the defendants live in poverty making less than 13,500 dollars per year. ASOP defendants are better educated than the general probation population with 37.5 percent having some college or trade school experience and only 40 percent having failed to complete high school. About 43 percent of the defendants are single, 36 percent are married, and the rest are separated or divorced. Slightly over half of the defendants (53.8%) are currently in an active sexual relationship.

The data for alcohol and drug use are somewhat incomplete with missing information for five defendants. Only a minority of ASOP defendants admit that they have alcohol or drug problems. Many defendants may use and abuse alcohol and drugs, but may not perceive that it is a problem; these questions should be rewritten to obtain specific information about the amount of usage. Forty percent of the defendants admitted to taking drugs. Only five defendants have had prior treatment for alcohol or drug problems. Only five defendants admitted that they were sexually abused as a child. Most

defendants (94.6%) do not have prior arrests for sex offenses, though about one-quarter of the defendants have at least one prior arrest for some other offense.

Table 7. Description of ASOP Defendants and Their Needs At Intake
(N = 42)

| Demographic Characteristics | Total Population | Eligibility Screened | Directly Sentenced |
|---|------------------|----------------------|--------------------|
| Race | | | |
| White | 9 (21.4%) | 4 (26.7%) | 5 (18.5%) |
| Black | 21 (50.0%) | 6 (40.0%) | 15 (55.6%) |
| Hispanic | 12 (28.6%) | 5 (33.3%) | 7 (25.9%) |
| Age of Offender | | | |
| 16 to 17 | 6 (14.6%) | 2 (13.3%) | 4 (15.4%) |
| 18 to 26 | 4 (19.0%) | 1 (6.7%) | 3 (11.5%) |
| 27 to 34 | 11 (26.8%) | 5 (33.3%) | 6 (23.1%) |
| 35 to 43 | 16 (39.0%) | 5 (33.3%) | 11 (42.3%) |
| 44 to 52 | 3 (7.3%) | 1 (6.7%) | 2 (7.7%) |
| 53 to 64 | 1 (2.4%) | 1 (6.7%) | |
| Missing Information | 1 | | 1 |
| Current Employment | | | |
| Unemployed | 16 (39.0%) | 4 (26.7%) | 12 (46.2%) |
| Part-time Employed | 3 (7.3%) | 1 (33.3%) | 2 (7.7%) |
| Full-time Employed | 17 (41.5%) | 8 (53.3%) | 9 (34.6%) |
| Employed Unspecified whether part-time or full-time | 5 (12.2%) | 2 (13.3%) | 3 (11.5%) |
| Missing | 1 | | 1 |
| Income | | | |
| 13,500 or less | 24 (64.9%) | 7 (50.0%) | 17 (73.9%) |
| 13,501-15,000 | 1 (2.9%) | 1 (7.1%) | 0 (0.0%) |
| 15,001-20,000 | 3 (8.6%) | 2 (14.3%) | 1 (4.3%) |
| 20,001-24,999 | 4 (11.4%) | 2 (14.3%) | 2 (8.7%) |
| 25,001-30,000 | 2 (5.7%) | 1 (7.1%) | 1 (4.3%) |
| 35,000 or more | 3 (8.6%) | 1 (7.1%) | 2 (8.7%) |
| Education | | | |
| Completed Grade 9 or less | 9 (22.5%) | 2 (13.3%) | 7 (28.0%) |
| Completed 10 to 11 | 7 (17.5%) | 2 (13.3%) | 5 (20.0%) |
| Completed High School/GED | 8 (20.0%) | 6 (40.0%) | 2 (8.0%) |
| Some College or Trade School | 15 (37.5%) | 5 (33.3%) | 10 (40.0%) |
| Completed B.A./B.S. | 1 (2.5%) | 0 | 1 (4.0%) |
| Missing | 2 | | 2 |

Continued - Table 7. Description of ASOP Defendants and Their Needs At Intake
(N = 42)

| Characteristics | Total Population | Eligibility Screened | Directly Sentenced |
|--|------------------|----------------------|--------------------|
| Martial Status | | | |
| Married | 15 (35.7%) | 6 (40.0%) | 9 (36.0%) |
| Separated | 4 (9.5%) | 1 (6.7%) | 3 (12.0%) |
| Divorced | 3 (7.1%) | 2 (13.3%) | 1 (4.0%) |
| Single | 18 (42.9%) | 6 (40.0%) | 12 (48.0%) |
| | | | |
| In a sexually active relationship? | | | |
| No | 18 (46.2%) | 3 (20.0%) | 15 (62.5%) |
| Yes | 21 (53.8%) | 12 (80.0%) | 9 (37.5%) |
| Missing | 3 | | 3 |
| | | | |
| Offender Indicated Alcohol Problem | | | |
| No, Current or Past Alcohol Abuse | 27 (73.0%) | 14 (93.3%) | 13 (59.1%) |
| Yes, Current Abuse with No Past Treatment | 5 (13.5%) | 0 | 5 (22.7%) |
| Yes, Current Abuse with Past Treatment | 5 (13.5%) | 1 (6.67%) | 4 (18.2%) |
| Missing | 5 | | 5 |
| | | | |
| Offender Indicated Illicit Drug Usage? | | | |
| No and No Prior Treatment for Drug Abuse | 24 (60.0%) | 11 (73.3%) | 13 (52.0%) |
| Yes and No Prior Treatment for Drug Abuse | 11 (27.5%) | 2 (13.3%) | 9 (36.0%) |
| Yes and Prior Treatment for Drug Abuse | 5 (12.5%) | 2 (13.3%) | 3 (12.0%) |
| Missing | 2 | | 2 |
| | | | |
| Defendant Ever Victim of Sexual Abuse? | | | |
| No | 31 (86.1%) | 13 (92.9%) | 18 (87.8%) |
| Yes | 5 (13.9%) | 1 (7.1%) | 4 (18.1%) |
| Missing Information | 6 | 1 | 5 |
| | | | |
| # of Total Prior Arrests | | | |
| None | 28 (75.7%) | 12 (85.7%) | 16 (69.6%) |
| One to Seven | 9 (24.3%) | 2 (14.1%) | 7 (30.4%) |
| Missing Information | 5 | 1 | 4 |
| | | | |
| # of Total Prior Arrests For Sex Offenses | | | |
| None | 35 (94.6%) | 14 (100.0%) | 21 (91.3%) |
| One to Two | 2 (5.4%) | | 2 (8.6%) |
| Missing Information | 5 | 1 | 4 |

Recommendations

The evaluation team offers the following recommendations for consideration:

- **Program staff, the evaluation team, and the advisory committee should reexamine this program's target population when impact data become available.**
- **Judges should be informed about the necessity of a 48 month probation sentence for most sex offenders.**
- **ASOP probation officers and the state's attorney should typically recommend at least a four year probation sentence.**
- **It will be important to determine whether directly sentenced offenders and eligibility screened defendants differ in their progress during treatment and the likelihood of recidivism.**

C. Surveillance Standards

The Cook County ASOP grant proposal to the Authority specified specific standards for face-to-face contact between probation officers and sex offender defendants. The ASOP unit planned three phases of surveillance with the intensity of contact decreasing as a sex offender made progress on probation and in treatment. The first phase of surveillance was planned to last between six to twelve months, and the probation officer would have a minimum of three face to face contacts per week (though the grant text specified at least four office contacts and 6 field visits per month). The sex offender is moved into the second phase of ASOP probation after successfully completing 6 to 12 months of probation. The second phase requires that probation officers have 8 face-to-face contacts per month (3 office visits and 5 field visits). The sex offender is moved to the third phase of ASOP probation after successful completion of phase 2 for a minimum of six months. The third phase of ASOP probation requires 6 face-to-face contacts per month (2 office contacts and 4 field contacts).

One intent of the developers of the ASOP unit was to make surveillance of sex offenders **more intense than regular probation**. Sex offenders on regular probation typically have office contacts with probation officers 1 to 2 times per a month, and are visited in the field once every two months or once every six months after the first year. Moreover, on standard probation, arrest checks are conducted either once every three months or once every six months as opposed to weekly in ASOP, while employment is verified monthly as opposed to weekly in ASOP. ASOP sex offenders also must abide by a list of 17 special conditions, which among other things include no adult pornography, curfew, etc. (see attached list). Another clear intent of the developers of the ASOP unit was to make field searches an integral and necessary part of the specialized sex offender unit. Field searches are necessary to determine whether offenders are abiding by the special conditions of probation. The emphasis on field searches is in keeping with the research on effective management of sex offenders on probation; frequent field searches are necessary because sex offenders are manipulative, deceitful, and a danger to their victims and the community (English et al., 1996).

