



Applied Psychology

Second Edition

By Graham Davey

Chapter 10

Introduction to Forensic Psychology: Organisations and Offenders

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Learning Outcomes

- Understand the importance of scientific practice in forensic psychology.
- Compare the role of the media against the actual work of a forensic psychologist.
- Compare and contrast the different types of work a forensic psychologist engages in when working with organisations and perpetrators.
- Understand the importance of ethical decision-making in the role of applied psychology, including that of the forensic psychologist.

10.1 What Do Forensic Psychologists Do? p. 170

- Forensic psychologists work in a range of settings:
 - HM Prison Service
 - NHS Forensic Hospital
 - Youth Offending Teams
 - Probation
 - Private forensic healthcare
 - Private prisons
 - Scottish and Irish Prison systems
 - The police
 - The foreign office.
- They may work independently or in private practice.
- The profession continues to develop.

10.1 What Do Forensic Psychologists Do? p. 170

- Forensic psychologists work with:
 - Perpetrators
 - Victims
 - The general public (and their anxieties around crime)
 - Government bodies
 - Universities (postgraduate teaching and research).

10.2 The Role of the Forensic Psychologist in an Organisation pp. 170-175

- The consultancy role is **varied** and can include:
 - Working with management on the assessment, initiation, and evaluation of change within an organisation
 - Initiating or supporting policy development
 - Helping to alleviate stress in an organisation
 - Advising on critical incidents within an organisation
 - Advising on government projects
 - Assisting in the auditing of government initiatives in agencies such as Her Majesty's Inspectorate of Prisons.

10.2.1 The Role of Consultancy within an Organisation p. 170

- Consultancy is an **advisory service** that “involves talking with many different people, at different levels, with different perceptions, in order to grasp the main facts and feelings about the issues. It then involves a careful assessment to see what can be done that will make an improvement. Then comes the difficult job of feeding back the data and helping the clients make an improvement”. (Margerison, 2018)

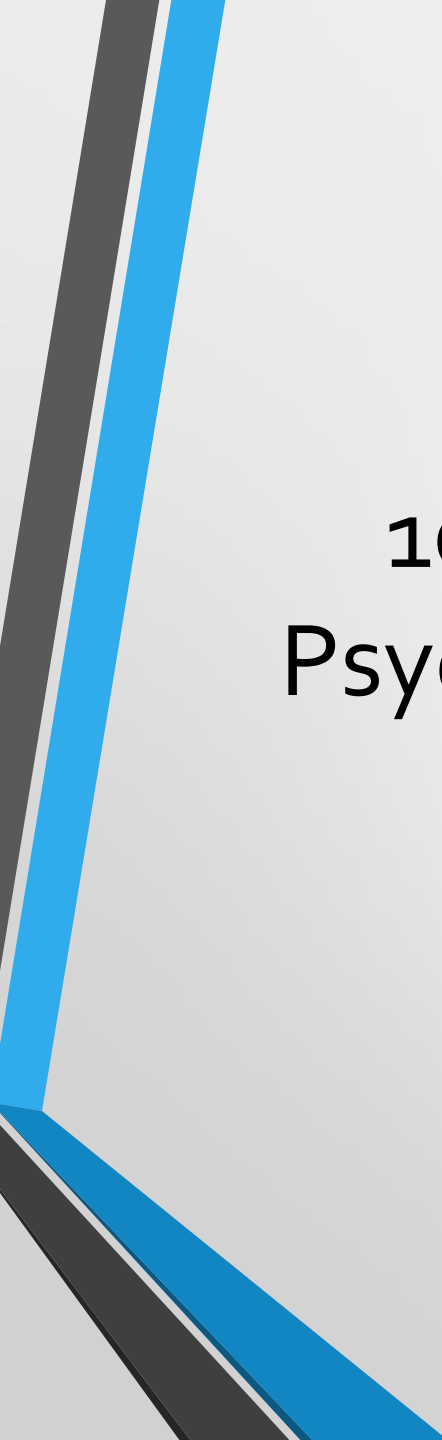
10.2.2 Competencies of the Consultant p. 172

- **Experience:** Knowledge of the area under discussion, understanding of the forensic setting.
- **Ability to listen and question:** Listens actively, checks their understanding of the issue with the client; failure to do so may lead to incorrect assumptions.
- **Objectivity:** Ability to express views the organisation might not want to hear, clear and sensitive communication of issues, knowledge of one's competencies and limits.
- **Self-awareness:** Ability to reflect, awareness of own thoughts and feelings and their impact.
- **Environmental awareness:** Consideration of cultural and environmental challenges for the client organisation (Kakabadse et al., 2006; Banai & Tulimieri, 2013).

10.2.3 Types of Consultancy Work

pp. 172-173

- Management of deliberate self-injury and suicide.
- Management of bullying and harassment.
- Development of new policies and procedures.
- Critical incident adviser.



