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Juvenile Sex Offender Motivation to Stop Offending While Engaged in Residential Treatment

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Walden University

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LeMeita Smith

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Walden University

2022

Abstract

Juvenile Sex Offender Motivation to Stop Offending While Engaged in Residential

Treatment

by

LeMeita Smith

MA, Kaplan University, 2012

BS, Texas Christian University, 2009

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Forensic Psychology – Crisis Response

Walden University

May 2022

Abstract

The treatment of sex offenders is a controversial issue, yet research on the effectiveness of treatment interventions is limited. There is a great amount of research analyzing the connection between motivation and recidivism; however, what is known about the juvenile sex offender pales in comparison to what is known about adult sex offenders. Utilizing Deci and Ryan's self-determination theory as the theoretical foundation, the purpose of this qualitative study was to describe the lived experiences of male juvenile sex offenders, to better understand how residential treatment impacted their motivation to lead an offense-free lifestyle. Obtaining this information from the first-person perspective was the intent of the study; however, data were subsequently collected from treatment providers. Data were collected from seven treatment providers based in Texas through a Zoom interview. Data were analyzed using thematic analysis. Data analysis revealed four major themes that impacted sex offender motivation to stop offending. Findings indicated that support received, treatment atmosphere, provision of alternative interventions, and perception of self are most impactful in supporting motivation to stop offending. The positive social change implications from this study include recommendations for sex offender treatment to implement treatment plans attuning to these themes. Implementation of these plans may reduce juvenile sex offender recidivism and provide additional guidance to treatment providers.

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Dedication

This dissertation is dedicated to my son, Brycin, for giving me the inspiration and motivation through countless long nights and bleak days to continue striving for excellence. You are my biggest fan and best human.

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Chapter 1: Introduction to the Study

Sex offender treatment programs are designed to enhance public safety by providing evaluation, education, treatment, and release. Over the years, treatment of sexual offenders has evolved, using various theoretical and practice models. Treatment is guided by specific interventions to maximize effectiveness; however, sexual offending remains a serious problem with impacts on victims, their families, and society. Several factors influence the lack of rehabilitation and release, including insufficient treatment (Parks, 2018). Researchers have identified associations between improvement and offender motivation (Olver et al., 2017).

Sufficient treatment promotes internal motivation to change, restructuring dysfunctional, antisocial thinking patterns and reasoning, and promoting attitudes to change (Howard et al., 2018). Research into offender treatment has historically focused on motivation; however, research evaluating motivation to stop offending during residential treatment has not been done. This original contribution will address this gap by investigating offender motivation to lead an offense-free lifestyle during residential treatment. The insight obtained from this study will assist in improving current treatment interventions. The following sections introduce the relevance of offender motivation in treatment, the current problem, and how this study will address this research gap.

Background

Beginning in the 1900s, following a series of sex crimes, states throughout the United States began to impose additional restrictions on individuals convicted of sexual crimes (Witt & DeMatteo, 2019). These restrictions included registration and community

notification, various treatment protocols, limitations on areas sex offenders could reside, and additional supervision in the community (Witt & DeMatteo, 2019). The restrictions created were highly focused on the adult offender, and few policies addressed the juvenile offender (Frye, 2019). This is due to the literature containing limited systematic clinical or research trials evaluating juvenile sex offender treatment (Frye, 2019). Historically, when a young person committed a sexual offense, it was viewed as experimental or developmental curiosity (NAPN, 1993).

In 1988, the National Adolescent Perpetrator Network (NAPN) established a task force designed to determine a set of guidelines for the treatment of juveniles who committed a sex crime (Frye, 2019; NAPN, 1993). Some of the treatment goals outlined included accepting responsibility for the behavior, identifying a pattern or cycle of sexual offending, learning to interrupt the cycle, exploring one's own victimization or history of abuse, and learning to empathize with the victim (Frye, 2019). In 1993, NAPN modified its goals for treatment to further define the goals with respect to the juvenile's treatment needs (Frye, 2019).

The Association for the Treatment of Sexual Abusers (ATSA) updated these guidelines in 2017 to incorporate the things we have learned over the years about the treatment needs of juvenile offenders. Current guidelines emphasize the importance of promoting and facilitating prosocial skill development (ATSA, 2017). Research literature widely supports focusing on offender motivation within treatment to promote prosocial attitudes. Motivation is defined as the driving force or condition inside an individual that desires a change, either in the self or within the environment (Carl et al., 2019). A recent

meta-analysis of sex offense recidivism found that offenders who are motivated to stop offending demonstrate higher treatment engagement and recognize the benefits of treatment (Sorrentino et al., 2018). Offenders who are motivated to learn the triggers to offending develop greater ability to modify beliefs and attitudes that support their offending behavior (Greif, 2019). Analyses demonstrate that the higher the treatment motivation, the more likely offenders are to complete treatment, refrain from future offending, view their offenses as problematic, and extend active effort to change their criminogenic needs (Higley et al., 2019; Shaul et al., 2020). Motivation level is a predictor of treatment engagement and attrition, with lack of motivation indicative of an elevated risk of reoffending (Carl et al., 2019).

Motivation increases treatment initiation, retention, and outcomes (Sewall et al., 2019). As treatment effectiveness improves, additional high-quality studies are necessary to provide insight into the impact of motivation on offending within specialized treatment programs such as residential treatment (Day et al., 2019). Evaluating the characteristics of treatment influence on motivation including internal and external determinants can provide predictions of engagement and rehabilitative potential (Carl et al., 2019). Despite this insight, sex offending remains a serious problem, prompting the need to conduct further analyses into the efficacy of treatment programs, which has motivated the current identified problem. Although numerous studies evaluating offender motivation have been conducted, much remains to be learned, specifically pertaining to the juvenile offender (ATSA, 2017; Frye, 2019). Studies that analyze what motivates the juvenile offender and ways they perceive treatment are needed to provide information on the efficacy of

treatment programs. This need prompts the identified problem to be addressed by the current study.

Statement of the Problem

Sexual offending is a serious problem with significant impact on victims, families, and society. Sex offender treatment is an important rehabilitative effort to assist offenders in stopping abusive behavior and understanding the impact of their harmful actions (Farmer et al., 2016). Treatment helps offenders identify specific risk factors and develop healthy attitudes and behaviors (Farmer et al., 2016). Treatment programs that focus rehabilitation on internal motivation decrease the impact of external pressures to offend, hence reducing recidivism (Farmer et al., 2016). Stasch et al. (2018) reported that treatment motivation is the best predictor of decreases in dynamic risk factors, and studies conducted by Seewald et al. (2018) and Higley et al. (2019) found motivation to be integral to the therapeutic process in treatment initiation, compliance, and retention.

It is well-established that motivation increases the effectiveness of programs. Hanson et al. (2018) examined sex offender motivation to stop offending. They reported that when offenders are motivated and focused on goals to lead an offense-free lifestyle, the risk of reoffending decreases. Schwartz et al. (2017) analyzed the impact of motivation on juvenile offending and identified interventions that target offender motivation to stop offending as most effective. Residential treatment programs were created to provide a treatment option for sexual offenders in preparation for reintegration. However, motivation to lead an offense-free lifestyle during residential treatment has not been examined. Examining the lived experiences of juvenile offenders within residential

treatment and how this treatment influences motivation to lead an offense-free lifestyle can help inform improvements to reduce recidivism and confinement (Howard et al., 2018).

Purpose of the Study

The purpose of this qualitative study was to explore how treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. Rehabilitation and reform are highly influenced by motivation, which is driven by environmental factors such as the treatment program (Carl et al., 2019). Crime and delinquent behavior are typically episodic and purposive and driven by both internal and external motivators (Howard et al., 2018). Investigating this motivation can help to determine the effectiveness of residential treatment and inform changes to interventions to promote rehabilitation.

Research Question

The following research question was used to gather the perceptions of the participants of this study.

How do treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment?

Theoretical Framework

The theoretical base for this study is self-determination theory (SDT). Psychologists Edward Deci and Richard Ryan developed this theory of motivation, suggesting that people are driven by a need to grow and gain fulfillment (Deci et al., 1989). SDT describes two ways of understanding motivation, namely whether motivation

arises from inside (intrinsically) or outside (extrinsically) the individual (Locke & Schattke, 2019). Intrinsic motivation refers to individuals engaging in activities or tasks for the sake of personal enjoyment and interest, or because they believe in the value of the activities, whereas extrinsic motivation refers to individuals engaging in activities due to the desire to earn a reward or avoid punishment (Locke & Schattke, 2019).

SDT posits that human motivation and personality are influenced by inherent growth tendencies and innate psychological needs (Deci et al., 1989). SDT is concerned with the motivation behind choices that are not influenced by external influence and interference (Ryan & Deci, 2017). SDT suggests that people are motivated by the psychological needs for competence, connectedness, and autonomy (Deci et al., 1989). Competence refers to the ability to do a skill well or possession of knowledge required for a task (Averill & Major, 2020). Connectedness is the feeling of being bound together with others. Autonomy refers to the extent that the person's actions are self-determined rather than coerced or compelled (Averill & Major, 2020). SDT relates to the current study by providing context to analyze how functioning can be facilitated or hindered by the social context (Ryan & Deci, 2017). This theory is explained in more detail in Chapter 2.

Nature of the Study

The nature of this study is qualitative with a phenomenological research approach. Phenomenology is the study of structures of consciousness experienced from the first-person point of view premised on the concept that behavior is determined by the way a person perceives reality (Smith & Thomasson, 2005). The aim of phenomenology is to

analyze, describe, and interpret the conscious experience from the first-person perspective and to analyze the inner awareness, thoughts, emotions, and beliefs influencing personal development within ordinary human experiences (Smith & Thomasson, 2005). Phenomenology is rooted in the different ways of conceiving the “what” and “how” of the subjective human experience (Neubauer et al., 2019). By examining an experience as it is subjectively lived, new meanings and understanding can be obtained to inform, or re-orient, how we understand the experience (Neubauer et al., 2019). This approach aligns with the purpose of the study as it supports the foundational premise to learn from the perspective of treatment providers to improve treatment outcomes.

Definitions

Autonomy: The extent to which a person’s acts are self-determined rather than coerced or compelled (Averill & Major, 2020).

Competence: The ability to do a skill well or possession of knowledge required for a task and belief in one’s ability to function efficiently within the social environment (Averill & Major, 2020).

Connectedness: A sensation and perception term referring to the feeling of being bound together with others rather at a moment in time or specific place, or in a way that is not dependent on external variables (Averill & Major, 2020).

Desistance: The cessation of offending or other antisocial behavior (McMahon & Jump, 2017).

Dynamic risk factors: Potentially changeable factors of individuals and their environments that predict higher rates of reoffending (Hefferman & Ward, 2019).

Motivation: A driving force or condition inside an individual that desires a change, either in the self or within the environment (Carl et al., 2019).

Offense-free: Free of engaging in acts that cause anger, resentment, displeasure, or affront (Thornton et al., 2019).

Practitioners: Individuals who have the professional training and clinical skills to help people learn to cope more effectively with life issues, maladaptive behaviors, and mental health problems (APA, 2019).

Residential treatment: Inpatient program providing therapeutic care for mental illness, behavioral issues, or drug and alcohol abuse problems that go beyond what normal therapy methods can do (ATSA, 2017).

Sex offenders: Any person convicted of a sex crime including rape, molestation, sexual misconduct, sexual violation of human remains, incest, communication with a minor for immoral purposes, or a felony with a finding of sexual motivation (Witt & DeMatteo, 2019).

Sex offenses: Crimes such as rape, sodomy, and sexual abuse that may subject an individual to registration as a sexual offender (Witt & DeMatteo, 2019).

Sexual violence: A sexual act connected to other forms of violence, including rape, child sexual abuse, and intimate partner violence (NSVRC, 2018).

Transferability: The degree at which results from a qualitative study can be generalized or transferred to other contexts or settings (Schloemer & Schroder-Back, 2018).

Assumptions

This study is based on three assumptions. First, the inclusion criteria for the sample are appropriate and assure that the participants have experienced the same or similar phenomenon of the study. The main inclusionary criteria included treatment providers of juvenile sex offenders receiving residential treatment. Second, individuals gave an accurate and thorough account of their lived experiences and answered interview questions in an honest and candid manner. Finally, participants had a sincere interest in participating in the study and did not have any other motives. These assumptions increase the relevancy of the study supporting existence of the research problem enabling me to answer the problem.

Scope and Delimitations

The general intent of this study was to investigate how treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. Individuals identified for participation met the criteria of being treatment providers of juveniles, under the age of 18 who had committed a sex crime and were receiving residential treatment for at least 30 days.