Part of the evaluation of the ASOP program is a process evaluation of whether the original established standards for surveillance were implemented as planned. We received only a few statistical reports from the ASOP unit on the number of contacts. These reports combined home confinement checks with field searches and could not readily be used to determine if the actual operation of the unit was in keeping with the established standards of contact. Home confinement checks are not the same as field searches. In a memorandum to the Assistant Chief Probation Officer, the ASOP supervisor clarified the distinction between a face-to-face curfew check at the offender's home and a field search of the offender's home. "Is the purpose of a field visit to solely monitor the offender's curfew compliance? No. As stated in the specifications order of the Sex Offender Unit many rules and regulations must be adhered to. In order for officers to verify compliance of conditions the officer must enter the offenders' home (sic) in order to conduct visual searches and if required physical searches."²⁵

To examine the surveillance operation of the ASOP unit, the evaluation team coded the event records of 37 sex offenders who were placed on ASOP probation between May of 1997 to the end of April of 1998. Because the event records are quite long, the evaluation team selected 8 months to code and count the number of face-to-face office contacts, the number of face-to-face field searches, the number of phone home confinement checks, the number of face-to-face home confinement checks, the number of face-to-face contacts with offenders at group therapy sessions, the number of drug tests, and the number of phone, voice mail, or face-to-face contacts with therapists for each individual sex offender. The eight months selected were: May 1997; July 1997; September 1997; November 1997; January 1998; February 1998; March 1998; April 1998.

Table 8 presents a comparison of planned face-to-face contacts to the actual number of face-to-face contacts per month. The actual number of face-to-face contacts (office contacts and field visits) is determined by the number of scheduled or attempted contacts because the ASOP unit should not be held accountable for when sex offenders fail to show up for office appointments or are not at home when a field visit is attempted. We, however, did not count field contacts where the probation officer attempted a contact and the offender was not required to be at home (e.g., at treatment or employment). The average number of office contacts for each defendant is determined by dividing the total number of office contacts across defendants by the number of defendants. For the months of May through November of 1997 all defendants should have been on phase one of their ASOP probation; thus, this unweighted average does not underestimate the mean number of office or field searches for each defendant per a given month. Defendants who were in jail or were on active warrants during a given month or who were assigned to the unit in the middle or later part of the month were not included in the average to avoid underestimating the number of face-to-face contacts per month for a given defendant.

²⁵ Memorandum dated March 14, 1997 on the subject of whether officers assigned to the Sex Offender Unit should be authorized to carry a firearm.

The numbers in parentheses indicate the number of defendants upon which the average number of contacts is based.

Table 8. Comparison of Planned Face-to-Face Contacts with Actual Number of Face-to-Face Contacts for 8 months

| Month/Year | Planned Office Contacts Per Month | Average # of Office Contacts for each defendant Per Month | Planned Field Searches for each defendant per month | Average # of Field searches for each defendant per month |
|-----------------|-----------------------------------|---|---|--|
| May, 1997 | 6 | 4.0 (9) | 6 | .66 (9) |
| July, 1997 | 6 | 6.5 (16) | 6 | .63 (16) |
| September, 1997 | 6 | 7.9 (23) | 6 | .39 (23) |
| November, 1997 | 6 | 5.88 (25) | 6 | 0 (25) |
| January, 1998 | between 3 to 6 | 6.19 (32) | 5 | .25 (32) |
| February, 1998 | between 3 to 6 | 5.94 (34) | 5 | .5 (34) |
| March, 1998 | between 3 to 6 | 7.03 (35) | 5 | .23 (35) |
| April, 1998 | between 3 to 6 | 6.38 (32) | 5 | .25 (32) |
| | | | | |

As shown in Table 8, the ASOP unit for most months is at the planned level for office contacts, with the exception of May 1997 and November 1997. The program appears to have had a slow start at the beginning of receiving clients, and the slightly below standard performance for the month of November may be in part due to the Thanksgiving holiday. Field visits, however, are substantially below the planned number of field contacts. All averages are below one, which indicates that some offenders did not receive even one field search during the month. Interestingly, the ASOP unit was performing a greater number of field searches in May and July of 1997 compared to November 1997 through April, 1998.

A number of factors may have contributed to the below standard field search statistics:

- An administrative decision to limit unit probation officers to eight hour shifts may have limited unit staff from meeting the established standards for field searches.
- Two unit probation officers were placed on light duty because of their expressed concern about their proficiency with weapons. This left only two officers available for field searches.
- There was considerable delay in obtaining vests for officers to wear during field visits and no such visits were authorized without the vests. Three of the four officers were not equipped until December, and training in the field did not begin until January.
- An administrative decision to restrict unit probation officers to no later than 10:00 p.m. severely limited unit staff from conducting enough field searches.

The ASOP unit, advisory committee, and the evaluation team should discuss the importance of field visits and the alternative options that may allow the unit to reach the established number of field searches. The ASOP supervisor and the evaluation team have

thought about and discussed several alternatives that we list in the recommendation section; the implementation of one or more of these alternatives should occur in the near future. Additionally, a policy on the number of field searches by ASOP officers per defendant at a given phase of the program needs to have the support of the entire administration. The evaluation team believes that field searches are central to the detection of noncompliance by ASOP defendants and to preventing defendants from relapsing and committing another sex crime.

Table 9 presents the percentage of missed office and field contacts by defendants for eight months between May of 1997 and April of 1998. The rate of noncompliance across defendants on missed office appointments is actually quite low ranging from 1 to 6 percent across the months. The rate of noncompliance on field visits, however, is much higher ranging from 20 to 50 percent. Noncompliance on field visits is much higher than office contacts because of the element of surprise: defendants do not know that ASOP officers are coming to their homes. It should be noted that defendants are required to be at home due to their curfew at the time that these field visits are made. In addition, some missed field visits were due to the fact that probation officers showed up at the defendant's home when the defendant was at work, which is not an incident of noncompliance; the probation officers should carry the defendant's work schedules with them. This high rate of noncompliance further highlights the importance of field visits by ASOP officers to detect noncompliance by ASOP defendants.

Table 9. Percentage of Missed Appointments by Defendants and the Number of Defendants who Missed Office or Field Contacts

| Month/Year | Percentage of Missed Office Appointments | Number of defendants who missed an office contact | Percentage of Missed Field Visits | Number of defendants who missed a field visit |
|-----------------|--|---|-----------------------------------|---|
| May, 1997 | 5.0% | 2 | 50.0% | 3 |
| July, 1997 | 4.0% | 4 | 40.0% | 4 |
| September, 1997 | 3.0% | 4 | 44.0% | 4 |
| November, 1997 | 3.0% | 4 | | |
| January, 1998 | 5.0% | 8 | 25.0% | 2 |
| February, 1998 | 1.4% | 3 | 28.0% | 4 |
| March, 1998 | 4.0% | 7 | 25.0% | 2 |
| April, 1998 | 6.0% | 8 | 20.0% | 2 |

An important part of the ASOP unit is curfews, and checks on compliance with curfew orders. The home confinement unit of the Cook County Adult Probation Department is responsible for checking via phone or in person on ASOP defendants who have curfew orders. No specific number of curfew checks per month was established when the unit was first created. The average number of actual phone and face-to-face home confinement checks, however, is quite impressive. Table 10 presents the information on curfew checks. Each defendant with a curfew order generally has both phone and in-person home confinement checks. As Table 10 shows, the average number of phone home confinement checks per a defendant ranges from 13.25 in May of 1997 to

a high of 32.4 in Nov. of 1997 with an overall mean of 21.8 per defendant across the eight months. In addition, the average number of face-to-face home confinement checks per defendant ranges from a low of 8.12 in April of 1998 to a high of 14.7 in September of 1997 with an overall mean of 11.0 per a defendant per a month during the eight months examined.

Table 10 also presents in the third and sixth column of the table the total number of noncompliance detected across defendants, and the numbers in parentheses in these columns indicate the number of defendants who had at least one noncompliance with a curfew order detected. The average (mean) total number of noncompliance for phone checks across the eight months was 32.1, and the average total number of noncompliance for face-to-face home confinement checks across the eight months was 14.5. Most defendants who had home confinement checks had at least one noncompliance detected via phone or face-to-face checks.

Table 10. The Total Noncompliance across Defendants on Curfew Checks and Average Number of Curfew Checks Per Defendant

| Month/Year | Total # of defendants with phone home confinement checks | Average # of phone home confinement checks per a defendant | Total # of noncompliance Across defendants on phone home confinement checks | Total # of defendants with face-to-face home confinement checks | Average # of face-to-face home confinement checks per a defendant | Total # of noncompliance across defendants on face-to-face home confinement checks |
|----------------|--|--|---|---|---|--|
| May, 1997 | 4 | 13.25 | 17 (4) | 4 | 9 | 8 (2) |
| July, 1997 | 6 | 22 | 24 (5) | 11 | 14.18 | 15 (10) |
| Sept., 1997 | 13 | 19.4 | 26 (9) | 19 | 14.7 | 17 (11) |
| Nov., 1997 | 17 | 32.4 | 57 (16) | 22 | 10 | 18 (10) |
| Jan., 1998 | 22 | 24.6 | 30 (13) | 27 | 13 | 15 (12) |
| February, 1998 | 24 | 19.95 | 24 (14) | 28 | 9.6 | 6 (5) |
| March, 1998 | 23 | 24.6 | 36 (17) | 28 | 9.75 | 13 (10) |
| April, 1998 | 21 | 18.3 | 43 (15) | 25 | 8.12 | 24 (14) |

The ASOP unit established the policy that drug tests would be given as deemed necessary by the officers. Across these eight months and 37 offenders, 39 drug tests have been conducted with most defendants receiving at least one drug test and a couple of defendants receiving more than one drug test.