10.3 The Role of the Forensic Psychologist When Working With Offenders pp. 175-178

10.3.1 Types of Engagement p. 175

- In **diagnostic assessment**, the risk that offenders pose is assessed on a set of predetermined ideals and an understanding of their offending is formulated.
- Further, their areas of treatment through intervention work and therapy are identified and managed.

10.3.2 Diagnostic Assessment p. 175

- A forensic psychologist with experience in mental health matters can be involved in the **diagnosis** of mental health problems and personality disorders.

10.3.3 Risk Assessment pp. 175-176

- **Risk assessment** focuses on potential risks the offender may present to others.
- Understanding the offending is another aim.
- Assessments focus on a combination of **two risk factor types**:
 - **Static** risk factors are historical and cannot be changed
 - **Dynamic** risk factors are responsive to change. They include
 - Offending attitudes and values
 - Unhelpful beliefs of the world promoting offending
 - A lack of knowledge in the effective development and management of relationships with others.

10.3.3 Risk Assessment pp. 175-176

- In **sex offending**, Mann et al. (2010) determined **dynamic factors** predictive of re-offending:
 - Emotion regulation problems
 - Deviant sexual interests
 - Offence supportive attitudes and beliefs
 - Intimacy deficits.
- Examples of risk assessments include:
 - Sexual Violent Risk-20 (Boer et al., 2017)
 - Risk for Sexual Violence Protocol (Hart et al., 2004)
 - Assessment of Future Violence (HCR-20; Douglas et al., 2013).

10.3.3 Risk Assessment pp. 175-176

- **Protective factors** are factors that can buffer against risk.
- **Internal** protective factors include:
 - Intelligence
 - Secure attachment in childhood
 - Empathy
 - Coping
 - Self-control.
- **Motivational** protective factors include:
 - Work
 - Leisure activities
 - Financial management
 - Motivation for treatment
 - Attitudes towards authority
 - Life goals
 - Medication.

10.3.3 Risk Assessment pp. 175-176

- **External** protective factors include:
 - Social network
 - Intimate relationship
 - Professional care
 - Living circumstances
 - External control.

10.3.4 Formulation of Offending

pp. 176-177

- A **formulation** draws together the **core issues** for the offender, trying to link together how all issues are intertwined, making reference to **theory** and **science**.
- A formulation aims to:
 - Understand the motivation and reasoning behind the offending
 - Identify the elements that reinforce their offending
 - Identify when any vulnerabilities to offending may be heightened
 - Note any protective factors that may serve to buffer or minimise offending.

10.3.4 Formulation of Offending

pp. 176-177

- It tells a story about how the individual began to offend and what risks for future offending exist.
- Approaches to formulation include cognitive behavioural, psychodynamic, systemic, and integrated.
- Formulations should be undertaken in collaboration with the client.
- It can be used for intervention (Tarrier & Calam, 2004).
- Formulations are essentially **hypotheses** about **causes of offending** to be tested (Eells, 1997; Butler, 1998).

10.3.5 Intervention

Work/Therapy pp. 177-178

- Intervention work and therapy can be individual and group-based.
- All interventions/therapies follow the 'what works' literature of the key principles for effective treatment with offenders (e.g. McGuire & Priestley, 1995).
- Examples of types of therapies forensic psychologists are involved in include:
 - Coping and problem-solving skills
 - Social engagement skills
 - Intimacy-deficit intervention
 - Attitudinal intervention
 - Violent offender therapies - these are aimed to manage those with a history of habitual aggression (frequent behaviour that results in harm)
 - Sex offender therapies.

TABLE 10.1 *Key principles for effective treatment.*

<i>Principle</i>	<i>Requirement for effective treatment</i>
1	Therapy/intervention must be empirical and grounded in theory.
2	Therapy/intervention must target 'criminogenic needs' that are relevant for the offence population.
3	Therapy/intervention must use methods that are responsive to the learning styles of the client.
4	Therapy/intervention must use methods that are known to be effective.
5	Therapy/intervention must teach skills (when appropriate).
6	Therapy/intervention must address a range of criminogenic factors.
7	Therapy/intervention must use the right dosage of treatment.
8	There must be focus on a clear care pathway for the client, such as focusing on future needs following therapy.
9	A programme must have treatment integrity (i.e., aims are linked to grounded theory and approaches; there are adequate resources to run it; there should be training, support, and evaluation in place).

10.4 Ethical Issues Associated With Forensic Psychology

pp. 180-182

- Ethical considerations underpin the work of all psychologists.
- Forensic psychologists' conduct is regulated by the Health and Care Professions Council (HCPC).
- HCPC's standards for psychologists are:
 - Promote and protect the interests of service users and carers
 - Communicate appropriately and effectively
 - Work within the limits of your knowledge and skills
 - Delegate appropriately
 - Respect confidentiality
 - Manage risk
 - Report concerns about safety
 - Be open when things go wrong
 - Be honest and trustworthy
 - Keep records of your work.