The findings of this study do not apply to adults over age 18, individuals who went to prison rather than residential treatment, and those who have received residential treatment for less than 30 days. This study investigated the varied factors that affect

motivation of sex offenders in residential treatment. Juvenile sex offenders included those who have engaged in sexually maladaptive behaviors including inappropriate, unwanted sexual contact with other children, sexually bullying, harassment, assault, repetitive public exposure, and hidden pornography. This study aimed to consider all aspects of residential treatment that impact offender motivation, and each respondent was asked the same questions. It delimits that the study may not be generalizable to other populations of sex offenders including female sex offenders, offenders over the age of 18, and offenders who have not received residential treatment.

Limitations

As the study unfolded, additional limitations became apparent. The major limitation of this study was my inability to obtain the first-hand perspective from juvenile sex offenders. Although interviewing treatment providers allowed me to obtain robust insight, it pales in comparison to the information that may have been obtained from addressing the research questions from the perspective of the juvenile sex offender. My role as a clinician may have affected the participants' responses because of social desirability and reluctance to openly reveal, share, and express their subjective experiences and perceptions (Elias & Haj-Yahia, 2019), which could have portrayed their facility as incompetent. Additionally, the research quality is heavily dependent on my interpretation of the findings. As a counselor, I have preconceived notions and personal biases further subjected to the influences of popular culture and media representations of sex offenders (Gregory, 2019).

Significance of the Study

This research fills a gap in understanding by focusing specifically on motivational factors and how treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. By investigating motivation of sex offenders receiving residential treatment, insight was obtained regarding the effectiveness of this program to motivate change in behaviors and decrease in risk. Treatment modalities that focus on motivational factors are recommended for sex offenders to reduce recidivism (Olver et al., 2018). Motivation is significantly related to risk, with high motivation positively correlated to lower levels of risk (Miller, 2015). Offenders who are motivated to change are better able to link treatment and their own offending or current situation and change behaviors reducing the risk of recidivism (O'Halloran et al., 2016).

Investigating motivation levels of individuals who are receiving residential treatment will lead to significant changes to ensure that treatment is aligned with evidence-based practices to promote recovery. This original contribution has significant implications for positive social changes and focuses on the purposeful improvement of the human condition. This research provides data to improve sex offender treatment. Efficacious mental health treatment of sex offenders significantly reduces the future risk of sexual recidivism impacting the lives of both offenders and victims (Evans & Ward, 2019). During effective treatment, offenders learn special strategies for stopping abusive behavior and taking responsibility for harm done (Evans & Ward, 2019). This responsibility can help the individual to create a better life by developing strengths to

reduce risk of future offending (Evans & Ward, 2019). Reductions in recidivism provide the offender with a sense of hope for rehabilitation, supporting improvement of the human and social conditions. As recidivism declines, victimization decreases, promoting positive social change (Walden University, 2013).

Summary

Numerous studies have been conducted investigating treatment impacts on offender motivation increasing the knowledge base; however, more high-quality studies are needed. It is well-established that motivation increases the effectiveness of programs; however, residential treatment programs are criticized for failing to centralize motivation in treatment interventions (ATSA, 2017; Tolman, 2018). Through the years, numerous studies have identified the importance of appealing to intrinsic and extrinsic motivational factors within treatment (Higley et al., 2019; Shaul et al., 2020), yet motivation to lead an offense-free lifestyle during residential treatment has not been examined.

The present study addresses this gap and contributes to the body of literature concerning sex offender treatment, specifically those who have been residentially committed. Investigating this motivation helps to determine the effectiveness of residential treatment and inform changes to interventions to promote rehabilitation. Use of a qualitative phenomenological approach is consistent with understanding the perception of treatment providers regarding experiences of sex offenders.

Chapter 1 included an introduction and background, statement of the problem, purpose, significance, theoretical framework, definition of terms, assumptions, delimitations, and limitations of the current study. Chapter 2 focuses on a significant

review of literature, presenting a profile of residential treatment, history of motivation in working with offenders, and progression to the identified problem, including the iterative search process implemented to obtain data.

Chapter 2: Literature Review

Sexual offending is a serious problem, with significant impact on victims, families, and society. Residential treatment programs were created to provide a treatment option for sex offenders in preparation for reintegration. The literature related to characteristics, patterns, and the impact of motivation on treatment outcomes has come a long way; however, there is much to learn (Frye, 2019). Adult literature on the impact of motivation in treatment dates back more than 20 years, but what we know about juveniles pales in comparison, despite juvenile sex offenses accounting for 20% of all sexual assaults and 50% of all childhood sexual abuse (ATSA, 2017; Frye, 2019). Research on the impact of motivation to lead an offense-free lifestyle while engaging in residential treatment has not been examined in research.

The purpose of this qualitative study was to explore how treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. Rehabilitation and reform are highly influenced by motivation, which is driven by environmental factors such as the treatment program (Carl et al., 2019). Crime and delinquent behavior are typically episodic and purposive and driven by both internal and external motivators (Howard et al., 2018). Investigating this motivation can help to determine the effectiveness of residential treatment from the offender's lived experience and inform changes to interventions to promote rehabilitation.

In this chapter, I outline my literature search strategy and discuss the theoretical framework for this study. I will then discuss main relevant concepts from the literature including age and motivation, prison-based programs and motivation, residential care and

motivation, and community-based programs and motivation. The literature review includes bodies of work from journals, government websites, state documents, and books.

Literature Search Strategy

To initiate the literature search strategy, several databases were accessed including ProQuest Central, PsycARTICLES, PsycINFO, SAGE journals, ScienceDirect, SocINDEX, and Thoreau. Within these databases, search terms and combinations of search terms including *motivations, offenders, treatment, recidivism, offender motivation, offender treatment and motivation, motivation and offender treatment, motivation to stop offending, offense free lifestyle, sex offender, juvenile sex offender treatment, treatment and offender recidivism, recidivism and motivation, and motivation and desistance* were used. In addition to these databases, the Google scholar search engine was used. These key search terms were used in all databases to generate results. The search was limited to include publications between the years 2016 and 2020. The combination of offender treatment and motivation rendered the most results through this search process.

Theoretical Foundation

SDT is an empirically derived theory of human motivation developed by Edward Deci and Richard Ryan. It focuses on types, rather than just the amount of motivation (Deci & Ryan, 2008). The primary tenet of SDT implies that everyone is inherently motivated; however, the right conditions need to be established to facilitate motivation. Deci and Ryan developed SDT as a method to understand the intrinsic influences of motivation (Ryan et al., 2013). SDT suggests that people are driven by an innate desire to grow and gain fulfillment. This need for growth influences behavior and requires

sustenance (Deci & Ryan, 2008). SDT examines the conditions that elicit and sustain intrinsic motivation. It identifies three basic needs essential to psychological well-being and intrinsic motivation, which are autonomy, competence, and relatedness (Ryan et al., 2013).

To satisfy autonomous or volitional needs, individuals must adopt an internal perceived locus of causality (PLOC). PLOC refers to the interpersonal perception process that occurs when one infers the intentions and motivations of others (Ryan & Connell, 1989). This concept refers to one's perception of the cause of success or failure and is based on individual characteristics. Factors in the environment must promote autonomy for the individual to be intrinsically motivated (Ryan et al., 2013). Competence refers to the ability to do a skill well or possession of knowledge required for a task (Averill & Major, 2020). Based on principles of SDT, feelings of competence occur when tasks promote some control and mastery. Relatedness occurs through the adoption of values and practices relevant within ones' social context providing a sense of connectedness and belonging (Ryan et al., 2013). These three fundamental needs are established as underlying people's inherent tendency towards growth and development. Within the tenets of SDT, an individual must experience all three of these needs, which predict high-quality motivation and well-being (Ryan et al., 2013). Under the premise of SDT, thriving functioning cannot occur in the absence of intrinsic motivation.

The application of this theory focuses on autonomous and controlled motivation and the way that psychological needs strengthen motivation (Deci & Ryan, 2008). Human motivation and personality are influenced by inherent growth tendencies and

innate psychological needs (Deci et al., 1989). It examines people's life goals or aspirations and the social conditions that enhance versus diminish these goals (Deci & Ryan, 2008). This theory relates to the current study by providing context to analyze how functioning can be facilitated or hindered by the social context (Ryan & Deci, 2017). SDT recognizes the distinction between intrinsic and extrinsic motivators and how these can affect internal motivation (Ryan et al., 2013). Intrinsic motivation is derived from completing a task that is enjoyable and interesting, whereas extrinsic motivation is when one is motivated to perform a task by the reward or fear of negative consequence (Ryan et al., 2013).

Prior research has shown that extrinsic motivation such as rewards, deadlines, threats, and evaluations can undermine autonomy (Deci & Ryan, 2001). Research has since shown that extrinsic motivation can become autonomous through the process of internalizing behavioral regulations and their underlying values (Deci & Ryan, 2001). SDT posits that the integration process of extrinsic motivation is imperative as simply taking in extrinsic motivation in the absence of integration will diminish autonomy (Deci & Ryan, 2001). Fully integrating extrinsic motivation allows the feeling of autonomy and promotes more positive outcomes.

Competence is similarly influenced by both intrinsic and extrinsic motivation. Both intrinsic and extrinsic motivational factors can promote feelings of competence; however, relying solely on extrinsic motivation can lead to a decline in competence (Elias, 2018). Individuals intrinsically value understanding how to do more things, and feel a sense of accomplishment and extrinsic reward systems may undermine this

process. For example, if an individual is proud of a perceived accomplishment and their sense of accomplishment is not acknowledged and nurtured, feelings of competence can decline. This is not to say that competence cannot be extrinsically motivated. Individuals may be intrinsically motivated to achieve competence in an area due to the enjoyment of the activity and can also be extrinsically motivated by the positive perceptions that people have of those who are competent in the area (Vinney, 2019).

Intrinsic motivation is more likely to flourish in contexts characterized by a sense of security and relatedness (Ryan & Deci, 2000). Strong links between autonomy, competence, and intrinsic motivation have been demonstrated, and some work suggests that the need for relatedness may also be important for intrinsic motivation. For example, strong attachment or relatedness can enhance intrinsic motivation; however, many intrinsically motivated behaviors are performed in isolation therefore relatedness is not necessary (Ryan & Deci, 2000). Extrinsic motivation can impact relatedness both positively and negatively dependent on the response. Responses providing unconditional positive regard or expressing understanding about how difficult behavior change can be and reflecting the individual's concerns about failure can positively impact relatedness. Responses minimizing the individual's perspective and emotion can negatively impact relatedness.

The major theoretical proposition of SDT suggests that if people are motivated to grow and change by innate psychological needs, they can become self-determined and will function and grow optimally. Major assumptions of SDT include the need for growth drives behavior and autonomous motivation is important (Ryan & Deci, 2017). For

individuals to develop a sense of self and ability to control behaviors, they must be actively driven towards growth (Ryan & Deci, 2017). This drive may assist in gaining mastery over challenges such as sexual offending. SDT focuses primarily on internal sources of autonomous motivation and assumes that a person who is high in self-determination will admit their fault and take action to correct their mistakes (Ryan & Deci, 2017).

SDT has been used in various literature and research analyses to analyze treatment outcomes and recidivism like the current study. SDT's conceptualization of the factors that motivate and thwart its exercise has been used to understand desistance from crime (Petrich, 2020). SDT helps us understand the association between engagement and treatment outcomes and the ways that their process influences motivation (Wild et al., 2016). The application of SDT within treatment settings entails that one should act out of free choice and/or pleasure rather than external obligation or pressure (Van der helm et al., 2018). SDT has been used to hypothesize that treatment methods fulfilling SDT basic psychological needs result in increased treatment motivation enhancing positive outcomes (Smith, 2016; Van der helm et al., 2018).

SDT relates to the present study, as it helps to explain the importance of motivational factors within research and the evaluation of these constructs to evaluate treatment effectiveness (Smith, 2016). When analyzing motivational factors to lead an offense-free lifestyle, it is important to evaluate intrinsic motivation, as this is a significant factor in rehabilitation (Petrich, 2020; Van der helm et al., 2018). Individuals who can sustain recovery have an innate desire to improve (Wild et al., 2016), which

relates to this study. Research supports the existing theory with results demonstrating that individuals with high motivation because of treatment were less likely to reoffend and demonstrate positive outcomes.

Literature Review

Researchers continually search for reasons behind recidivism and ways to reduce general and sexual recidivism. Most sexual offenders in custody will eventually reintegrate back into society with community supervision. The success of this reintegration is highly dependent upon treatment effectiveness. Motivating offenders to change is an important aspect of effective offender treatment. This is based on the notion that all individuals strive to achieve primary goods that are intrinsically rewarding (Ward, 2010). A lack of motivation is a reason that many offenders fail to engage or drop out of treatment, which can lead to an increased risk of recidivism. Research has shown that understanding the factors that influence motivation can lead to effective prevention, assessment, and intervention of offenders (Seto, 2017; Ward, 2010).