Recommendations

The evaluation team offers the following recommendations for consideration by the ASOP unit:

- The number of field searches conducted by ASOP officers should be increased to reach the established standard number of such contacts per a month.
- As the caseload size increases, ASOP officers may have even more difficulty conducting field searches. In line with national practice (e.g., English et al., 1996), twelve hour shifts may be necessary to allow officers the flexibility needed

to cover their districts. Late work hours also may be necessary given that ASOP defendants' curfews begin at 7:00 p.m., and field searches are most productive when defendants are at their homes.

- We concur with the recommendation that the home confinement unit should enter ASOP defendants' home who have conditions of no contact with minors or victims to check for the presence of victims or minors. This recommendation will further enhance the surveillance of ASOP defendants, and may allow the ASOP unit to adjust the established number of searches per a month by ASOP officers to a lower level. We should emphasize, however, that this procedure does not replace searches by ASOP officers, which are necessary to detect more subtle signs of contact with victims and violation of court orders such as the use of pornography.
- The ASOP unit, advisory committee, and evaluation team should discuss the importance of field searches, and the number of field searches that sex offenders should have per a month for each phase of the program. Such discussion may lead to a policy that can be supported by the entire ASOP administration.
- In keeping with the national confinement model for supervision of sex offenders on probation, we recommend that field searches become as integral a part of supervision as pragmatically possible. The conceptualization of this unit as a field unit should not be changed, and this conceptualization should be realized in actual practice. We are confident that the ASOP supervisor and administrators will be able to turn policy into practice.

D. Communication Between Treatment Providers and Probation Officers

The ASOP unit is modeled after the containment approach whereby treatment providers and probation officers work as a team to contain the offender in the community and prevent relapses that lead to additional crimes. Frequent communication and a comfortable working relationship where both probation officers and treatment providers share the common goal of protecting the community and treating the offender are central to an effective team approach. The ASOP unit has had several meetings with treatment providers. All four ASOP probation officers, the ASOP supervisor, and the evaluation team met with the manager of Adelante to receive an overview of the scoring and interpretation of an ABEL assessment. This meeting occurred on February 19, 1998 and lasted approximately 2 and one-half hours. The treatment provider gave an overview of the ABEL assessment and answered questions about its scoring and interpretation using concrete case examples. After this meeting, the ASOP supervisor and Adelante treatment provider met for two hours to discuss billing, obtaining medication for offenders who need antidepressant drugs, and having probation officers attend group therapy sessions. The PI of the evaluation observed this meeting. Both the ASOP supervisor and treatment provider discussed these issues, thought about possible solutions, and worked effectively to resolve any conflicts. The atmosphere of the meeting was friendly and professional, and both parties were clearly working to think of solutions that would increase the effectiveness of treatment and supervision.

On March 24, 1998, the evaluation team observed and participated in a meeting with the ASOP supervisor, and one representative from the Center for Contextual Change, and one representative from Central Baptist. The meeting lasted about two hours and covered the improvement of treatment assessments that had been submitted by these agencies, and the completion of the standardized monthly reports. The ASOP supervisor has also met with treatment providers 7 times from December, 1997 to May of 1998 on the following topics: Abel assessment; obtaining antidepressants for ASOP defendants; quality of treatment assessments; and the referral of cases to specific agencies.

In addition to our observation of meetings, we have coded from the event records for eight months between May of 1997 and April of 1998 the number of contacts via phone or voice mail that ASOP probation officers have had with treatment providers and the number of times that ASOP probation officers have attended group therapy sessions. This information is presented in Table 11.

Table 11. Number of Contacts via Phone and Attendance at Group Therapy Sessions between Therapists and Probation Officers For Eight Months

| Month/Year | # of times Probation Officers attended group therapy sessions | # of phone or voice-mail contacts with therapist |
|--------------------|---|--|
| May, 1997 | 0 | 0 |
| July, 1997 | 0 | 1 |
| September, 1997 | 0 | 0 |
| November, 1997 | 0 | 8 |
| January, 1998 | 4 | 15 |
| February, 1998 | 5 | 7 |
| March, 1998 | 0 | 10 |
| April, 1998 | 3 | 6 |
| Total for 8 months | 12 | 55 |

Across the eight months, ASOP probation officers have attended 12 group therapy sessions, and have had 55 phone or voice mail contacts with treatment providers. Communication with treatment providers became more frequent in November when sex offenders were assigned to treatment. The event records revealed that treatment providers were phoning probation officers when sex offenders revealed information in therapy that indicated they had or were about to commit another offense. One such sex offender who was facing a pending polygraph test revealed some information during therapy suggesting an additional offense had been committed, and later confessed to the ASOP probation officer and supervisor about the offense. A petition for a violation of probation has been filed on this offender, who is in custody. The team approach, thus, has worked in some cases. Communication, however, is not perfect. At least once, an ASOP probation officer has been unable to reach the therapist to check on the progress of treatment after repeated attempts.

The evaluation team at the end of May distributed a survey on communication and conflict to be completed by both probation officers and treatment providers. We hope this survey will be useful in identifying areas where communication is effective and areas where communication can be improved. The results of this survey will not be available until July.

E. Quality of Treatment Services

This section provides a preliminary summary of work to date done observing the provision of treatment to Cook County ASOP participants. Since the observations are not yet complete and will not be completed for several months this report will not provide details on the nature of the therapy except in a few instances where there may be cause for concern and some action may need to be taken by either the probation department or by the treatment providers. A discussion of stylistic differences between the clinics, and details on the nature of the therapy being provided will be included in a later report.

Observations of the three treatment providers receiving referrals from ASOP were begun in March/April of this year. The three providers were Adelante, the Center for Contextual Change, and Central Baptist Family Services. As noted in the section on treatment assignment, two other treatment programs, Associates in Family Therapy in Lake Bluff and Clinical Behavioral Consultants in Downers Grove, had not at that time received referrals from ASOP because the suburban courts were not yet referring cases. If and when these two sites do receive enough cases to constitute a treatment group, the observation plan may be modified to conduct at least several initial observation sessions. If however, they only receive a few referrals and have to include ASOP participants with non-ASOP sex offenders in the same groups it may not be possible, because of ethical and confidentiality issues to do observations at these clinics. (This issue arose at Adelante and was somewhat problematic for the non-ASOP participants to agree to the observations though eventually they did.)

The original evaluation plan called for a total of 8 observation sessions at each of the three sites or a total of 24 observation sessions. The evaluation team decided that it would be better to go to contiguous sessions for the full 8 sessions at each clinic. This design would allow the participants the opportunity to get more comfortable with the evaluator observing the groups and, it is hoped, they would feel it was less intrusive and less inhibiting than having someone there on some occasions and not on others. The primary disadvantage of this arrangement was that the evaluator might become more savvy as to the key issues to be observed and do a better job observing and evaluating the therapy sessions held at clinics observed later in the process. The evaluation team, however, decided that reducing the amount of disruption to the therapeutic process was more important than maximizing the evenness of observations across the clinics. In practice, since a final report will not be written until all observations have been done, there is the opportunity to reweigh initial impressions of the treatment done at the first provider observed.

Observations were begun April 6 at Central Baptist. At Central Baptist, as at the other two programs, the therapists were notified several weeks prior to the start of the first evaluation session. They were asked to inform the participants that the evaluator would be coming the following week and to give a preliminary explanation of the purpose of the evaluation. At Central Baptist, as at the other two programs, the evaluator introduced himself to the participants, explained the purpose of the study, and asked the participants for their written permission to monitor the group for eight weeks. The explanation of the purpose of the evaluations always stressed that it was the treatment and the therapists that were being evaluated and not the participants. It was also emphasized that no notes would be taken during the sessions so the participants could feel free to speak without worrying that their words might be recorded, that no names or other identifying information would be disclosed in any reports or papers written about the evaluation, and that the evaluator would not speak or participate in the sessions in any way. This latter provision was again intended to minimize disruption of the natural, unobserved course of the therapy sessions. After this explanation, the participants were allowed to discuss whether they wanted to grant permission to the evaluator to observe the groups. The manner in which this was done varied slightly among the three programs, but in all cases the participants agreed to permit the evaluator to observe the groups. All participants signed informed consents with one copy given to each participant and a second copy retained in a secured file by the evaluator. A total of 16 participants signed consent forms, though one of these was not an ASOP referral.

Once the signed consents were received, the evaluator began observations that same session. Seated along with group participants, the evaluator observed the sessions trying to get a general feel for how the sessions were structured (or not), whether the participants appeared to be engaged in the sessions, how the therapists handled participants' denial and minimization (apparent in all groups observed), whether the therapeutic exercises had a clear purpose and were appropriate for this point in the process, and what the general rapport was between the co-therapists and between the co-therapists and participants. Lateness, no-shows, and other indications of non-compliance and how these were dealt with were also noted. Finally, whether or not a probation officer attended the session and the potential impact this had on the sessions was also a point for observation (probation officers have not been present at any of the fourteen sessions the evaluator has observed). Since note taking was not permitted during the sessions, the evaluator has kept a typed log of his observations for each session. Observations are recorded in this log within a few hours following the conclusion of each session. This log constitutes an ongoing account of the general content of each session, thoughts about the therapeutic processes as these unfold, and questions, comments, and concerns the evaluator had following the session. The log will be a partial basis for the final report, as will the notes from the post-observation debriefing sessions with the participants and the therapists. Finally, all therapists were asked to supply written materials that they thought were especially critical or germane to the way they conducted therapy. It was felt these materials would give the evaluator some insight into the overall direction of the therapy, what the clinical emphasis would be, and a rationale for the specific interventions and exercises used (all of the groups have employed some kind of

structured exercise). To date, however, therapists from only one of the groups have provided such materials.