The present study includes an exhaustive account of the lived experiences of juvenile sex offenders in North Texas, who participated in this study, to better understand how residential treatment programs impact motivation to lead an offense-free lifestyle. To better understand the current state of treatment programs in relation to offender motivation, I researched age and motivation, prison-based, residential, and community-based treatment programs, and motivation and desistance. Various qualitative studies have been conducted investigating offender motivation to better understand what factors influence motivation. Characteristics such as age and motivation, offender risk factors,

treatment delivery, environmental factors, and relationships with intervention facilitators and community supervisors have been examined to identify the impact on motivation. These variables were chosen based on the consistent themes represented in the literature as influential factors in shaping motivation.

Age and Motivation

Developmental theories identify numerous life changes associated with aging that are tied with reductions in crime (Carl et al., 2020; Scottish Government, 2015). Age is positively associated with motivation (Carl et al., 2019; Carl et al., 2020; McMahon & Jump, 2017). Age-related characteristics in minors, such as weakening of a complex of socially useful needs and the need for self-assertion, are linked to lower motivation (Higley et al., 2019; McMahon & Jump, 2017). Immaturity, lack of self-control, pursuit of excitement, and the inability to attain desired goals through conventional means bring about reduced motivation and offending in young people (McMahon & Jump, 2017). Many offenders are motivated to desist from crime when they come to believe offending is morally wrong, which is an undeveloped characteristic in juvenile offenders (McMahon & Jump, 2017). Additionally, motivation in young people is highly influenced by socio-structural factors including moral immaturity making motivation for desistance less likely (McMahon & Jump, 2017).

Older age and maturation have been identified as significant factors in motivation to desist from crime (Scottish Government, 2015). Older offenders have been found to be more amendable to treatment and demonstrate higher levels of motivation to lead a more law-abiding lifestyle (Weinrath et al., 2019). Several characteristics including

engagement with prosocial institutions, education, training, and employment are more common in older people, which are factors in increased motivation and the adoption of non-offender identities (McMahon & Jump, 2017). Fears of dying in prison, aging out, and “knowing better” are other age-related factors impacting offender motivation for desistance; however, further investigation is needed as much remains unknown (Avieli, 2020; Sorrentino et al., 2018). To further examine ways that offender motivation is impacted, researchers have investigated treatment provided in various settings including prison-based, residential, and community-based programs.

Prison-Based Programs and Motivation

Researchers have evaluated specific tools to analyze the effectiveness of motivation in promoting changes in impulsivity, cognitive distortions, and social information processing (van der Stouwe et al., 2018). Within prison-based programs, researchers have approached sex offending by evaluating how the social climate in correctional facilities affects motivation and rehabilitative treatment (Stasch et al., 2018). Inmate perception of prison climate and the impact on motivation and ways that this interplay influences changes in risk factors have been analyzed (Stasch et al., 2018). Prison-based programs and the effect on offender motivation have been examined in various aspects. Factors including prison climate, offender characteristics and risk, treatment delivery, and responsivity factors within correctional rehabilitation have been analyzed.

Therapeutic Relationship and Motivation

Treatment is an essential process in the path to desistance from crime; however, treatment environment impacts motivation. Several sex offender experts have suggested that therapeutic relationships play a significant role in motivation (Olver et al., 2018; Schwartz et al., 2017; Stasch et al., 2018). The nature and quality of the provider/offender relationship is considered by some to have a profound impact on treatment outcomes. When offenders perceive a positive relationship with treatment providers, attitudes towards treatment improves and motivation increases (Carl et al., 2019; Olver et al., 2018; Schwartz et al., 2017; Seewald et al., 2018; Stasch et al., 2018). This has been examined in multiple studies within prison-based treatment programs. Findings have suggested treatment social climate, including material and emotional conditions, are positively correlated with motivation.

Stasch et al. (2018) examined the relationship between prison climate, treatment motivation, and their relationship on changes in risk factors at a correctional treatment facility in Germany. Surveys and assessments were administered by professionally trained psychologists to 215 inmates and detainees. The researchers found that, except for the fear of stigmatization, all other components of therapy resistance and decreased motivation were related to the overall climate, specifically the therapeutic hold perceived by the inmates (Stasch et al., 2018). Positive perceptions of the therapeutic relationship increase trust in therapists, positive attitudes towards therapy in terms of belief in its effectiveness, and motivation to change (Howard et al., 2018; Schwartz et al., 2017; Stasch et al., 2018).

In addition to dynamics of the provider/offender relationship, the way that treatment is implemented and the quality of treatment impact motivation (Carl et al., 2019; Howard et al., 2018). The files of 161 male offenders between the ages of 15 and 21 years at a prison in Germany were examined, with demographic data, antisocial history, and therapeutic experiences examined (Carl et al., 2019). Additionally, standardized tests were conducted by researchers, who found when treatment utilizes motivational interviewing and early obstacles such as interventions provoking shame or feelings of being overloaded by excessive demands are removed, motivation increases and attrition reduces (Carl et al., 2019). Initial motivation and pretreatment risk prior to onset of treatment was also found to be indicative of sustained motivation (Howard et al., 2018; Carl et al., 2019).

Offender Characteristics and Motivation

Prison-based programs that focus on offender personality traits and risk factors could enhance motivation and decrease program attrition (Brunner et al., 2019; Jaggi et al., 2020). There is convincing evidence within the literature linking risk factors with motivation, treatment dropout, and recidivism. Literature suggests that interventions attuned to offender characteristics could increase motivation and decrease treatment attrition (Brunner et al., 2019; Vollm et al., 2019). Brunner et al. (2019) examined demographic and offense variables, psychopathy traits, clinical risk, and protective factors of 205 incarcerated male offenders admitted to correctional treatment in Germany via survey. Demographic variables included marital status, education, employment prior to incarceration, age at the time of offense, offense type and substance abuse. The

psychopathy checklist-revised (PCL-R), historical clinical risk management-20 (HCR-20), and structured assessment of protective factors for violence (SAPROF) were implemented.

Findings suggest that offenders with high clinical risk and psychopathy demonstrate lower levels of motivation for initiation and completion of treatment and could not be kept in therapy (Brunner et al., 2019). Offenders with a history of substance abuse do not show significant variations in motivation as compared to non-substance abusers; however, the findings corroborate with previous research showing that unemployment, violent offenses, elevated risk, and psychopathy were consistently associated with low motivation and treatment dropout (Brunner et al., 2019). Knowledge of these characteristics can help practitioners select appropriate interventions. However, these studies do not provide consideration of factors beyond the offender's control that may impact motivation (Brunner et al., 2019). Brunner et al. (2019) suggest that future research would benefit from more detailed information on treatment dropout reasons to better understand the relationship between individual characteristics and attrition. Examining the lived experiences of offenders can help to provide insight into specific factors influencing motivation and reoffending (Jaggi et al., 2020).

Other characteristics, such as level of education have been positively connected to motivation for desistance from crime and better outcomes (Case & Hazel, 2020; Jaggi et al., 2020; Link & Williams, 2017). Level of education affects an offender's routine activities and has a major crime preventing function (Jaggi et al., 2020). Correctional education has continued to be one of the most important interventions to reduce

recidivism (Case & Hazel, 2020; Jaggi et al., 2020). Offenders who attend school as part of their treatment are more likely to return to school upon release and experience increased motivation and are subsequently less likely to be rearrested (Case & Hazel, 2020). Leisure education can provide a framework for offenders to think about choice and development of specific skills and confidence that offenders may lack (Link & Williams, 2017). Leisure education can also help offenders realize they can have enjoyable prosocial leisure experiences unrelated to crime increasing motivation to change (Link & Williams, 2017). Link and Williams (2017) studied 281 individuals incarcerated by the Oregon Department of Corrections (ODOC) using a self-administered survey. Findings demonstrated that the more positive the perception of leisure the higher the motivation to improve increasing rehabilitation scoring (Link & Williams, 2017).

Pressure and depression have also been linked to treatment motivation within prison-based programs (Weinrath et al., 2019). Depression has a marked impact on motivation. Offenders within prison-based programs with lower life satisfaction demonstrate lower levels of motivation (Weinrath et al., 2019). Weinrath et al. (2019) randomly surveyed 221 offenders via questionnaire to assess motivation. Three CEST scales or indices were utilized including a 7-item treatment readiness scale, a 5-item treatment needs index, and the 6-item desire for help scale was utilized (Weinrath et al., 2019). Their results demonstrate as offenders get older greater interest in treatment ensues, facilitating motivation to live a more law-abiding lifestyle (Weinrath et al., 2019). Prisoners attending treatment who were also battling depression or dissatisfaction with life demonstrate lower levels of motivation (Weinrath et al., 2019). The way that

treatment is delivered and how it is attuned to these factors can impact the development of motivation.

Treatment Delivery and Developing Motivation

The way that treatment is delivered can impact offender motivation in many ways. Lack of motivation and premature treatment termination can be an indicator of problems in program implementation (Carl et al., 2019). If the program is not adjusted to the offender's learning style offenders might feel overstrained, and consequently experience lower levels of motivation (Carl et al., 2019). Treatment delivery must also take into consideration pre-treatment motivation, younger age, and intensity of substance abuse (Carl et al., 2019). One way to mitigate pre-treatment risk factors is to promote high motivation at the beginning of treatment, specifically in young offenders (Carl et al., 2019). A promising treatment approach is through motivational interviewing.

Motivational interviewing (MI) is a person-centered, collaborative style of communicating between practitioner and client that is often implemented in offender rehabilitation treatment to strengthen motivation to change (Carl et al., 2019; Marshall & Marshall, 2016; Schwartz et al., 2017). MI involves listening reflectively and empathetically, asking open-ended questions, and encouraging client-driven discussion (Lila et al., 2018; Marshall & Marshall, 2016; Schwartz et al., 2017; William & William, 2016). This basic treatment approach elicits change using various techniques such as expressing empathy and working on ambivalence to strengthen commitment to change (Carl et al., 2019). Utilizing MI within treatment delivery is a promising way to enhance

motivation and engagement of offenders by counterbalancing the negative impact of pretreatment factors (Carl et al., 2019; Schwartz et al., 2017).

The defining skills of MI have been widely applied within treatment delivery to successfully address maladaptive behaviors, and encourage positive behavior change (Schwartz et al., 2017). Within a wide range of treatment settings, MI has been associated with improved adolescent and adult patient outcomes specifically in reducing criminal recidivism (Schwartz et al., 2017). Schwartz et al. (2017) administered surveys to 258 probation officers from Indiana counties who participated in a statewide program providing services for juvenile offenders. All participants were sent a recruitment email containing a web link to the survey designed to evaluate how juvenile offenders responded to specific treatment strategies focused on motivational interviewing (Schwartz et al., 2017). Results of the study indicate that treatment strategies that employ professional orientations of care and control rather than punitive approaches effectively promote behavioral change and reduce recidivism (Schwartz et al., 2017).

Climate is one of the most influential components shaping motivation to change and improve (Howard et al., 2019; Jones & Neal, 2018; van der Helm et al., 2018). Within the literature, the success of residential treatment programs is attributed to how well the program engages the offender (Howard et al., 2019; Jones & Neal, 2018). The intensity of the treatment should be tailored towards the offender dynamic risk factors and delivery should be conducive to change (Howard et al., 2019; van der Helm et al., 2019). When programs do not accommodate these specific factors motivation to change and reduce offending is low. Treatment delivery that is flexible and allows for

accommodations and open-ended therapeutic format gives offenders the opportunity to fully engage (Howard et al., 2019). Growing evidence also reflects that therapist's characteristics directly impact the treatment climate. A therapist who is positive and focused on promoting a therapeutic alliance positively impacts offender retention and motivation in treatment (Howard et al., 2019; Jones & Neal, 2018; van der Helm et al., 2019).

Treatment delivery should be matched to the risk level of the offender (Basanta et al., 2018; Howard et al., 2018; Sowden & Olver, 2017). The success of treatment programs is predicated on the ability of treatment delivery processes to individually engage offenders (Basanta et al., 2018; Howard et al., 2018). Consistent with the risk-need-responsivity model, researchers have found if you increase motivation, you increase success (Basanta et al., 2018). The risk principle asserts that criminal behavior can be reliably predicted therefore treatment should focus on higher risk offenders, and tailoring the intervention to the learning style, motivation, abilities, and strengths of the offender (Basanta et al., 2018).

Treatment should address dynamic risk factors that have a causal relationship with offending and focus on promoting change (Basanta et al., 2018; Howard et al., 2018). Therapists who are warm, nonconfrontational, directive, and empathic promote offender engagement and the therapeutic alliance (Howard et al., 2018). Research suggests that high risk offenders receive a greater range and intensity of services within treatment and lower-risk offenders receive fewer services (Basanta et al., 2018; Howard et al., 2018; Sowden & Olver, 2017).

Howard et al. (2018) evaluated 652 offenders in New South Wales, Australia, between 1999 and 2015, to understand how treatment delivery factors contribute to offender engagement and motivation. Measures were obtained from official custodial data sources including the Offender Integrated Management Systems (OIMS) and Corrective Services NSW (CSNSW). Case file notes were obtained to collect data on clinical variables such as pretreatment psychometric scores (Howard et al., 2018). The results of the study indicate treatment delivery techniques can have a profound impact on offender motivation and treatment outcomes. The findings were consistent with previous studies indicating that nonconfrontational, warm approaches by therapists within the delivery of treatment are most conducive to treatment engagement in sex offenders (Howard et al., 2018). The research also highlights the importance of tailoring treatment to the specific responsivity of the target population.

Responsivity Variables and Motivation

The responsivity principle states that the delivery and tailoring of services, including how to treat offenders, is typically conceptualized in terms of general and specific responsivity (Basanta et al., 2018; Sowden & Olver, 2017). Specific responsivity means that correctional programs should maximize offenders' receptivity and engagement by taking advantage of existing prosocial traits or counteracting any traits that hinder participation (Higley et al., 2019). The delivery of correctional interventions tailored to offender traits such as gender, race, and age can increase motivation to change and effectively impact success (Higley et al., 2019). Incorporating general and specific responsivity factors can enhance program effectiveness (Higley et al., 2019).

Services are most impactful when matched to the unique needs of the offender, and when they are associated with larger treatment effects corresponding to reductions in recidivism (O'Brien & Daffern, 2017; Sowden & Olver, 2017). Sowden and Olver (2017) examined the role of offender responsivity variables in treatment engagement and recidivism. Participants included 185 federally incarcerated males serving time for sex offenses at the Clearwater Sex Offender Treatment Program at the Regional Psychiatric Center between 1998 and 2001. Three study measures included the Static-99R, Violence Risk Scale-Sexual Offender Version, and Treatment Readiness, Responsivity, and Gain Scale: Short Version. Consistent with specific responsivity, the results indicated that higher levels of education, cognitive ability, reading achievement, and employment history were associated with increased motivation and treatment engagement (Sowden & Olver, 2017).

Higley et al. (2019) similarly evaluated responsivity variables and the impact on offender motivation. Data was collected from 2,417 incarcerated male offenders who were admitted to Canadian federal institutions between 2006 and 2008. Correctional programming was delivered to participants in a group setting with a maximum of 10 to 12 participants per group (Higley et al., 2019). The programs were offered at a low, medium, or high intensity with assignment determined by the participants risk for recidivism. The 17-item Generic Program Performance Measure (GPPM) interview was administered, and a 5-point rating scale used to rate each participant based on performance, effort, and motivation (Higley et al., 2019). The results indicate that programs tailored towards the specific responsivity of participants were associated with

improved outcomes. Additionally, older participants demonstrated higher motivation to change.

Limitations to these studies include the inability to predict other variables within the population influencing motivation. The studies also failed to assign participants to specific interventions or analyze individual perceptions of treatment effectiveness. Additionally, information related to the types of interventions that increase or impact motivation is not discussed, which is important to inform future interventions. Future research would benefit from exploring specific process variables and ways they impact treatment performance and motivation. The current study will address this gap by evaluating firsthand perceptions of participants to identify effective interventions. To further evaluate ways treatment interventions and motivation have been examined residential treatment programs were also evaluated.

Residential Programs and Motivation

Treatment for adolescents with sexually maladaptive behaviors has focused on cognitive distortions/thinking errors to obtain greater understanding (Gerhard-Burnham et al., 2016). Within residential programs researchers have approached recidivism by evaluating the impact of treatment delivery and therapist characteristics on motivation (Gerhard-Burnham et al., 2016; van der Helm et al., 2018). Specifically, studies have investigated program variances and the impact on treatment outcomes, including program attrition (Gerhard-Burnham et al., 2016). Gerhard-Burnham (2016) evaluated 652 offenders in a New South Wales custody-based intensive treatment program. Measures of

the study were obtained from official custodial data sources including offender demographics and type of sexual offending.

Relationships between predictor variables and likelihood of program completion were analyzed using univariate tests followed by multivariable logistic modeling. The results of this study indicated that manipulation of treatment delivery factors can have a significant impact on motivation and reoffending outcomes (Gerhard-Burnham et al., 2016). The researchers reported that interventions tailored to the specific responsivity principle, such as ineffective management of emotions decrease the likelihood of offenders dropping out or being discharged from the program. The findings were also consistent that warm, rewarding, and direct therapists can facilitate treatment engagement and increased motivation (Gerhard-Burnham et al., 2016).

Van der Helm (2018) evaluated 179 adolescents in 12 Dutch secure residential youth care facilities and 9 youth correctional facilities. Participants completed a questionnaire assessing residential group climate including perceptions of strictness and control, unfair and haphazard rules, and lack of autonomy at the living group (van der Helm, 2018). Treatment motivation was assessed utilizing an 11-items version of the validated Adolescent Treatment Motivation Questionnaire (ATMQ). The results of the study showed that relational support and growth showed stronger correlations to increased motivation than atmosphere and repression (van der Helm, 2018).

Community-Based Programs and Motivation

Within community-based programs researchers have approached sexual offending by analyzing how offenders experience treatment within these programs, including their motivation and ability to participate and progress on treatment targets (Hatcher & Roberts, 2019; Mullins & Kirkwood, 2019; Watson et al., 2016). Factors such as shame and denial, the impact on motivation, and the ways that these factors reduce treatment commitment have been analyzed (Hatcher & Roberts, 2019; Mullins & Kirkwood, 2019; Watson et al., 2016). Researchers have examined responsivity factors, including cognitive ability, personality, and mental health issues (Higley et al., 2019; Jung & Dowker, 2016). Self-efficacy constructs and the offender's management of emotional responses related to their offending has been linked by researchers to motivational levels to complete programs (Hatcher & Roberts, 2019). Personal characteristics such as age, risk of reconviction, and index offense have been utilized to compare motivational levels (Hatcher & Roberts, 2019). Within residential treatment settings, researchers have approached sexual offending similarly, and focused on attempting to identify individual needs, and how allocating resources according to these needs can improve motivation and treatment outcomes (ter Beek et al., 2017). Approaches include examining psychological needs such as autonomy, competence, and the relation to treatment motivation (van der Helm et al., 2018).

Autonomy, competence, and relation to treatment all influence motivation to desist from crime in many ways. When the treatment environment satisfies the need for autonomy, individuals tend to have a positive future prospect increasing motivation

towards desistance (Doekhie et al., 2017). Realistic autonomy and optimism include being aware of obstacles and challenges the individual will need to overcome, and confidence in ability (Doekhie et al., 2017). Perceptions of self and ability are pertinent for motivation to move away from crime. It is important for individuals to feel that they can act on their own and possess the skills to successfully maintain desistance.

Competence or the ability to do something successfully or efficiently is an important aspect of desistance. Competence provides an important source of motivation as it allows offenders to believe in their ability to maintain changed behavior. Individuals are more likely to experience motivation when psychological needs for competence are met (Petrich, 2020). Conditions that support competence include those that provide clear structure, boundaries, expectations, and opportunities for the development of skills (Petrich, 2020). When offenders experience competence the belief in their ability to desist and navigate social problems in the community increases.

Hatcher and Roberts (2019) found that even after controlling for differences in risk, group membership could not be predicted. The findings provide evidence that program completers had higher levels of preprogram confidence in their ability to participate in the program than those who were not able to finish treatment. Addressing pre-program motivation and attempting to remove obstacles is presented as a factor for success (Hatcher & Roberts, 2019). Mullins and Kirkwood (2019) found that practitioners can use concepts such as unhelpful thinking styles to manage how offenders respond to individual experiences and invite them to rewrite narratives that are more helpful.

Interventions that focus on strengthening cognitive ability allow the offender to separate the behavior from self and promote future desistance by allowing the person to focus on specific changes in behavior (Mullins & Kirkwood, 2019). Additionally, providing subtle, empathic, and supportive responses can build motivation and instill hope towards positive change. Watson et al. (2016) found that participants who felt forced into treatment did not trust interventions. This is directly connected to personality and the offenders need to not feel they 'have' to engage. Negative experiences within treatment were associated with minimal participation and conflict with facilitators. The results suggest that personality is a more significant factor in treatment experiences.

Much of the literature has focused more on the offender rather than the behavior, and the psychosocial context for which these behaviors occur, which has demonstrated a weakness in the approach to recidivism (Frye, 2019; van der Stouwe et al., 2018). The literature has also failed to examine the complex interaction of treatment motivation and other individual and environmental factors (Erofeeva et al., 2019; van der Helm et al., 2018; van der Stouwe et al., 2018). Individual factors such as how age influences motivation needs attention within research of rehabilitative factors (Higley et al., 2019).

Individual factors such as other criminogenic need domains and their association with motivation to stop offending are not represented in the current studies presenting a weakness (O'Brien & Daffern, 2017). Further examination of research approaches has revealed that tools utilized to examine motivation may be too narrow (Hatcher & Roberts, 2019). Many tools predict engagement with program contents, such as identifying those who will gain most from their participation in the program but are less useful in

identifying those at risk for failing to engage in program interventions (Hatcher & Roberts, 2019). Tools such as the Corrections Victoria Treatment Readiness Questionnaire (CVTRQ) have been utilized to assess levels of internal treatment readiness including motivation however the tool is narrow and does not predict factors that may influence motivation (Hatcher & Roberts, 2019).

Offender recidivism is an ongoing issue and primary focus within rehabilitative efforts. Considerable research has focused on identifying what factors affect recidivism which includes characteristics such as motivation. Motivation research is not a new construct; however much remains to be learned (Hanson et al., 1998). Specifically, the numerous factors that impact motivation within varied treatment settings remain questionable. Researchers have approached the problem by analyzing patterns, characteristics, and the treatment needs of sex offenders (Frye, 2019). Early literature details numerous descriptions of the various treatment programs for juvenile offenders and promotes specific protocols for treatment or the context for which treatment was provided (Frye, 2019).

Studies have demonstrated that treatment delivery and environment, offender characteristics, and relationship between treatment facilitators and offenders significantly impacts motivation (Frye, 2019; Helm et al., 2018; Howard et al., 2019; ter Beek et al., 2017). As research evolves, the focus has shifted from what works in general to a more specified approach analyzing what works under what conditions and for whom (van der Helm et al., 2018; van der Stouwe et al., 2018). This shift has been influenced by numerous sex offender studies demonstrating the need to address the unique patterns of

thoughts, feelings, and situations that lead to recidivism (ATSA, 2017). Additionally, the limitations identified from numerous studies has prompted the need to focus on offender lived experiences and perceptions of treatment to improve motivation. In addition to investigating how treatment delivery influences motivation, researchers have specifically analyzed motivation and desistance.

Motivation and Desistance

Desistance is complex, nonlinear, and varies from person to person (Abrah, 2018; Petrich et al., 2020; Terry & Abrams, 2017). Countless researchers have discussed the affiliation of motivation, desistance, and ways that changes in motivation impact desistance (Abrah, 2018; Petrich et al., 2020; Terry & Abrams, 2017). Motivation to change is pivotal to desistance, influencing the need to investigate factors impacting offender motivation. Identifying these factors can help to inform interventions to reduce offending behavior (Farmer et al., 2016). Researchers have taken various approaches to explain this correlation by investigating the impact of perception of individual control over challenging factors, lack of readiness, labeling, and stigma on motivation and desistance.

Prior research has provided insight into the steps involved in criminal desistance; however, more research is needed to understand how motivation influences day to day decisions (Terry & Abrams, 2017). Desistance, specifically amongst young adults, is not a straightforward process and involves multiple, overlapping factors (Terry & Abrams, 2017). Identifying how factors such as internal characteristics, environmental contexts, and opportunities for change impact motivation to desist is imperative (McMahon &

Jump, 2017; Terry & Abrams, 2017). Within the literature, studies have approached motivation and desistance by researching how individuals make decisions about crime and situations that place them at risk to engage in criminal activity, and ways these decisions and motivational factors work together to influence desistance (McMahon & Jump, 2017; Petrich et al., 2020; Terry & Abrams, 2017).

Prior research shows that young offenders are less future-oriented than non-offenders, and that higher future orientation is associated with lower levels of criminal behavior (Petrich et al., 2020). Recent work by Petrich and Sullivan (2020) indicates that individual increases in future orientation are positively associated with motivation to desist and reductions in antisocial behavior. Although these studies indicate correlation between motivation and desistance, they fail to illuminate factors that account for variability in motivation. Existing literature highlights the influence of internal and external factors that contribute to desistance among young offenders; however, few studies focus on ways that lived experiences shape motivation and decisions about criminal activity (Terry & Abrams, 2017). Desistance research finds that even after one makes the internal decision to desist ongoing motivation is necessary to maintain nonoffending identities and behaviors.