At of this writing (6/2/98), the evaluator has observed 14 of the 24 treatment sessions where observations are planned. A breakdown of these observations by clinic is as follows: 8 observations have been conducted at Central Baptist; 4 at the Center for Contextual Change; and 2 at Adelante. Because of the timing of the sessions, the evaluator will be returning to Central Baptist twice more, once to interview the participants without the therapists present and a second time to interview the therapists. Observations at the Center for Contextual Change and Adelante will continue through July.

As indicated above, since this is a preliminary report, comments on some of the more subtle issues regarding the delivery of treatment services will be reserved for the final report. There have been, however, several significant issues arising out of these initial observations that should be noted at this time. These issues may be serious enough that they warrant immediate attention by the Cook County ASOP administrative staff and staff at the treatment clinics.

It should also be noted that, to some extent, all the treatment programs are struggling with their "newness". ASOP participants are not used to being in therapy and do not yet know what is expected of them. Many are still denying or minimizing their offenses, but this is to be expected at this point in the process. Many of the sessions are characterized by a lack of rapport among the participants and between the therapists and the participants. This is also to be expected at this early time. Some of the therapists have not worked together very long and are still learning their roles and getting comfortable with their different styles. All of these factors lead to sessions that are at times disjointed and unfocused ("pulling teeth" and "working with lumps" is how the therapists have described the process of trying to engage these difficult clients in treatment). However, none of these "newness" issues are cause for undue concern at this point. It is expected that when the evaluator returns in 6 months to do a second set of observations, many of these initial issues will have corrected themselves and the therapy process will be running much smoother.

Significant Issues:

1. The group treatment times among the three clinics varies substantially. At Central Baptist, participants receive only one hour of group therapy in conjunction with the individual therapy they receive every other week. At the Center for Contextual Change, therapy sessions are one hour and twenty minutes in length while at Adelante sessions are one and one-half hours. Since all providers are reimbursed at the same rate for group therapy, the variations in length of time must be determined by some other factor. The difference between Adelante and the Center for Contextual Change is not significant. But the much shorter period of time at Central Baptist is and participants should not receive less therapy simply because they live on the south side of Chicago and/or are referred to Central Baptist.
2. There has been a significant lack of continuity in therapists at Central Baptist. The group has been led by two experienced therapists brought in from the Elgin office with the expectation that two trainees who now sit in on the groups would take over the group at some later time. There have been several problems with this arrangement, however. Partly because of illness and partly because of other factors, for a number of the observed therapy sessions, only one of the experienced therapists was present. Moreover, there has also been variation in which one of the two or both of the trainees would be present at a given session. The result has been that there has rarely been the same combination of therapists at any one session. To make matters worse, one of the trainees resigned her position at Central Baptist about one month ago and has yet to be replaced. And yet, when the evaluator had an informal discussion with one of the primary therapists, the primary therapist said that they (the primary therapist) would be turning over the group to the trainees soon. As with the shorter time period, this would seem to short-change the participants and to deprive them of continuity of care. It should be added that in spite of these problems, Central Baptist groups are run reasonably well. Nevertheless, the lack of continuity in therapists present from one session to the next, the absence of a second trainee with any experience with this group, and the lack of a clear and specific training and transition plan are significant concerns.
3. There do not seem to be clear and consistent rules/sanctions communicated or enforced by the probation department regarding participants' absences, lateness, or noncompliance in therapy (e.g., failure to complete homework assignments). If there are such rules, it seems that some of the therapists are not familiar with them. This came about when at the most recent session at the Center for Contextual Change two of the three participants missed the group (the therapist did not know during the group whether the participants had called with an explanation). The evaluator also noted that one of the two absentees had been late for two previous sessions (as had another participant) and that some participants did not complete their "homework" assignments as required by the therapists. And despite this, the therapists could not articulate a clear set of rules and consequences for handling absenteeism, for example, other than that they would report it to the probation department. It was less clear

whether one, two, three, or four absences over a specific time period (the therapists stated that participants are allowed one excused absence per month) would result in a violation. Similarly, it is not clear what the rules are regarding lateness. At one session the therapists said that participants could be up to 15 minutes late and still be allowed to enter the group. When the evaluator pointed out after the session that this rule, in effect, gave the participants permission to be 14 minutes late every week, the therapists changed the rule in the following session and said it was not alright to be 15 minutes late. The policy on what would happen if participants were late, however, was not explained.

Moderate Issue:

The evaluation team has noticed that at least half of the participants across the three clinical settings are African-American while at the same time, with the exception of one Latino therapist, all of the therapists are white. Though there have been no apparent problems owing to this discrepancy, it would seem reasonable for the treatment agencies, in light of the population they are serving, to attempt to recruit African-American therapists. This issue will be raised in the debriefing groups with the participants to determine if it is a concern or an issue for them.

Recommendations

Based on these issues, the evaluation team makes four recommendations.

- **The group therapy times across clinics must be the same.** This issue needs to be clarified between probation and the providers and, if necessary, made explicit in future contracts.
- **Central Baptist needs to develop consistency among their therapists and, to the fullest extent possible, have the same set of therapists present at each session.** They also need to develop a clear and specific transition plan for how long the Elgin therapists will continue to lead the group and when and how the trainees will take over the group. This plan should include a timetable for the transition. A new training therapist, preferably one with significant experience in this area, should be hired as soon as possible.
- **A clear, written and specific plan for handling lateness, absences, and noncompliance with therapy should be developed by the probation department after discussion with treatment providers about these issues.** The plan should state how many of each type of infraction will be tolerated and what the sanctions will be for continued violations. It would be preferable that the plan consisted of graduated sanctions so that initial non-compliance would result in additional supervision contacts, longer curfews, additional homework, or a meeting with both probation officers and treatment provider while continued non-compliance would result in a violation of probation and a return to court. All therapists should have an opportunity to make suggestions about the plan, and then should receive a final copy of the plan so that they will be familiar with it. Sex offenders should be made aware that noncompliance with therapy rules will result in some sort of sanction.

- **Finally, if possible, it is advisable given the composition of the ASOP population that the treatment programs attempt to recruit and hire experienced African-American therapists.**

VI. Description of Control Sample

Part of the research design for the impact evaluation includes a control sample of sex offenders convicted of either criminal sexual assault or aggravated criminal sexual abuse who are sentenced to regular probation in Cook County. We selected all offenders with these charges who were sentenced to probation from January 1, 1993 to January 1, 1997. The original population consisted of 283 offenders. Of these 283 offenders, 33 case files could not be located, which results in a collection rate of 88 percent. Of the 250 case files that were coded, we could not locate charge information on 27 offenders, which did not allow us to determine the nature of the sexual crime. Thus, the final sample consists of 223 sex offenders sentenced to regular probation, which is an overall completion rate of 78.7 percent.

In order for the control sample to be a legitimate comparison group, the control sample must have similar characteristics to the ASOP population on variables that may affect recidivism. Table 12 compares the ASOP sample and control sample on eighteen characteristics: (1) length of probation; (2) number of family-related charges; (3) offender's relationship to victim; (4) convicted charge; (5) number of counts of aggravated criminal sexual assault; (6) gender of victim; (7) age of victim; (8) whether penetration occurred; (9) number of force-related charges; (10) race of offender; (11) age of offender; (12) current employment status of offender; (13) education of offender; (14) marital status of offender; (15) alcohol problem and treatment; (16) drug use and treatment; (17) number of total prior arrests; and (18) number of total prior arrests for sex offenses. Table 12 reveals that the ASOP population and the control sample have very similar distributions on almost all of these variables. For example, for both the ASOP group and the control sample, about 62 percent of the sex offenders did not have a charge of aggravated criminal sexual assault. About 86 percent of the ASOP group and 83 percent of the control sample victimized only girls. About 76 percent of the ASOP group and 71 percent of the control sample had force-related charges. Distributions on demographics also are quite similar. The one exception is the number of total prior arrests: whereas 24.3 percent of the ASOP population had at least one prior arrest, 57.9 percent of the control sample had at least one prior arrest. The ASOP group and the control sample, however, are comparable on the number of prior arrests for sex offenses: 94.6% of the ASOP group and 93.5% of the control sample had no prior arrest for sex offenses.