In consideration of these components, Petrich et al. (2020) examined how changes in motivational factors were associated with changes in future-oriented behavior. Specifically, the study sought to investigate how environmental and developmental factors, and other self-regulatory capacities impact motivation and involvement in criminal activity. Serious young offenders were followed over a 7-year period from

adolescence to young adulthood during the Pathways to Desistance study. Baseline data from 1,318 individuals between the ages of 14 and 18 was collected shortly after their adjudication in either the juvenile or adult system in participant's homes, or a facility if the participant was confined. Data collection sessions were approximately two hours in length via self-report utilizing laptop computers. The content of the self-report measures focused primarily on ways that the environment and developmental factors such as age and socialization influence motivation, and the impact on future desistance.

Key predictors influencing motivation to desist were analyzed including aspirations, expectations, emotional regulation, resistance to peer influence, and impulse control. It was found that within-individual changes in aspirations and expectations were associated with positive future orientation to desist (Petrich et al., 2020). The study demonstrates individual motivation to accomplish goals supports desistance. Although the study identifies motivational factors promoting desistance, it fails to provide insight into ways that other variables such as age and development may impact motivation and desistance. The study also examined serious adolescent offenders from two major cities and the results may not be generalizable to all adolescent offenders or to adolescents broadly. Sex offenders were not included in this study and offense categories included violence against persons, robbery, burglary, offenses against vehicles, other theft offenses, fraud and forgery, criminal damage, drug offenses, and other miscellaneous offenses. Random sampling or sampling from a nationally representative sample can improve this limitation.

Other researchers have analyzed how individual perception of ability and development of prosocial relationships impacts motivation and desistance. Literature suggests that desistance is less likely when offenders are unable to dissociate from elements of their offending past and face condemnation from others (Abrah, 2018; McMahon & Jump, 2017; Terry & Abrams, 2017). Terry and Abrams (2017) analyzed how perception of control over challenging factors such as appearance, feeling marked, and associations with others influences motivation and desistance. Similarly, Abrah (2018) investigated ways that negative reactions from friends and society work to change or reinforce motivation and offending behavior. Terry and Abrams (2017) utilized a narrative approach exploring the life histories, desistance processes, and transition to adulthood of 15 young men ranging in age from 19-24 recruited via purposive sampling. Data was collected via two semi-structured interviews within 1 to 2 months of each other. Research questions were structured to investigate participants' decision-making process, strategies used to navigate challenges to remaining out of jail or prison, and ways that chosen strategies influence desistance.

Major findings of the study indicated that micro-level decisions, which are related to internal motivation, can facilitate positive behavioral changes, and choices promoting desistance. Participants who located their motivation to desist from crime in early adulthood made a series of choices in their day to day lives that helped them to refrain from offending. Participants who focused on their goal of desistance were better able to employ strategies that helped them avoid relapsing into old behaviors than participants who were mostly concerned with their present lives. The study highlights the relationship

between perceptions and decision making around crime, and the notion that lifestyle changes occur with careful consideration of the detailed aspects of their lives.

Abrah (2018) utilized semi-structured interviews with 23 juvenile delinquents attempting to gain insight into how the negative reactions from family, friends, and society reinforce offending behavior. Participants were broken into two groups namely those who have continued to engage in criminal activity and those who were in the desistance process and living normal lives. The interviews took over 12 months and lasted for a maximum of 60-90 minutes for both groups. The critical questions were to determine how interactions with family, friends, and other social groups modified the offending paths of the participants. The results indicate that participants were motivated to desist from crime in the absence of labeling. Being in environments with neighbors and affiliates who did know of their criminal past allowed participants to free themselves of stigma and focus on a life free of crime (Abrah, 2018). Conversely negative reactions from family and community members redirected offender's paths into deviance reducing motivation to desist.

While most of the literature investigates motivation and desistance in offenders who have been released from custody or serving non-life sentences, few studies explore motivation to desist in offenders serving indefinite sentences (Abrams et al., 2020). Theories of desistance are highly rooted in the assumptions that individuals will eventually rejoin society. This factor provides a built-in context to frame motivation as offenders are viewed as more able to find hope. Extant literature shows that "lifers" can experience motivation to desist, however this research is not robust.

Abrams et al. (2020) aimed to explore the individual experiences of offenders facing life imprisonment through in-depth interviewing to understand how motivation to desist is experienced in the absence of hope for release. Ten participants were recruited through presentations at half-way houses in Los Angeles. Two interviews conducted in private meeting rooms were comprised of open-ended questions lasting between 90-160 minutes. Like studies of non-lifer motivation and desistance participants report shedding their criminal identity as influential to a behavioral shift towards desistance (Abrams et al, 2020). Participants disclosed ways that thoughts of how they would want to lead their life if they were to be released allowed for an awakening and increased motivation to desist. Other common themes included being useful and proving worth as factors increasing motivation.

The results of these studies demonstrate that desistance from crime is not a linear process, and includes a series of constant, and often stressful decision-making steps requiring motivation. Participants in group 1 of Terry and Abrams (2017) study identified their path towards desistance beginning as they transitioned to adulthood, indicated that age may influence motivation to desist. Group 2 explained in many cases that they were not ready to reduce or eliminate their involvement in crime and demonstrated difficulty making choices to minimize their risk of being involved in crime. This suggests that the offenders lacked internal motivation which has been described as a precondition to desistance (Terry & Abrams, 2017). Feeling a level of control over challenging factors such as changing appearance, feeling marked, and associations with others increases motivation to overcome desistance barriers (Abrah, 2018; Terry & Abrams, 2017).

Autonomy to make day to day decisions such as changing their hairstyle and travelling down a different set of roads was positively correlated with internal motivation to change.

This study conducted by Terry and Abrams (2017) is limited due to it capturing just a snapshot view of these young men that does not reflect their ultimate desistance. The findings contribute to the overall understanding of motivation and desistance; however, it is difficult to ascertain all the factors influencing desistance. The study also presents a potential bias for participants in the study who volunteered to receive reentry support, as they present as potentially more motivated than others from the same background or environments to want to be successful. Additionally, the study fails to categorize the notion of desistance and what participants consider to be criminal behavior.

Review of Research Methodology

Research has shown that the context in which treatment takes place is an important aspect in the development of motivation (Duncan et al., 2020). Various researchers have approached recidivism by analyzing offender motivational factors. Phenomenological approaches are common within these analyses as they provide access to offender perspectives and experiences. Various researchers have approached the problem of sexual offending by assessing the motivation of offenders within various treatment settings, including residential treatment, prison-based settings, and outpatient settings. Within residential treatment settings researchers have utilized phenomenological approaches to evaluate ways that supervision, group climate, and treatment protocol impact motivation (Campbell, 2019; Helm et al., 2018; ter Beek, 2017).

Within prison-based settings researchers have evaluated specific responsivity features that moderate the relationship between risk and rehabilitation and motivational influences (Higley et al., 2019). Researchers have additionally utilized phenomenological approaches to analyze offender perspectives of prison climate, and the impact on dynamic risk factors and risk reduction (O'Brien, Daffern, 2017; Stasch et al., 2018). Community based programs are highly represented within the literature with offender lived experiences in community supervision, social skills training, sex offender programs, and the relation to motivation analyzed (Campbell, 2019; Cooper & Holgersen, 2016; Mullins & Kirkwood, 2019). The methods utilized in these studies are consistent with the scope of the current study.

Summary and Conclusions

Based upon a review of the literature various factors influence motivation and desistance. Major themes such as age, offender risk factors, treatment delivery, environmental factors, relationships with intervention facilitators and community supervisors, lack of readiness, and stigmas all consistently emerge within the literature. It is well known that motivation and desistance are correlated and in the absence of motivation reoffending is more likely to occur. Many offenders age out of criminal activity and demonstrate an increased motivation to desist simply from age and maturation. Offender risk can influence amendability and compound treatment if interventions are not tailored to address these factors. Treatment delivery focused on individual risk factors that accounts for environmental factors and therapeutic relationships more positively impact motivation to desist. Additionally, the literature has

demonstrated that lack of readiness and stigmas are a significant factor in motivation and desistance.

Chapter 2 focused on an extensive review of the literature and the correlation between motivation and desistance. Various studies examining this relationship and findings of the researchers were presented including the strengths and weaknesses of approaches to this phenomenon. From the literature review a current gap in knowledge related to motivation and desistance emerged. Chapter 3 presents how I will address this gap including an explanation of the proposed research design and rationale, and role of the researcher. The methodology for the current study is outlined identifying the population of choice and sampling strategy. Data collection techniques, instrumentation, and recruitment are detailed, including the data analysis plan. Finally, the ethics of the study are addressed inclusive of the strategies to establish credibility, transferability, dependability, and confirmability.

Chapter 3: Research Method

Sexual offending is a serious problem, with significant impact on victims, families, and society. Residential treatment programs were created to provide a treatment option for sex offenders in preparation for reintegration. The literature related to characteristics, patterns, and the impact of motivation on treatment outcomes has come a long way; however, there is much to learn (Frye, 2019). Literature on the impact of motivation in treatment dates back more than 20 years, but what we know about juveniles pales in comparison to what we know about adults, despite juvenile sex offenses accounting for 20% of all sexual assaults and 50% of all childhood sexual abuse (ATSA, 2017; Frye, 2019). However, the impact of motivation to lead an offense-free lifestyle during residential treatment has not been examined in research.

The purpose of this qualitative study was to explore how treatment providers perceive juvenile sex offenders experience motivation to lead an offense-free lifestyle while engaging in residential treatment. Rehabilitation and reform are highly influenced by motivation, which is driven by environmental factors, such as the treatment program (Carl et al., 2019). Crime and delinquent behavior are typically episodic and purposive and driven by both internal and external motivators (Howard et al., 2018). Investigating this motivation helps to determine the effectiveness of residential treatment. The original plan was to survey juvenile sex offenders receiving residential treatment, but the review board was concerned about that plan. As a result, I changed the methodology and interviewed treatment providers working with juvenile sex offenders at a residential treatment facility.

In this chapter, I outline the research design and rationale, role of the researcher, and methodology, explaining the participant selection logic and instrumentation. Content validity within the application of these instruments is presented with an explanation of any warranted modifications. The data analysis plan, including the use of software and coding procedures, is discussed. Finally, issues of trustworthiness and ethics are analyzed.

Research Design and Rationale

I asked the following research question to gather the perceptions of the participants in this study: How do treatment providers perceive juvenile sex offender motivation to stop offending while engaging in residential treatment?

The central phenomenon or core idea explored in this qualitative study was how treatment providers perceive juveniles or individuals under the age of 18 experience motivation to lead an offense-free lifestyle while engaging in residential treatment.

Qualitative Method

Qualitative research is interpretive and is used to understand concepts or opinions. It is based on lived experiences, captures people's opinions and emotions, and investigates meanings assigned to behaviors and experiences (Rahman, 2016). Qualitative research is exploratory and is designed to explain the how and why a particular behavior or phenomenon operates as it does within a particular context (Rahman, 2016). By its nature, qualitative research is far more experiential than quantitative research and can capture changing attitudes within a target group and explain phenomena in a way that numbers alone are unable to reveal (Rahman, 2016). I not only

seek to expand on the knowledge of motivation and the influence on offending behaviors, but also to understand themes and perceptions that cannot be gathered using a quantitative approach.

Rationale for Using Phenomenological Approach

The study used a phenomenological research tradition. The qualitative phenomenological approach is uniquely positioned to help researchers learn from the experiences of others (Neubauer et al. 2019; Smith & Thomasson, 2005). Research involves the detailed study of a subject to discover meaning or obtain a new understanding of the subject (Neubauer et al., 2019). Obtaining an understanding of the experiences of others is often required for this to be accomplished. The focus of this study was to understand what is experienced and how it is experienced by the participant, which is the goal of phenomenology. By examining an experience as it is subjectively lived, new meanings can be gleaned to inform, or re-orient, how we understand the experience (Neubauer et al., 2019).

Phenomenological research provides various advantages to understanding how a phenomenon is experienced as opposed to how the event exists beyond the perception of the people. Perceptions, perspectives, and understanding are all analyzed to create an understanding beyond viewpoints obtained from a macro level (Neubauer et al., 2019). Humans by nature have individual traits and different perspectives when it comes to certain events. The purpose of phenomenology is to clarify and make sense of how these people with differing traits understand experiences (Neubauer et al. 2019; Smith & Thomasson, 2005), which can provide deeper and more insightful results. This can add

levels of detail that can contribute to the sureness of the statistics to broaden our understanding of motivation and desistance.

Other qualitative designs that could have been considered to address the research question include narrative research, grounded theory, and case studies. Narrative research focuses on people's narratives about a set of events. This form of inquiry may give unique insight into procedural and impalpable aspects of the participant experience, including the pros and cons from their perspective (Haradhan, 2018). This approach can be beneficial to the current study by allowing for unique, context-based evaluations revealing participant perspectives of how they experience motivation (Haradhan, 2018). Narrative research can reveal cause and effect from the participant perspective; however, it does not focus on themes which are important for the current study.

Within grounded theory, data are collected and analyzed, and then a theory is developed (Haradhan, 2018). It produces thick descriptions and can help to determine how the phenomenon happens. By observing the participants, including the natural social processes and interactions, and conducting interviews, a theory regarding how motivation is influenced during the residential treatment process can be obtained. This method tends to produce a large amount of data, which can be difficult to manage and does not always result in the development of a theory (Haradhan, 2018). The nature of grounded theory is to reveal high level concepts and theories that are not specific to a particular participant or setting limiting generalizability (Haradhan, 2018). This is an additional reason this method was not chosen for the current study.

Case studies are in-depth examinations of people or groups of people. Researchers collect data about participants using direct observations, interviews, protocols, tests, and examinations etc. and turn it into useable data (Haradhan, 2018). This method provides a rich source of qualitative information and presents the opportunity to research rare situations. Like the disadvantages of other qualitative designs, the case study takes longer to analyze the data. Case studies also present issues of reliability, validity, and generalizability; therefore, it was not chosen for the present study.

Role of the Researcher

Maintaining the Integrity of Research

As both a participant and observer in the implementation of the study, my key role was to maintain the integrity of the research. Credibility, dependability, and transferability, which influence research integrity, rely on the performance of the researcher (Levitt et al., 2017). This includes all aspects related to the preparation and implementation of the study. Efforts to maintain the integrity of the research included monitoring and reducing bias, developing competence in methods, collecting and analyzing data ethically, and presenting findings competently.

Monitoring and Reducing Bias

Bias is a source of error that threatens the validity, reliability, and utility of studies (Levitt et al., 2017). Bias is most drawn from the quantitative research paradigm. However, concepts of rigor and trustworthiness are compatible with the underpinnings of qualitative inquiry (Galdas, 2017). When a qualitative researcher has a conversation with a participant, their ideas about the topic, hope for the study, and dynamics inherent in

human interaction can be distracting and distort what is heard (Capella University, n.d.; Levitt, 2017). Qualitative researchers encounter confirmation bias due to the quest to find meaning and can interpret results based on what they are disposed to see (Capella University, n.d.). For example, in working with juveniles, I have identified that motivation to stop offending is highly influenced by the therapeutic alliance and rapport built between practitioner and patient. Due to this experience, I possess a bias that juveniles who have experienced this rapport will report higher motivation as a result.

Researcher bias is a common concern within phenomenological approaches as they aim to uncover what a lived experience means to the individual (Peat et al., 2019). How the researcher's prior conceptions interact with new experiential encounters is significant and influenced by hermeneutics (Peat et al., 2019). Hermeneutics guide the interpretation of individual accounts and recognize that researchers have preconceived ideas and experiences that they bring to the study (Peat et al., 2019). Making sense of what has been shared requires close engagement with the data, which transforms the researcher in some way (Peat et al., 2019). Meaning is obtained through a fusion of participant and researcher perspectives considering individual experiences that cannot be separated.

In addition to recognizing the threat, it is important to employ mechanisms to minimize bias (Galdas, 2017). This begins with the critical examination of my personal role in the formulation of questions, data collection, recruitment, and choice of location of the study (Galdas, 2017). Complete separation from the process or result is impossible. Therefore, I was both transparent and self-reflective about the methods by which data

were collected, analyzed, and presented. This process included being self-reflective about personal preconceptions, relationship dynamics, and analytic focus (Galdas, 2017).

Additionally, I was forthcoming about how bias was addressed, including an explicit description of how I remained conscious of previous knowledge and predispositions and how I controlled the intrusion of bias. This is explained further within the research methodology and began with developing competence in the methods to be used.

Developing Competence in Methods

As a participant in the implementation of the study, the researcher is responsible for implementing skills correctly (Capella University, n.d.). Competence in explaining the study without biasing the potential participants, conducting interviews properly, making appropriate field observations, handling of data, and analyzing and interpreting data per the research design are all roles of the researcher in developing competence in methods (Capella University, n.d.). The first step in this process is an examination of personal competence. This was done with the assistance of my committee. Additionally, I conducted practice interviews while continuing ongoing training workshops in the research design. These workshops provided a frame of reference in the collection and analyzing of data.

Collecting and Analyzing Data

Collecting and analyzing are major roles of the researcher as both participant and observer. The researcher is responsible for determining how to collect data based on the chosen population and maintaining the integrity of this process (Capella University, 2017). For example, with the chosen research site, consideration of potential interruptions

while interviewing providers and reframing of questions were all roles of the researcher. I also took care to ensure that the way that data were collected and analyzed was not too closely aligned with any personal agendas (Galdas, 2017). Acknowledging that I am a novice and effectively using committee members was significant. This collaboration also assisted in the presentation of findings.

Presenting the Findings

Research is not complete until the findings are presented. In the presentation of findings, the key role of the researcher is to respond to the problem presented. Data should be presented that enable the researcher to answer the research question, rather than simply offering raw data (Galdas, 2017). Screening data gathered is important to avoid using unrelated data, which may confuse the audience (Capella University, n.d.). I present data patterns with explanations to highlight the conclusions of the research findings. Understanding that the findings may not be quickly or properly understood is imperative, and the researcher must demonstrate competence in writing (Capella University, n.d.). Additionally, I used a well-defined structure that allows for easy comprehension and supports understanding.

Professional Relationships

Within qualitative research, the relationship between the researcher and participant is crucial. It was important for me to consider how my role as a fellow clinician and treatment provider could impact and influence the responses provided. Researching participants who are employed by a facility mandated under similar state guidelines could have influenced the perception that their responses could impact their

employment. For example, participants may have had reservations about being forthcoming about issues at their facility due to the concern that they may be reported to state. To mitigate this potential concern during participant recruitment, and when I obtained consent, I explicitly explained that participation will not result in any penalty or benefit. There is no prior relationship with the participants or administration at the facility that presented any potential conflict of interest that required mitigation. What can curtail these efforts is a lack of methodology (Neubauer et al., 2019).

Methodology

Participants

The participants for my study were treatment providers of juvenile sex offenders receiving residential treatment.

Sample Selection

Initially, permission was requested from the Institutional Review Board of Walden University. Upon receipt of this approval, I began searching for treatment providers of juvenile sex offenders receiving residential treatment. Participants were recruited from a residential treatment program by emailed flyers. Participants were asked to contact me directly via phone or email if they wished to participate in the study.

Criterion sampling was the method used in the selection of participants. This form of purposeful sampling involves studying people based on the objective of the study who have experienced the phenomenon (Palinkas et al., 2015). The main target was not to represent the entire population, but to get sufficient information on sex offender motivation to stop offending during residential treatment. Criterion sampling helps

researchers to get more information from a smaller number of individuals, which is conducive to the design of the current study.

Selection was based on the following criteria: participants must be (a) over the age of 18 and (b) treatment providers of male juveniles receiving residential sex offender treatment. Persons who did not meet these criteria were excluded from participation. Exclusions were not made based on race, ethnicity, religion, sexual orientation, or disability. Participants were to be known to meet these criteria, as it is consistent with the services provided and requirements for employment at the research site.

Phenomenological studies are conducted on small sample sizes, and the aim is to locate a homogenous group to examine convergence and divergence. Homogenous samples with focused study objectives, and semi-structured interview guides may reveal basic themes at only six interviews, and saturation of themes by 12 interviews (Hennink et al., 2016). During this study, the progression of themes was tracked to monitor when new themes emerged, and thematic exhaustion obtained. Saturation was assessed based on the extent of theme development and assessed by both code and meaning (Hennink et al., 2016). Code saturation was determined once issues identified were fully understood and meaning saturation once determined that no further dimensions, nuances, or insights from the data can be found (Hennink et al., 2016). I stopped interviewing once I was confident that I had reached saturation. Data from participants were collected, analyzed, and coded manually.

Instrumentation

Open-ended, semi-structured interviews, comprised of at least 14 questions related to the overall research question, were conducted with participants. Interview questions were formulated to investigate participant perception of offender autonomy, competence, and relation to treatment, and how these factors influence motivation to desist from crime (Hatcher & Roberts, 2019; Mullins & Kirkwood, 2019; Watson et al., 2016). Consistent with the format of qualitative research I was the primary research instrument. All interviews were conducted with the participants via Zoom.

Interviews were initiated by introducing the topic to the participants in a consistent format. Participants were asked open-ended questions with no response options, and given the opportunity to share information in their own words, and in their own way. The interviews were audio recorded utilizing a password protected smart device and lasted about an hour. Responses were documented as given and member checking was performed to address over-representation, omission, or under-representation to establish content validity (Pandey & Chawla, 2016). Participants were provided a short document to review their interview, add more information, and edit what they said to ensure no assumptions were made of the responses provided. When appropriate, follow up questions were initiated. Field notes were maintained documenting observations including body language and the environment, whether interview questions were working well, and any connections between participant responses.

The chosen qualitative method of semi-structured interviews is considered appropriate for establishing content validity as they are most likely to elicit answers to the

research questions (Pandey & Chawla, 2016). The use of open-ended questions was to capture sentiments of respondents in language easily comprehended by them and ensure their own thoughts are captured (Pandey & Chawla, 2016). I used observations to promote triangulation. Additionally, as part of content validation I obtained feedback from my subject matter expert on how well each proposed question measures the construct in question. Their feedback was analyzed, and informed decisions made about the effectiveness of the question. The following represent the specific interview questions that I ask to address the research question of how do treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. I asked the treatment provider the following questions.

1. What does motivation mean to you?
2. What does an offense free lifestyle mean to you?
3. How motivated do you currently feel your patients are to live an offense-free lifestyle?
4. What do you think is making it harder for them to be motivated?
5. What is making it easier for them to be motivated?
6. How do you feel being in a residential program helps your patients to be motivated to live an offense-free lifestyle?
7. How do you feel that being in a residential program is hurting the motivation of your patients to live an offense-free lifestyle?
8. How do you feel about your patient's ability to stop offending/committing crimes?

9. Describe your relationships with your patients.
10. Describe your patient's relationships with their peers.
11. How are these relationships impacting their motivation?
12. Describe how you feel about your patient's ability to control their actions.
13. What are some things that you wish your patients had access to during treatment?
14. How do you think these things would improve their motivation while in treatment?

Informed Consent

I emphasized informed consent to ensure that participants did not feel coerced or under undue influence (Palmer, 2015). I obtained consent from each participant in my study. It was explained that participants had the right to withdraw their participation at any time before I began data analysis.

I provided consent forms to facility treatment providers in plain language including the purpose of the study, my name, Institutional Review Board and Walden University contact information, and information regarding confidentiality and coding of responses. All participants were informed of audio recording procedures and how these recordings would be protected and stored. I provided this information so that participants would have the capacity to decide whether they would participate (Palmer, 2015).

Data Collection

Prior to the initiation of formal data collection, approval from the IRB and individuals at the proposed site was obtained. The primary form of data collection was

the spoken word of the selected participants. Data collection did not end until the point of saturation had been reached. This point was known when there was enough information to replicate the study and no new data or themes emerged from participant responses (Hennink et al., 2016)

Qualitative researchers have faced unique challenges because of the disruption of COVID-19 restricting traditional face-to-face data collection methods (Lobe et al., 2020). Researchers have found themselves needing to alter their study designs to meet “socially distant” mandates (Archibald & Ambagtsheer, 2019; Lobe et al., 2020). Advances in communication technologies offer new opportunities to conduct qualitative research. Because face-to-face interviews were not permissible at the time of the proposed study, I utilized web and videoconferencing via Zoom. Utilizing Zoom as a data collection method was effective and has been rated above alternative interviewing mediums (Archibald & Ambagtsheer, 2019). Zoom is HIPAA compliant and has already been used extensively for research purposes (Lobe et al., 2020). Videoconferencing works best when there are a small number of participants consistent with the design of the current study.

The interviews were conducted based on a guide to maintain structure and consistency. Interviews lasted approximately one hour. Participants were debriefed as an educational tool upon exit from the study. This study did not involve deception and participants were given a simple, clear, and informative explanation of the rationale for the study, design, and the methods used. Participant confidentiality was outlined. Information on how to receive a final report of the study, contact information for

questions or concerns, and a list of resources if participants became distressed after the study were provided. Once data was collected it was coded and analyzed.

Data Analysis Plan

I analyzed and coded the data using the six phases of thematic analysis identified by Braun and Clark (2006). Thematic analysis is the process of identifying, analyzing, and reporting patterns within data. It provides a concise and easily interpretable description of emergent themes and patterns within a dataset. The patterns can be analyzed by repetitive reading, data coding, and theme creation. It helps the researcher to determine what themes are important through six phases of analysis including familiarization with the data, coding, generation of initial themes, reviewing themes, defining, and naming themes, and creating a thick description of the results (Braun & Clark, 2006). Thematic analysis uncovers the perceptions and observations about the phenomenon under study.