Table 12. Comparison of ASOP Total Sample to the Control Group Sample

| Characteristics | Total ASOP Population N = 42 | Control Sample N = 223 |
|--|---------------------------------|---------------------------|
| Length of Probation | | |
| 12 or 18 months | 3 (7.1%) | 8 (3.6%) |
| 24 or 30 months | 11 (26.2%) | 69 (30.9%) |
| 36 months | 11 (26.2%) | 61 (27.4%) |
| 48 months | 17 (40.4%) | 74 (33.2%) |
| 60 months | 0 | 10 (4.5%) |
| 120 months | 0 | 1 (.4%) |
| # of family-related charges | | |
| None | 24 (57.2%) | 129 (64.8%) |
| 1 to 2 | 9 (21.4%) | 43 (21.6%) |
| 3 to 18 | 9 (21.4%) | 27 (13.5%) |
| Missing | 1 | 24 |
| Offender's Relationship to Victim | | |
| Father | 7 (16.7%) | 26 (19.1%) |
| Stepfather | 6 (14.3%) | 23 (16.9%) |
| Other live-in member | 3 (7.1%) | 6 (4.4%) |
| Uncle | 6 (14.3%) | 11 (8.1%) |
| Other distant relative | 6 (14.3%) | 17 (12.5%) |
| Unrelated | 14 (33.3%) | 53 (39.0%) |
| Characteristics of Offense | | |
| Convicted Charge | | |
| Criminal Sexual Assault | 12 (28.6%) | 58 (26.0%) |
| Aggravated Criminal Sexual Abuse | 22 (52.4%) | 140 (62.8%) |
| Other | 7 (16.7%) | 25 (11.2%) |
| Missing | 1 | 0 |
| # of Counts of Aggravated Criminal Sexual Assault | | |
| None | 26 (61.9%) | 123 (61.8%) |
| 1 to 3 | 9 (21.4%) | 54 (27.1%) |
| 4 to higher | 6 (14.3%) | 22 (11.1%) |
| Missing | 1 | 24 |
| Gender of Victim | | |
| Girls | 36 (85.7%) | 136(82.9%) |
| Boys | 5 (11.9%) | 24 (14.6%) |
| Both Girls and Boys | 1 (2.4%) | 4 (2.4%) |

Continued - Table 12. Comparison of ASOP Total Sample to the Control Group Sample

| Characteristics | ASOP Population | Control Sample |
|---|-----------------|----------------|
| Age of Victim | | |
| 3-8 | 12 (29.3%) | 25 (21.6%) |
| 9-11 | 8 (19.5%) | 12 (10.3%) |
| 12-14 | 15 (36.6%) | 47 (40.5%) |
| 15-17 | 4 (9.8%) | 22 (19.0%) |
| 18-21 | 1 (4.8%) | 10 (8.6%) |
| Missing | 1 | 107 |
| Did Penetration Occur? | | |
| No | 20 (47.6%) | 64 (38.1%) |
| Yes, only vaginal | 13 (31.0%) | 23 (13.7%) |
| Yes, either anal or oral | 5 (11.9%) | 16 (9.5%) |
| Yes, vaginal, and anal or oral | 4 (9.6%) | 8 (4.8%) |
| Yes, but can't tell which type | 0 | 57 (34.0%) |
| Missing | | 54 |
| Number of Force-related Charges | | |
| None | 31 (75.6%) | 142(70.6%) |
| One to Twelve | 10 (24.4%) | 59 (29.4%) |
| Missing | 1 (0.0%) | 22 |
| Race | | |
| White | 9 (21.4%) | 44 (19.7%) |
| Black | 21 (50.0%) | 95 (42.6%) |
| Hispanic | 12 (28.6%) | 76 (34.1%) |
| Other | 0 | 8 (3.6%) |
| Age of Offender | | |
| 16 to 17 | 6 (14.6%) | 6 (2.7%) |
| 18 to 26 | 4 (19.0%) | 62 (27.8%) |
| 27 to 34 | 11 (26.8%) | 60 (26.9%) |
| 35 to 43 | 16 (39.0%) | 49 (22.0%) |
| 44 to 52 | 3 (7.3%) | 19 (8.5%) |
| 53 to 80 | 1 (2.4%) | 27 (12.1%) |
| Current Employment | | |
| Unemployed | 16 (39.0%) | 73 (33.8%) |
| Part-time Employed | 3 (7.3%) | 21 (9.7%) |
| Full-time Employed | 17 (41.5%) | 87 (40.3%) |
| Employed Unspecified whether part-time or full-time | 5 (12.2%) | 35 (16.2%) |
| Missing | 1 | 7 |

Continued - Table 12. Comparison of ASOP Total Sample to the Control Group Sample

| Characteristics | ASOP Population | Control Sample |
|--|-----------------|----------------|
| Income | | |
| 13,500 or less | 24 (64.9%) | 146 (70.9%) |
| 13,501-15,000 | 1 (2.9%) | 8 (3.9%) |
| 15,001-20,000 | 3 (8.6%) | 23 (11.2%) |
| 20,001-24,999 | 4 (11.4%) | 10 (4.9%) |
| 25,001-30,000 | 2 (5.7%) | 6 (2.9%) |
| 30,001-34,999 | 0 | 4 (1.9%) |
| 35,000 or higher | 3 (8.6%) | 9 (4.4%) |
| Missing | | 17 |
| Education | | |
| Completed Grade 9 or less | 9 (22.5%) | 69 (31.8%) |
| Completed 10 to 11 | 7 (17.5%) | 42 (19.4%) |
| Completed High School/GED | 8 (20.0%) | 56 (25.8%) |
| Some College or Trade School | 15 (37.5%) | 35 (16.1%) |
| Completed B.A./B.S. | 1 (2.5%) | 15 (6.9%) |
| Missing | 2 | 6 |
| Marital Status | | |
| Married | 15 (35.7%) | 78 (35.6%) |
| Separated | 4 (9.5%) | 21 (9.6%) |
| Divorced | 3 (7.1%) | 21 (9.6%) |
| Single | 18 (42.9%) | 99 (45.2%) |
| Missing | | 4 |
| Offender Indicated Alcohol Problem | | |
| No, Current or Past Alcohol Abuse | 27 (73.0%) | 124 (80.5%) |
| Yes, Current Abuse with No Past Treatment | 5 (13.5%) | 20 (13.0%) |
| Yes, Current Abuse with Past Treatment | 5 (13.5%) | 10 (6.5%) |
| Missing | 5 | 69 |
| Offender Indicated Illicit Drug Usage? | | |
| No and No Prior Treatment for Drug Abuse | 24 (60.0%) | 101 (65.6%) |
| Yes and No Prior Treatment for Drug Abuse | 11 (27.5%) | 47 (30.6%) |
| Yes and Prior Treatment for Drug Abuse | 5 (12.5%) | 6 (3.9%) |
| Missing | 2 | 154 |
| # of Total Prior Arrests | | |
| None | 28 (75.7%) | 91 (42.1%) |
| One to Seven | 9 (24.3%) | 125 (57.9%) |
| Missing Information | 5 | 7 |
| # of Total Prior Arrests For Sex Offenses | | |
| None | 35 (94.6%) | 200 (93.5%) |
| One to Two | 2 (5.4%) | 14 (6.6%) |
| Missing Information | 5 | 9 |

Conclusion

The ASOP unit is modeled after the containment approach, which emphasizes three central features of specialized sex offender units: (1) intensive surveillance, with importance given to field searches and verification of the information provided by sex offenders; (2) cognitive-behavioral treatment; and (3) effective and frequent communication between probation officers and treatment providers. Our evaluation to-date, indicates that, after a very slow start, the ASOP is finally up and running and beginning to accept cases at an accelerated rate. We note also that many of the policies of the ASOP have been effectively implemented, but that some policies have not as yet been fully realized. We are confident that given the enthusiasm and competence of the ASOP supervisor and staff and along with the necessary reevaluation of administrative issues that the unit will be able to meet its standards. In the following paragraphs, we summarize some of the key findings.

There have been several areas where the ASOP unit has excelled or appropriately performed its tasks. The ASOP unit received excellent training, and its staff appear dedicated to learning more about the supervision of sex offenders. Given the constraints of the limited pool of applicants, the treatment selection process was appropriate, though we hope our suggestions may further enhance the effectiveness of future selections of treatment providers. Treatment assignment also was logically, carefully, and appropriately performed. The unit also is maintaining the established standards for office contacts, and has appropriately enforced the special conditions of probation as is illustrated by the number of violation of probation petitions filed. The unit also has requested a drug test for most of the ASOP defendants, though evaluation of drug or alcohol problems could be more thorough. Thus far, communication with treatment providers appears to occur on a regular basis, and the sharing of information appears to have enhanced surveillance effectiveness and treatment progress.

There have been several administrative hurdles and decisions that have led to the slow implementation process, and the unit being substantially below its own standard on field searches. The key components of the ASOP unit, due primarily to delays at the Cook County Board, started more slowly than the developers had anticipated. Additionally, field searches need to be increased. Over half of the defendants did not receive one field search per a month across the eight months that we sampled. Administrative decisions to limit probation officers to eight hour shifts and restrict field work to before 10:00 p.m. contributed to the resulting low number of field searches. Additionally, although the ASOP supervisor has performed all of her vast duties with distinction, we are concerned that the lines between the ASOP supervisor and Deputy Chief's duties have become too blurred, and there is a need to define who is responsible for what administrative duties. Given that this unit is a weapon carrying field unit, much of the unit supervisor's time must focus on direct supervision of probation officers. An additional area of concern is the absence of monthly statistical reports to the Authority and indeed any formal statistical report on this program even within the department. There also is an urgent need to clarify the role of the Advisory Committee, and the Chair

of this committee. Finally, there is an urgent need to provide uniform written guidelines to treatment providers about the graduated sanctions that will be applied to ASOP defendants for noncompliance with treatment rules.