Trustworthiness

Trustworthiness is one way that researchers can demonstrate that their findings are worthy of attention (Nowell et al., 2017; Walden University, 2021). Trustworthiness is established through the process of credibility, transferability, dependability, and confirmability (Nowell et al., 2017; Walden University, 2021). Credibility within research asserts that findings accurately reflect reality as experienced by participants (Walden University, 2021). Transferability refers to findings being both applicable and comparable in similar settings (Walden University, 2017). Within dependability the factors that occur naturally within the chosen setting are accounted, while confirmability

acknowledges the researcher as instrument and presents potential biases (Walden University, 2021).

Credibility

Credibility was established through the process of member checking to test the findings and interpretations of the study with participants (Nowell et al., 2017). Any misinterpretation or assumptions made during the data collection process were clarified during this process, to ensure responses are accurately recorded. I utilized peer debriefing to provide an external check on the research process and further contribute to trustworthiness. Through this process the researcher can check preliminary findings and interpretations against these findings (Nowell et al., 2017).

I also utilized prolonged engagement to promote credibility by spending sufficient time to learn the culture, build trust with treatment providers, and understand the scope of the phenomena (Lincoln & Guba, 1985; Walden University, 2021). Development of rapport and trust prior to implementation of the study facilitates understanding and co-construction of meaning between the researchers and members of the setting (Lincoln & Guba, 1985). The researcher should be able to detect and account for distortions in the data, and rise above individual preconceptions (Lincoln & Guba, 1985).

Transferability

To promote transferability, the researcher is responsible for providing thick descriptions of the data. Thick descriptions provide readers evidence that the research study's findings could be applicable in other contexts. Thick descriptions also allow those who seek to transfer the findings to their own site to judge transferability (Nowell et al.,

2017). This process describes both physical behaviors and their context as interpreted by the researcher so that it can be better understood by others.

Verbatim transcriptions and descriptive note taking are ways transferability can be increased (Nowell et al., 2017), and were used in this study. A robust and detailed account of the data collection process and connections between the cultural and social contexts that surround the data collection were provided. Information regarding how the interviews took place and other aspects that will help the reader to obtain a richer and fuller understanding of the research setting were presented.

Dependability

Dependability establishes the researcher's findings as consistent and repeatable. To ensure dependability, the researcher needs ensure the research process is logical, traceable, and concisely documented (Nowell et al., 2017). The research report includes sections devoted to the research design as well as the implementation, explaining how the study was carried out. I outlined the operational aspect of data gathering, including how this process was completed. This includes a description of naturally occurring phenomena including stability and change (Walden University, 2021).

Confirmability

Confirmability is the process of the researcher demonstrating that their findings are clearly derived from the data (Nowell et al., 2017). Detailing how the conclusions and interpretations were reached supports this process. Confirmability is established once dependability, credibility, and transferability are all achieved (Nowell et al., 2017). Taking notes in the form of audit trails throughout the research process including the

reasons for theoretical, methodological, and analytical choices will allow others to understand how and why decisions were made.

As a clinician there are several inherent biases I possess related to the population. To accurately assess, identify, and reduce this bias the practice of bracketing and reflexivity was utilized. Bracketing is the process of mitigating effects that may taint the research process. This process consists of the researcher remaining emotionally detached from the study. It can be difficult when the researcher is heavily committed to a theoretical framework (Gregory, 2019). Bracketing can protect the researcher from the effects of examining emotionally challenging material and can lessen the adverse effects of the research endeavor (Gregory, 2019).

Reflexivity is the qualitative researcher's thoughtful self-awareness and examination of the dynamics between themselves and study participants (Palaganas et al., 2017). Reflexivity requires an active involvement in the research process. Researchers are part of the social world they study, and an examination of how their social background, location, and assumptions affect their research practice is important (Palaganas et al., 2017). I engaged in bracketing and reflexivity through journaling evaluating my own relationships to the topic, world views, and assumptions. Journaling was conducted before, during, and after interviews.

Ethical Procedures

As the researcher the welfare and dignity of all participants is the main priority. I obtained IRB approval (09-28-21-0751382) prior to any data collection. This study was conducted in conformity of all professional standards, state, and federal regulations

regarding research with human participants. In planning the study careful safeguards were applied to protect participants' rights. The primary concern is to ensure that no procedures involved in the implementation of the study placed participants at risk. I obtained consent from all participants prior to the research (APA, 2021). The consent document informed all participants of the full scope of the study, including how they would be audio recorded, who will have access to the recordings, information related to the recordings, and how they would be stored. Additionally, information regarding how long the recordings would be maintained and the methods for destruction were provided.

Several processes were initiated to obtain access to participants including the IRB approval. To obtain this approval the IRB application was submitted for consideration. Within this application it was explained who will have access to the audio recordings, names of participants, and locations where the recordings occurred. Additionally, details including how the participant's identity was protected and when recordings will be destroyed was provided. Only the researcher will have access to this data which was stored on a secured flash drive and backed up on a secured laptop. Participant identifiers were assigned to assist any follow up measures and to provide guidance. Once the information needed for the research was obtained recordings were destroyed.

I informed participants of the estimated duration of the interviews and asked that they go to a private room during data collection. This was to ensure that conversations during the interviews were not heard by others. Participant demographics such as age and ethnicity were shared in the results in a manner that does not render them identifiable. Participants were assigned a participant identification number that was used instead of

participant names on all hard copy and electronic data including field notes and audio recordings.

Summary and Conclusions

In chapter 3 rationales for choosing a qualitative phenomenological design and my role in executing this approach were outlined. The planned methodology including participant selection, sampling methods, and instrumentation were presented. Additionally, methods to ensure trustworthiness including methods for credibility, transferability, dependability, and confirmability were discussed. Finally, ethical considerations and procedures to gain access to participants were provided. Results of the study are discussed in Chapter 4.

Chapter 4: Results

Sexual offending is a serious problem, with significant impact on victims, families, and society. Residential treatment programs were created to provide a treatment option for sex offenders in preparation for reintegration. The literature related to characteristics, patterns, and the impact of motivation on treatment outcomes has come a long way; however, there is much to learn (Frye, 2019). Literature on the impact of motivation in treatment dates back more than 20 years, but what we know about juveniles pales in comparison to what we know about adults, despite juvenile sex offenses accounting for 20% of all sexual assaults and 50% of all childhood sexual abuse (ATSA, 2017; Frye, 2019).

The purpose of this thematic analysis was to examine the perception of treatment providers, to better understand how juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. In this chapter, I discuss details of the current study, including focus and methodology. I also describe the study setting, participant demographics, data collection and analysis, evidence of trustworthiness, and study results.

Setting

The semi-structured interviews took place via Zoom using both audio and video. All the interviews were conducted in private offices at our respective places of employment, and no interruptions occurred during the interviews. I started each discussion by reviewing the structure of the interview and went over the consent form. Before initiating each interview, the participant was asked specific demographic

information (age, ethnicity, job title, years working with juvenile sex offenders, and tenure at the facility). Each conversation lasted approximately 1 hour with room for questions at the end of the interview.

A \$15 Visa gift card was emailed as compensation for participation in the research. Although the gift card may have been incentive to participate in the study, none of the participants mentioned it during our discussion, and there were no other known factors that may have influenced answers to any questions or study results.

The research question used to address the identified problem was: How do treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment?

Demographics

The research sample consisted of seven ($N=7$) participants who contacted me via email to express interest in the study. One participant contacted me via phone as well as email. All participants were gathered from flyers emailed to treatment providers at my partner site. Participants self-identified as therapists licensed according to Texas therapy and counseling board, having treated juvenile sex offenders in residential treatment centers. Participants ranged in age from 27 to 57, with the average age being 40. Other demographic information for this study included participant ethnicity, job title, years working with juvenile sex offenders, and years working at the partner site. Of the seven participants, four identified as African American, one identified as Caucasian, one as Caucasian and Hispanic, and one as Caucasian and Indian (see Table 1). In the following section, demographic information for the participants of this study is presented.

Table 1*Participant Demographics*

Interviewee	Age	Ethnicity
1	57	White/ Hispanic
2	32	African American
3	30	Anglo American
4	49	African American
5	56	Indian/ Caucasian
6	27	African American
7	35	African American

All participants identified as therapists with various titles including program director, treatment director, clinical director, treatment provider, case manager, and licensed therapist. Participant number of years working with juvenile sex offenders and years working at the partner site varied significantly. One participant reported working with juvenile sex offenders for 3 years, one for 4 years, one for 5 years, two for 6 years, one for 22 years, and one for 25 years (see Table 2).

Table 2*Years Working With Juvenile Sex Offenders*

Interviewee	Years
1	6.5
2	3
3	6
4	22
5	25
6	4
7	5

Three participants reported they had been working at the partner site for 3 years, two for 6 years, one for 13 years, and one for 22 years (see Table 3).

Table 3

Years Working at Partner Site

Interviewee	Years
1	6.5
2	3
3	6
4	22
5	13
6	3
7	3

Data Collection

Data were collected from seven participants via semi-structured interviews. A criterion sampling technique was used in which recruitment flyers were sent via email only to treatment providers at the partner site. Participants contacted me via email, with one participant also contacting me by phone to volunteer for the study. I received consent from each participant via email prior to each interview. This deviated from my proposed data collection plan of conducting face-to-face interviews of juvenile sex offenders engaging in residential treatment. This change was due to the psychological risks and ethical implications of using such a vulnerable population, as has already been discussed.

Interviews were conducted via Zoom in the participant's private office away from potential distractions. Each interview was scheduled for 1 hour. The variability of interview duration was based on the level of detail provided. Some participants were very detailed and provided examples coinciding with their responses, while some participants

answered the interview questions concisely. There were no indications that participants experienced any discomfort because of the interview dialogue. One participant disclosed that she was cold once her AC unit initiated, however she was able to adjust the temperature and did not mention it further.

Several participants expressed their appreciation regarding my interest in juvenile sex offenders and bringing attention to the types of treatment services they provide. Two participants expressed interest in participating in potential follow up studies and offered to connect me with others who could share additional insight and perspective. Each interview was recorded using a basic audio recording device. Following each interview, data were transferred to a password protected flash drive device and backed up on a password protected laptop. I conducted all the transcribing and did not use any transcription service.

Data Analysis

Data saturation was reached after completion of the seventh interview, therefore understanding of treatment provider perspectives of juvenile sex offender motivation to stop offending while engaging in residential treatment was established from the semi-structured interviews of those seven participants. From these interviews, I identified four main themes and 14 subthemes.

I analyzed and coded data using the six phases of thematic analysis identified by Braun and Clark (2006). During the first phase, I focused on familiarizing myself with the data. To do this, I re-listened to each audio recorded interview a total of four times. During the first re-listen, I allowed the interviews to play through completely and

compared what I heard to what I recalled. I used the second re-listen to document a summary of the interview to provide participants for member-checking, which I conducted to ensure I captured their responses accurately. During the third re-listen, I transcribed the interviews and began to identify and connect the emerging themes and wrote them down. Finally, as I re-listened to the interviews a fourth time, I began the process of manually transcribing each interview. During this process, I feel I truly became connected to the data and anticipated responses based on familiarization. This process was quite tedious, but a necessary component for me to actively engage with my data.

During the second phase, I started to identify preliminary codes. These codes were identified manually and consisted of the interesting and meaningful parts of my data. The codes refer to the most basic element of the raw data regarding the phenomenon. I worked systematically through the entire data set, giving full attention to each data item using highlighters to indicate potential patterns. For each potential pattern, I wrote notes in the margins to identify those segments. I initially identified the codes and then matched them with the data extracts that demonstrated that code. I was careful not to lose the context of the code during this process. Next, I began organizing my data into meaningful groups to begin developing themes.

In Phase 3, I began searching for themes within the coded and collated data (Braun & Clark, 2006). I had a list of different codes that I identified across the data set, and I re-focused my analysis on the broader level of themes. To help with this process, I wrote each code and a brief description on a note card and placed them across a table.

Next, I considered how different codes could be combined to form an overarching theme by creating theme-piles. This is when I began thinking about the relationship between codes and themes and created subthemes.

In Phase 4, I conducted a deeper review of identified themes through two levels of reviewing and revising (Braun & Clark, 2006). During the first level, I read all the collated extracts for each theme and considered whether they formed a coherent pattern. Data within the themes cohered together meaningfully. Once my themes all fit, I moved to the second level, which consisted of me comparing these themes to my entire data set. I used a thematic map for this step.

Phase 5 focused on defining and naming themes (Braun & Clark, 2006). Ongoing analysis occurred to further enhance the identified themes. I devised theme names and clear working definitions that captured the essence of each theme, through which an overall story of the data emerged. I focused on communicating important aspects of each theme. I was able to define what my themes are and what they are not.

During the sixth and final phase, I took all the information that I had gathered to produce a compelling story about my data based on my analysis. I present a report capturing the perception of the participants regarding juvenile sex offender motivation to stop offending while engaging in residential treatment. From these six phases of data analysis, four themes and 14 subthemes were produced from the participants (see Table 4). The four major themes that emerged from analysis of the interview transcripts focused on support received, treatment atmosphere, provision of alternative interventions, and

perceptions of self. These themes and subthemes highlight the similarities of the data as discussed in Chapter 5.