In summary, we are confident that the ASOP unit will soon realize all of its policies into practice. Four key issues should be addressed in the near future: (a) reaching the standards set for field searches; (b) clarifying the role of the Advisory Committee; and (c) clarifying the duties of the Unit Supervisor and Deputy Chief; and (d) the creation of uniform written guidelines about the graduated sanctions that will be used to respond to noncompliance with treatment rules.

APPENDICES

CIRCUIT COURT OF COOK COUNTY
ADULT PROBATION DEPARTMENT
REQUEST FOR SCREENING FOR ELIGIBILITY - COURT REFERRAL

_____ INTENSIVE DRUG PROGRAM _____ INTENSIVE PROBATION SUPERVISION

_____ SEX OFFENDER PROGRAM

ex: 2557 or 3337

PRETRIAL INVESTIGATION: _____ PRE-SENTENCE INVESTIGATION: _____

DEFENDANT'S NAME: _____

ADDRESS: _____ APT#: _____

CITY: _____ STATE: _____

ZIP CODE: _____ TELEPHONE: _____

CASE NUMBER: _____ DATE OF REQUEST: _____

CHARGES: _____

D.O.B. _____ RACE _____ SEX _____ AGE _____

IR# _____ CB# _____ FBI# _____

ISB# _____ DO# _____ INMATE # _____

JUDGE'S NAME _____ CONTINUANCE DATE: _____

DEFENSE ATTORNEY: _____

ADDRESS: _____

CITY: _____ TELEPHONE: _____

SPECIAL NOTE: IN ORDER FOR A CASE TO BE SCREENED, THE CHARGE MUST BE A PROBATIONABLE OFFENSE AT THE TIME OF SCREENING. A 30-DAY CONTINUANCE DATE IS REQUESTED FOR ELIGIBILITY COMPLETION.

PHASE I - MINIMUM ONE (1) YEAR

1. The Probationer is required to have contact with an Adult Sex Offender Officer weekly with a minimum of three (3) face to face contacts per week.
2. The Probationer is required to regularly submit verification of employment. If probationer is unemployed, he/she may be required to attend appropriate job training and skills classes when determined to be necessary by the Adult Sex Offender Officer.
3. The Probationer is subject to a 7:00 p.m. to 7:00 a.m. curfew.
4. Arrest checks will be obtained weekly.
5. The Probationer will be required to undergo group and individual counseling at an agency preapproved by the Cook County Adult Probation Department.
6. Drug Testing will be conducted when deemed necessary.

II. PHASE 2 - Probationer is moved into 2nd phase minimum six (6) months, maximum twelve (12) months after successful completion of 1st phase.

1. The Probationer is required to have contact with officer weekly, with a minimum of two (2) face to face contacts per week.
2. The Probationer is required to regularly submit verification of employment.
3. The Probationer is subject to a curfew as directed by probation authority.
4. Arrest checks are to be obtained weekly.
5. The Probationer will be required to continue with court ordered counseling and provide verification of counseling.
6. Drug Testing when deemed necessary.

II. PHASE 3 - Probationer is moved into 3rd phase upon successful completion Phase 2 for a minimum six (6) months.

- 1. The Probationer is required to have contact with officer weekly, with a minimum of one (1) face to face contacts per week.**
- 2. The Probationer is required to regularly submit verification of employment.**
- 3. The Probationer is subject to a curfew as directed by probation authority.**
- 4. Arrest checks are to be obtained weekly.**
- 5. The Probationer will be required to continue with court ordered counseling and provide verification of counseling.**
- 6. Drug Testing will continue to be conducted when deem necessary.**

Quarterly Status Reports will be submitted to the sentencing Court as to the defendant's progress during supervision. Upon successful completion of all three phases and with a recommendation from court approved counselor, supervising officer, the probationer will be returned to court for placement into regular probation for the duration of sentence.

CERTIFICATION

I, HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND MY PLAN OF SUPERVISION (3 PAGES) IN FULL AND HEREBY AGREE TO ITS TERMS AND CONDITIONS.

SIGNATURE: _____

DATE: _____

PEOPLE OF THE STATE OF ILLINOIS)

VS)

DEFENDANT)

CASE NO. _____

LR. NO. _____

SID NO. _____

SPECIFICATIONS AND CERTIFICATE OF CONDITIONS OF SEX OFFENDER SUPERVISION

IT IS THE FINDING OF THE COURT THAT THE ABOVE NAMED DEFENDANT HAS BEEN ADJUDGED GUILTY OF THE CRIME OF _____

IT IS THE FURTHER FINDING OF THE COURT THAT

- 1. A PRE-SENTENCE INVESTIGATION HAS BEEN CONDUCTED AND FILED WITH THE COURT... 2. THIS CONVICTION OF AGGRAVATED CRIMINAL SEXUAL ABUSE OR CRIMINAL SEXUAL ASSAULT IS AGAINST A FAMILY MEMBER... 3. THE PROBATION DEPARTMENT HAS SPACE AVAILABLE IN THE SPECIALIZED PROGRAM OF INTENSIVE SEX OFFENDER PROBATION SUPERVISION TO SUPERVISE THIS OFFENDER... 4. IN COMPLIANCE WITH 730 ILCS 150/3 THE DEFENDANT SHALL REGISTER WITH THE LOCAL POLICE DEPARTMENT WITHIN 30 DAYS OF SENTENCING... 5. IN COMPLIANCE WITH 730 ILCS 150/3 THE DEFENDANT SHALL UNDERGO DNA TESTING WITHIN 45 DAYS OF SENTENCING... THEREFORE, IT IS THE SENTENCE AND ORDER OF THE COURT THAT THE ABOVE NAMED DEFENDANT BE SENTENCED TO PROBATION FOR A PERIOD OF _____ MONTHS

SAID SENTENCE OF PROBATION SHALL BE UPON THE FOLLOWING TERMS AND CONDITIONS:

- 1. THAT THE DEFENDANT SHALL REPORT TO AND ABIDE BY THE RULES AND REGULATIONS ESTABLISHED BY THE ADULT PROBATION DEPARTMENT AND PROBATION OFFICER(S). 2. THAT THE DEFENDANT SHALL NOT VIOLATE ANY CRIMINAL STATUTE OF ANY JURISDICTION 3. THAT THE DEFENDANT SHALL NOT POSSESS A FIREARM OR OTHER DANGEROUS WEAPONS 4. THAT THE DEFENDANT SHALL NOT LEAVE THE STATE OF ILLINOIS WITHOUT THE CONSENT OF THE PROBATION DEPARTMENT AND/OR THE COURT 5. PERMIT THE PROBATION OFFICER TO VISIT THE DEFENDANT AT HIS HOME OR ELSEWHERE TO THE EXTENT NECESSARY TO DISCHARGE THE OFFICER'S DUTIES 6. THAT THE DEFENDANT SHALL UNDERGO A COURT APPROVED COUNSELING PROGRAM FOR A MINIMUM DURATION OF 2 YEARS 7. THAT THE DEFENDANT NOT RESIDE IN THE HOUSEHOLD OF THE VICTIM 8. THAT THE DEFENDANT HAVE NO CONTACT WITH THE VICTIM OR ANY CHILDREN UNDER THE AGE OF 18 WITHOUT THE APPROVAL OF THE PROBATION OFFICER 9. THAT THE DEFENDANT CONTINUE FINANCIAL SUPPORT OF THE FAMILY TO THE BEST OF DEFENDANT'S ABILITY 10. THAT THE DEFENDANT SUCCESSFULLY COMPLETE A MINIMUM OF TWO YEARS OF PROBATION UNDER THE RULES REGULATIONS AND POLICIES OF INTENSIVE SEX OFFENDER SUPERVISION 11. THAT THE DEFENDANT COMPLY WITH THE SPECIFIC RULES AND REGULATIONS OF INTENSIVE SEX OFFENDER SUPERVISION WHICH ARE: A. YOU SHALL NOT INITIATE, ESTABLISH, OR MAINTAIN CONTACT WITH ANY MINOR CHILD UNDER THE AGE OF 18, INCLUDING YOUR CHILDREN, NOR ATTEMPT TO DO SO EXCEPT UNDER CIRCUMSTANCES APPROVED IN ADVANCE AND IN WRITING BY YOUR PROBATION OFFICER B. YOU SHALL NOT ENTER THE PREMISES, LOTTER, OR WORK WITHIN 100 FEET OF SCHOOLYARDS, PARKS, PLAYGROUNDS, ARCADES, OR OTHER PLACES PRIMARILY USED BY CHILDREN UNDER THE AGE OF 18 YOU ARE NOT TO GO NEAR THE FOLLOWING PLACE(S): C. YOU SHALL NOT ACCEPT EMPLOYMENT OR VOLUNTEER WORK WHICH WILL BRING YOU IN DIRECT CONTACT WITH MINOR CHILDREN WITHOUT PERMISSION FROM YOUR PROBATION OFFICER D. YOU SHALL HAVE NO CONTACT WITH THE VICTIM, EITHER WRITTEN OR ORAL COMMUNICATION, AND YOU SHALL REPORT ANY INCIDENTAL CONTACT WITH THE VICTIM TO YOUR PROBATION OFFICER WITHIN 72 HOURS OF CONTACT E. YOU SHALL SUBMIT TO POLYGRAPH/PLETHYSMOGRAPH EXAMINATIONS AT THE DIRECTION OF YOUR PROBATION OFFICER AND/OR COUNSELOR, WHICH WILL ASSIST IN TREATMENT PLANNING AND CASE MONITORING F. YOU SHALL PARTICIPATE IN SEXUAL OFFENDER TREATMENT GROUPS AND INDIVIDUAL COUNSELING AS DIRECTED BY YOUR PROBATION OFFICER YOU ARE RESPONSIBLE FOR FULL/PARTIAL PAYMENT OF TREATMENT G. YOU SHALL RESIDE AT A PLACE APPROVED IN ADVANCE BY YOUR PROBATION OFFICER. H. YOU SHALL NOT BE IN POSSESSION OF, OR HAVE IN YOUR RESIDENCE, ANY PORNOGRAPHIC AND/OR SEXUALLY EXPLICIT MATERIALS, VISUAL AND/OR AUDIO, INCLUDING USE OF SEC PHONE NUMBERS I. YOU SHALL NOT ENTER OR LOTTER AROUND ANY ADULT BOOK STORES OR ENTERTAINMENTS FACILITIES WHERE SEXUALLY EXPLICIT MATERIALS ARE SOLD OR SHOWN J. YOU SHALL COMPLY WITH A CURFEW ESTABLISHED BY THE OFFICERS OF THE INTENSIVE SEX OFFENDER SUPERVISION UNIT K. YOU SHALL NOTIFY THIRD PARTIES OF THE RISKS THAT MAY BE OCCASIONED BY YOUR CRIMINAL RECORD OR PERSONAL HISTORY OR CHARACTERISTICS, AND PERMIT THE PROBATION OFFICER TO MAKE SUCH NOTIFICATIONS AND TO CONFIRM YOUR COMPLIANCE WITH SUCH NOTIFICATION REQUIREMENT. L. YOU SHALL SUBMIT TO SEARCHES OF YOUR PERSON, RESIDENCE, PAPERS, AUTOMOBILE AND/OR EFFECTS AT ANY TIME SUCH REQUESTS ARE MADE BY THE PROBATION OFFICER WHEN THERE IS REASONABLE SUSPICION TO REQUIRE IT, AND CONSENT TO THE USE OF ANYTHING SEIZED AS EVIDENCE IN A COURT PROCEEDING. 12. THAT THE DEFENDANT SHALL PAY A _____ FINE OF \$ _____, RESTITUTION OF \$ _____, AND COURT COSTS OF \$ _____ AT THE RATE OF \$ _____ PER MONTH. PAYMENTS SHALL BE MADE UNDER THE DIRECTION OF THE PROBATION DEPARTMENT. 13. OTHER SPECIAL CONDITIONS _____

IT IS THE FURTHER ORDER OF THE COURT, AND THE DEFENDANT IS HEREBY ADVISED, THAT THE COURT MAY AT ANY TIME DURING THE SAID PERIOD OF PROBATION REVOKE OR MODIFY ANY CONDITION OF SAID PROBATION OR REDUCE THE PERIOD OF SAID PROBATION OR MAY DISCHARGE THE DEFENDANT FROM PROBATION, AS PROVIDED BY LAW. THE DEFENDANT SHALL BE SUBJECT TO ARREST FOR ANY ALLEGED VIOLATION OF ANY CONDITION OF SAID PROBATION. IF SUCH PROBATION IS REVOKED, THE COURT MAY IMPOSE ANY OTHER SENTENCE THAT IS PERMITTED AS PRESCRIBED BY LAW.

THIS _____ DAY OF _____, 19 _____

JUDGE _____

CERTIFICATION OF SERVICE - I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THIS SENTENCE OF PROBATION AND FULLY UNDERSTAND THE RULES AND PROVISIONS CONTAINED HEREIN. I FURTHER UNDERSTAND AND ACKNOWLEDGE THAT I CAN BE RESENTENCED ON THE ORIGINAL OFFENSE SHOULD MY SENTENCE OF PROBATION BE REVOKED BY THE COURT FOR A VIOLATION OF ANY OF THE CONDITION OF PROBATION.

PROBATIONER

PROBATION OFFICER



CIRCUIT COURT OF COOK COUNTY
ADULT PROBATION DEPARTMENT

NANCY MARTIN
CHIEF PROBATION OFFICER

CRIMINAL COURTS ADMINISTRATION BUILDING
2650 S CALIFORNIA AVENUE LOWER LEVEL
CHICAGO, ILLINOIS 60608-5146
TEL (312) 890-3280
FAX (312) 890-7352
TDD (312) 890-6880

COOK COUNTY
ADULT PROBATION
SEX OFFENDER UNIT

INTAKE

NAME: _____ CASE#: _____
ADDRESS: _____ JUDGE: _____
CITY: _____ STATE: _____ ZIP: _____
TELEPHONE#: _____ D.O.B.: _____ PAGER#: _____

I.D. NUMBERS

F.B.I.#: _____ I.S.B.#: _____
D.L.#: _____ I.R#: _____
S.S#: _____

P.O. CHECK LIST

_____ GANGS
_____ PSI/PTI
_____ CRIMINAL RECORD
_____ SUBURBS
_____ CITY

VEHICLE DESCRIPTION

_____ LICENSE PLATE _____ COLOR _____ MODEL
_____ MAKE



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OFFICIAL VERSION

DEFENDENT'S VERSION



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EMPLOYMENT

CURRENT EMPLOYERS NAME:

ADDRESS:

DATE OF EMPLOYMENT:

JOB TITLE/SALARY:

PAST EMPLOYMENT:

ADDRESS:

DATE OF EMPLOYMENT:

JOB TITLE/SALARY:

IF DEFENDENT IS UNEMPLOYED, HOW IS HE/SHE SUPPORTED?

TOTAL EARNINGS PER MONTH:

IS DEFENDENT RESPONSIBLE FOR SUPPORTING ANY PERSON OTHER THAN HIMSELF/
HERSELF? IF YES/WHO?

IS THE DEFENDENT'S INCOME SUFFICIENT TO MEET HIS/HER FINANCIAL OBLIGATIONS?
IF YES, EXPLAIN?

VOLUNTEER ACTIVITIES

ARE YOU CURRENTLY INVOLVED WITH ANY ORGANIZATIONS THAT ASSOCIATE WITH
MINORS? IF YES,

- A. NAME OF ORGANIZATION: _____
- B. HOW LONG HAVE YOU BEEN A PART OF THIS ORGANIZATION? _____
- C. IS THERE A CONTACT PERSON? _____
- D. WHAT ARE YOUR VOLUNTEER RESPONSIBILITIES? _____



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EDUCATION

DID YOU GRADUATE HIGH SCHOOL?

NAME:

YEAR OF GRADUATION OR LAST ATTENDENCE:

IF DEFENDENT DID NOT GRADUATE, WHY?

ADDITIONAL EDUCATION:

COMMENTS:

FAMILY CONTACT

MARITAL STATUS: SINGLE SEPERATED
 MARRIED WIDOWED
 DIVORCED

FATHERS NAME:

MOTHERS NAME:

TELEPHONE #:

TELEPHONE #:

ADDRESS:

ADDRESS:

DESCRIBE DEFENDENTS PAST AND CURRENT RELATIONSHIP WITH PARENTS?



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TDD: (312) 890-4480

FAMILY CONTACT CONT.

1. WHO IS THE LEASE HOLDER OR OWNER WHERE THE DEFENDENT RESIDES?

NAME: _____

ADDRESS: _____

HOW LONG: _____

TELEPHONE NUMBER: _____

RELATIONSHIP: _____

BEEPER NUMBER OF THE DEFENDENT: _____

2. DWELLING DESCRIPTION:

BRICK: _____ FRAME: _____ COLOR: _____

HOUSE: _____ APARTMENT: _____ FLOOR: _____

NAME (S) ON THE MAIL BOX OF DEFENDENTS DWELLING: _____

3. HOW MANY CO-HABITORS RESIDE WITH THE DEFENDENT AND WHAT IS THEIR RELATIONSHIP?

NAME: _____ RELATIONSHIP: _____

NAME: _____ RELATIONSHIP: _____

NAME: _____ RELATIONSHIP: _____

4. ARE THEIR ANY WEAPONS STORED AT THE RESIDENCE? IF YES, EXPLAIN:



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MILITARY

BRANCH:

OCCUPATION/DUTIES:

DATE OF ENTRY:

DISCHARGE DATE:

RANK AT DISCHARGE:

TYPE OF DISCHARGE:

ENVIRONMENT

WHICH GANGS ARE ACTIVE IN HIS/HER NEIGHBORHOOD?

IS THE OFFENDER A GANG MEMEBER?

_____ YES _____ NO

IF YES, CURRENT RANK:

STILL ACTIVE _____ GANG NICKNAME _____

GANG IDENTIFIER _____

SCARS/TATTOOS/IDENTIFICATION MARKS: _____

BODY LOCATION: _____

DESCRIPTION OF TATTOO (S): _____



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WHAT PROPENSITY FOR VIOLENCE AND CRIMINAL BEHAVIOR EXISTS IF THE
DEFENDENT WAS FOUND ELIGIBLE FOR I.S.O.?

WHAT IS THE DEFENDENTS ATTITUDE AFTER BEING CHARGED WITH THE
CURRENT OFFENSE?

ARE THERE ANY RISK FACTORS FOR I.S.O. OFFICERS DUE TO RESIDENCE AND
NEIGHBORHOOD? IF YES, EXPLAIN:

ADDITIONAL COMMENTS REGARDING CASE:



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ALCOHOL/DRUG HISTORY

ALCOHOL USAGE

DOES DEFENDENT INDICATE AN ALCOHOL PROBLEM? _____ YES _____ NO

A. AGE OF FIRST USE:

B. WHEN DID DEFENDENT LAST HAVE A DRINK:

C. AVERAGE AMOUNT CONSIDERED PER DAY/WEEK:

D. LIST ANY PHYSICAL SYMPTOMS: (BLACKOUTS; LIVER PROBLEMS; SEIZURES)

E. ANY FORMER/PRESENT TREATMENT; _____ YES _____ NO

F. WAS DEFENDENT UNDER THE INFLUENCE OF ALCOHOL AT THE TIME OF
CURRENT OFFENSE? _____ YES _____ NO

DRUG USAGE

HAS DEFENDENT EVER TAKEN DRUGS? _____ YES _____ NO

DOES DEFENDENT ADMIT TO NOW HAVE A DRUG PROBLEM? _____ YES _____ NO

IF YES, ANSWER THE FOLLOWING QUESTIONS:

A. AGE AT FIRST USE:

B. WHEN DID DEFENDENT LAST USE DRUGS AND WHAT TYPE OF DRUG WAS
IT?

C. HOW OFTEN?

D. LIST ALL DRUGS USED (INCLUDING PRESCRIPTION DRUGS)

E. ANY FORMER/PRESENT TREATMENT: _____ YES _____ NO IF YES, WHERE
AND WHEN:

F. IS DRUG USE A PRECIPITATING FACTOR IN THE OFFENDER CRIMINAL HISTORY?
_____ YES _____ NO



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MENTAL HEALTH HISTORY

HAS DEFENDENT RECEIVED SPECIAL EDUCATION TRAINING? _____ YES _____ NO

IF YES, WHERE?

DOES DEFENDENT DEMONSTRATE ANY MENTAL PROBLEMS?

HAS DEFENDENT BEEN TREATED FOR ANY PSYCHOLOGICAL/MENTAL HEALTH PROBLEMS?

_____ YES _____ NO

IF YES, TREATMENT CENTER, LENGTH OF TREATMENT:

SEXUAL HISTORY

1. ARE YOU CURRENTLY INVOLVED IN A SEXUALLY ACTIVE RELATIONSHIP?

IF YES, ANSWER THE FOLLOWING QUESTION

HOW LONG?

WITH WHOM:

ADDRESS:

RELATIONSHIP:

2. HAVE YOU EVER BEEN A VICTIM OF SEXUAL ABUSE?

IF YES, AT WHAT AGE, AND BY WHOM:

3. ARE YOU _____ HETEROSEXUAL

_____ BI-SEXUAL

_____ HOMOSEXUAL

_____ OTHER

4. DO YOU CURRENTLY PRESCRIBE TO PORNOGRAPHIC MAGAZINES?

5. DO YOU VIEW PORNOGRAPHIC VIDEOS?

6. DO YOU OWN A COMPUTER? IF YES, ARE YOU ON LINE?



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ADDENDUM

1. HOW DID YOU LEARN ABOUT SEX?
2. EXPLAIN YOUR FIRST SEXUAL EXPERIENCE.
3. DO YOU VIEW PORNOGRAPHIC MATERIAL?
IF YES, WHAT?
4. WHAT AGE DID YOU BEGIN MASTURBATING?
5. HOW OFTEN DO YOU MASTURBATE?
6. WHEN MASTURBATING, DESCRIBE A TYPICAL SEXUAL FANTASY?
7. HAVE YOU EVER ACTED OUT A SEXUAL FANTASY?
8. DO YOU LIKE TO LOOK AT OTHER CHILD EROTICA SUCH AS:
FILMS, SLIDES, BOOKS, PICTURES, MAGAZINES, VIDEOTAPES OF
 - A. NUDIST _____
 - B. CHILDREN _____
 - C. CHILDRENS CLOTHING _____
 - D. CATALOG PICTURES OF CHILDREN _____
 - E. PICTURES OF CHILDREN OF TOYS OR OTHER EQUIPMENT _____

3) Do you ever fantasize about real people? Yes ___ No ___

If yes, describe: _____

4) Do you get aroused when you fantasize? Yes ___ No ___

5) Which fantasy arouses you most? Describe it? _____

6) How often do you use this fantasy? Daily ___ Weekly ___ Monthly ___
Other _____

7) Has your fantasy every really happened to you? Yes ___ No ___
Describe: _____

Have you ever had fantasies about the following? Please check the appropriate line; be as honest as possible.

| | Never | Sometimes | Often |
|--|-------|-----------|-------|
| Sex with amputee partner(s) | _____ | _____ | _____ |
| Amputating yourself for erotic feeling | _____ | _____ | _____ |
| Defecating on partner | _____ | _____ | _____ |
| Partner defecating on you | _____ | _____ | _____ |
| Exposing yourself to a stranger | _____ | _____ | _____ |
| Exposing yourself to many people | _____ | _____ | _____ |
| Fetishes: (hair, shoes, boots, underwear, rubber, silk, velvet, feathers, leather, rope, stockings, drains, buckles, fur, gloves, masks) | _____ | _____ | _____ |
| Rubbing your genitals against a stranger | _____ | _____ | _____ |
| Someone giving you an enema | _____ | _____ | _____ |
| Giving someone an enema | _____ | _____ | _____ |
| Sex with a sleeping partner | _____ | _____ | _____ |
| Sex with children | _____ | _____ | _____ |
| Sex with adolescents | _____ | _____ | _____ |
| Sex with a non consenting partner | _____ | _____ | _____ |
| Forcing someone to have sex | _____ | _____ | _____ |
| Watching someone have sex | _____ | _____ | _____ |

| | | | |
|---|-----------|----------|-------|
| Making obscene phone calls to strangers | _____ | _____ | _____ |
| Making obscene phone calls to someone you know | _____ | _____ | _____ |
| Sex with more than one partner | _____ | _____ | _____ |
| Urinating on sex partner | _____ | _____ | _____ |
| Having someone force you to have sex | _____ | _____ | _____ |
| Having your sex partner urinate on you | _____ | _____ | _____ |
| Sex with an animal | _____ | _____ | _____ |
| Watching someone have sex with an animal | _____ | _____ | _____ |
| Having someone watch you have sex | _____ | _____ | _____ |
| Having sex in front of an audience | _____ | _____ | _____ |
| Having sex with your male parent | _____ | _____ | _____ |
| Having sex with your female parent | _____ | _____ | _____ |
| Fantasies about being the opposite sex | _____ | _____ | _____ |
| Using devices for sexual pleasure (dildos Ben Wah balls, vibrator) | _____ | _____ | _____ |
| Sticking objects into someone's genitals | _____ | _____ | _____ |
| Sex with a virgin(s) | _____ | _____ | _____ |
| Sex with a very fat partner(s) | _____ | _____ | _____ |
| Sex with pregnant women | _____ | _____ | _____ |
| Sex with someone you treat as a slave or tie up | _____ | _____ | _____ |
| Having someone tie you up for sex | _____ | _____ | _____ |
| Having someone humiliate you for arousal | _____ | _____ | _____ |
| Sex with prostitutes | _____ | _____ | _____ |
| Fantasies about minors of the opposite sex | _____ | _____ | _____ |
| Fantasies about minors of the same sex | _____ | _____ | _____ |
| Fantasies about touching or having sex with infants or babies | _____ | _____ | _____ |
| Fantasies about sacrifices, or killings | _____ | _____ | _____ |
| Hanging yourself for arousal or orgasm | _____ | _____ | _____ |
| Fantasizing about having sex with a story book or cartoon character | _____ | _____ | _____ |
| Do you use pictures when you masturbate? | Yes _____ | No _____ | |
| Describe the pictures: | | | |

CIRCUIT COURT OF COOK COUNTY
ADULT PROBATION DEPARTMENT
SEX OFFENDER PROGRAM

ELIGIBILITY LETTER

DATE: _____

NAME: _____

CASE#: _____

CHARGE: _____

I.R.#: _____

S.I.D.#: _____

Dear Judge: _____

1. The Adult Probation Department has established a program to supervise offenders sentenced pursuant to 730 ILCS 5/5-5-3e.
2. The following investigation has been conducted by an officer assigned to the Sex Offender Program to ascertain the offender's eligibility: Previous criminal history, juvenile arrest background, use of drugs and/or alcohol, employment status, home environment, family situation, attitude toward program participation and willingness to undergo court approved counseling for a minimum of two years.

I have reviewed all pertinent information regarding the subject named above and have concluded that this individual meets the eligibility criteria for inclusion into the Sex Offender Supervision Program.

4. Upon the issuance of an order sentencing the offender under 730 ILCS 5/5-5-3e in conjunction with sex offender specification order, the Sex Offender Supervision Unit will begin supervision of the offender.

Respectfully,

Supervisor
Sex Offender Unit



**ILLINOIS
CRIMINAL JUSTICE
INFORMATION AUTHORITY**

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Chicago, Illinois 60606-3997
312-793-8550

Jim Edgar, Governor
Peter B. Bensinger, Chairman