Table 4

Themes and Subthemes

Support received	Treatment atmosphere	Provision of alternative interventions	Perceptions of self
The need for family involvement and support	Poorly educated staff engaging in triggering behaviors	More outings to integrate treatment concepts	Social stigma of sex offender label
Access to non-judgmental personal connections	Societal culture and normalization of sexual inappropriateness	Recreational activities including sports	ADHD and autism spectrum diagnoses compounding self-control
Low tolerance of others and surface friendships	Structured interventions with real time redirection from non-judging providers	Access to expressive arts therapy as an alternative energy release	Around others in similar situations with similar offenses
	Ostracized from the community and inability to engage in “normal” activities	Community engagement to improve self-concept	

Discrepant Cases

Discrepant cases can be defined as responses received from one or some participants but did not result in any of the major themes or subthemes. One participant advised that they felt if the offenders had access to sex education courses, they would be

more motivated to stop offending. This insight may have been influenced by the participant having worked with this offender population longer than the other participants.

Evidence of Trustworthiness

As outlined in Chapter 3, trustworthiness is one way that researchers can demonstrate that their findings are worthy of attention (Nowell et al., 2017; Walden University, 2021). Trustworthiness is established through the process of credibility, transferability, dependability, and confirmability (Nowell et al., 2017; Walden University, 2021). To accomplish this, I utilized several methods including member-checking, triangulation, and extensive note taking.

Credibility

Credibility within research asserts that findings accurately reflect reality as experienced by participants (Walden University, 2021). I established credibility through the process of member checking. Credibility is established when participants can review the data and verify that the information captured accurately reflects their lived experiences and perceptions of the phenomena. Once each interview was transcribed, a summary of the findings were shared with the research participant to ensure responses were accurately recorded. This member checking process verified that I had captured responses accurately, which was attributed to the quality of the audio recordings and manual, verbatim transcription.

For prolonged engagement, I began each interview by sharing with participants my experiences working with sexual offenders, and the personal significance of this

study. I shared with them the extensive research I had completed, and efforts made to learn about juvenile sex offenders. My focus was to develop rapport and establish trust prior to beginning interviews. I wanted the participants to know that they could be open and honest, and in turn I wanted to know their perception of juvenile sex offender motivation to stop offending.

In addition to member checking and prolonged engagement, my detailed note taking allowed me to capture vital details and connections. I was able to take note of interview questions that generated emotional responses from participants.

Transferability

To promote transferability, thick descriptions of the data using the participant's words were obtained. This process describes both physical behaviors and their context so that it can be better understood by others. These thick descriptions provide evidence that the study's findings can be applicable to other contexts. A robust and detailed account of the data collection process, and connections between the cultural and social contexts that surround the data collection are also provided. Additionally, information regarding where the interviews took place and other aspects that will help the reader to obtain a richer and fuller understanding of the research setting are presented.

Dependability

Dependability establishes the researcher's findings as consistent and repeatable. To ensure dependability, the researcher needs ensure the research process is logical, traceable, and concisely documented (Nowell et al., 2017). To demonstrate dependability, the research report includes sections devoted to the research design as well as the

implementation, explaining how the study was carried out. The operational aspect of data gathering, including how this process was completed, is also outlined.

Confirmability

Confirmability is the process of the researcher demonstrating that their findings are clearly derived from the data (Nowell et al., 2017). I established confirmability by taking notes in the form of audit trails throughout the research process. These notes detail how the conclusions and interpretations were reached, including the reasons for theoretical, methodological, and analytical choices. To maintain objectivity in the interpretation of these results I utilized bracketing and reflexivity. I engaged in journaling before, during, and after interviews, which allowed me to evaluate my own relationships to the topic. Through this process I was able to maintain that the findings were based on participant's responses, rather than my personal preconceptions and biases.

Results

The purpose of this study was to obtain insights from treatment providers of juvenile sex offenders into the ways that motivation to desist from crime is developed and influenced while engaged in residential treatment. Interviews were conducted via Zoom. Each participant was asked 14 interview questions that were developed to answer the research question: How do treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment. All the participants interviewed were treatment providers of juvenile sex offenders in residential treatment centers. Recruitment flyers were sent via email to providers who contacted me via email or phone number listed on the flyer.

Consent was obtained from each of the seven participants prior to interviews being conducted. Each participant was assigned a code name which was consistently utilized on all reported data to maintain confidentiality. I conducted semi structured interviews with each participant. One-hour was allotted to complete each interview; however, most were completed within this timeframe depending on the detail of responses. Interview questions were all asked in the same order for each participant. Each interview was recorded utilizing a basic recording device.

Research Question

How do treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment?

Theme 1: Support Received. Male Juvenile Sex Offenders Demonstrate Elevated Levels of Motivation to Stop Offending When They are Supported

All seven participants reported that support was a considerable influence on the formation of motivation to stop offending. They reported that offenders who lack familial/societal support, specifically those who did not have a positive male support in their lives, demonstrated low motivation levels.

Subtheme 1.1: The Need for Family Involvement and Support. When the participants were asked what they thought makes it harder for the juvenile offenders to be motivated they instantly cited lack of family involvement and support. There is a positive correlation between internal motivation, external motivation, and sufficient support. When support is high, offenders demonstrate elevated levels of motivation to stop offending. Conversely, when support is low, offenders demonstrate low levels of

motivation. Participant AA reported that support “with anybody, preferably both genders” was an integral part in the development of motivation to stop offending. Participant AB stated, “when they are able to recognize that people do care about them, they are able to open up about different things.” Participant AB further explained “I think that having that relationship and that rapport helps tremendously, and that gives them the opportunity to open themselves up to support, receive that, accept it, and recognize that they have a lot of strengths.” Participant AG advised when the offenders feel they are supported “they can truly express themselves” and begin to work through their issues. This lack of family involvement and support is a factor in many of the attachment and trust issues inherent within this population. Participant AG reported this lack of “genuine encouragement” and “lack of family support and not having anyone that they feel they can truly express themselves to leaves them feeling very trapped.”

During several of the interviews, the participants discussed ways that separation issues due to being away from the real world impacts the offender’s motivation to stop offending both positively and negatively. Participant AF cited the negative effects stating, “they are in a facility that is all boys, and they don’t have access to a sense of normalcy.” This leads many to develop isolative behaviors and fail to work through the program. These isolative behaviors are highly influenced by separation and attachment issues related to lack of support. Participant AC discussed this being compounded for the offenders in the foster care system where “separation and attachment issues” impede their ability to want to connect. Participant AA discussed the positive effects of separation and advised that motivation for the offenders “starts off with [them] wanting to go home.”

Participant AA further advised when offenders possess this desire to reunite with their families, they begin treatment “motivated to try.” Participant AC stated, “I think the transition of wanting to place them back with families has been a huge motivator for the youth.” Residential treatment is often the last option to avoid incarceration, and as Participant AA stated, the goal is “ultimately not go to jail” and be further separated from the world.

Subtheme 1.2: Access to Nonjudgmental Personal Connections. Due to the nature of their offenses many juveniles demonstrate low motivation to stop offending because of their lack of personal connections with others. When offenders can make personal connections, they demonstrate increased receptiveness to treatment interventions designed to increase motivation to stop offending. Participant AE advised, “I think a lot of these kids that I have worked with are surprised that providers are not judging or rejecting, that we are accepting of them.” Participant AC explained the residential program “requires more face-to-face contact and conversations than a general program” which promotes the development of positive relationships supporting an increase in motivation to stop offending. Additionally, Participant AC advised “I think for sure that once they are able to connect, I think it gives them, it provides them, motivation and support.” Participant AE mirrored this input stating “when they have a good connection with someone, they want approval, they want acceptance” and this desire to be accepted increases their motivation to stop offending.

Subtheme 1.3: Low Tolerance of Others and Surface Relationships. Most participants discussed low tolerance of others and the lack of personal relationships as

negative impacts on offender motivation to stop offending. Participant AG advised “in the setting relationships can be a bit negative...a lot of them forget the actual reason that they are actually at the facility and lose focus.” This lack of focus negatively impacts their ability to develop motivation. The treatment environment does not always allow for the development of close bonds impacting their support in developing motivation to stop offending. Participant AE advised “sometimes they are not even allowed to talk privately or personally so it really impedes their ability to develop extrinsic motivation.”

Theme 2: Treatment Atmosphere

According to the majority participants the treatment atmosphere significantly impacts motivation to stop offending. This is inclusive of all aspects of the atmosphere including education level and behaviors of staff, music and television themes, culture, interventions, peers, and being ostracized from the community.

Subtheme 2.1: Poorly Educated Staff Engaging in Triggering Behaviors.

Several participants discussed ways that staff interactions and behaviors negatively impact the motivation of the offenders. When staff are not aware of the unique barriers and challenges of this population, they may inadvertently trigger negative behaviors, thus reducing motivation to stop offending. Participant AE discussed the day-to-day challenges of being in a residential treatment center and advised “you have poorly educated staff, you’ve got staff that may have their own issues, they are frustrated, their heart may be in the right place but their tolerance and things like that are not.” Participant AE went on to advise, “when they are constantly being challenged by staff or peers and there are not appropriate interventions to help them...it is just not helpful...you are going

to force them to take a step backwards.” Participant AE additionally stated, “they are not going to be motivated to work on these sexual behaviors if they don’t feel safe in their current living environment.” Participant AA outlined several factors hurting the motivation of offenders stating, “the staff that we have currently are not very well-informed regarding trauma, we have a lot of traumatized youth here.” Participant AA explained “we have male staff that will bring in movies that show all kinds of crimes as entertainment.” This lack of education causes offenders to receive mixed messages. Motivation levels are impacted when the treatment protocol is inconsistent. When treatment is consistent and delivered by competent staff offenders demonstrate higher levels of motivation to stop offending.

Several participants discussed the societal culture of the treatment atmosphere the offenders are exposed to, and ways that this negatively impacts motivation. The different messages sent through the media often work negatively against motivation to stop offending due to the glorification of negative behaviors. It is difficult for offenders to buy into treatment interventions if they do not feel what they are doing is wrong. Participant AB stated, “I play music all the time, I have music playing in the background right now... as long as they can think of music that is appropriate and clean, the content is not too sexualized or not too rambunctious with drug use of anything like that.” Participant AA discussed the need for offenders to “have music that is appropriate that doesn’t feed the negative stuff, which isn’t something that is a constant source of arguing.”

Participant AA added “we show rape as entertainment...when you have a lot of kids that are typically being raised by the media, they are getting a lot of their values by

what they hear in music and a lot of what they hear in music is not respectful of consent.” Participant AA further explained how television pushes the limits on many aspects of offending and sexual misconduct by stating “being freaky is cool, and you know it’s real hard to distinguish for them I’m just being freaky, versus I’m doing something to someone that may harm them in a permanent way.” Participant AG gave a personal example by stating “when I was working in the community, I can’t tell you how many 13, 14-year-old girls thought it was ok to exchange a blow job for a ride home from school”. Representations in the media and music promote inappropriate behaviors making it difficult for offenders to understand that what they are doing is wrong. With these mixed messages and lack of understanding it can be difficult to establish motivation to stop offending.

Music can also have a positive impact on motivation. Participant AB stated, “having music more actively available for them when they’re in their dorms...music is just so powerful, and I know for myself that is a huge therapy.”

Subtheme 2.2: Structured Interventions With Real Time Redirection From Non-Judging Providers. Most of the offenders in the program want to improve and not continue to hurt others and demonstrate heightened levels of motivation to stop offending when they receive consistent feedback and unbiased support. According to Participant AG “genuine encouragement, lack of it lack of family support” make it harder for the offenders to be motivated. Participant AG explained further stating “lack of not having anyone that they feel they can truly express themselves to” is a major factor. When offenders are in a setting where they feel they are being seen as an individual rather than

being judged for their crimes they are more motivated to stop offending. Participant AG stated “Someone showing them compassion and them feeling that it is genuine, being in a setting that they feel that they can be apart of where they know they are safe, and people are being honest and aren’t passing any judgment” makes it easier for the offenders to be motivated.

Participant AF additionally advised “being stigmatized and having a label on their back” and “having someone to support and encourage them throughout their time here helps them because they have someone to push them and encourage them to get better.” According to Participant AC structured interventions “changes their environment and helps them put things into perspective.” Participant AC explained having a system designed “to give them more privileges and more freedoms as they progress and being able to reintegrate them in a systematic way allows them to make changes.” Participant AE stated, “providers not judging or rejecting them and accepting them allows them to improve their self-image due to being in an accepting environment.”

Subtheme 2.3: Ostracized From the Community and Inability to Engage in “Normal” Activities. The inability for offenders in a residential program to engage in normal daily activities and interact freely with others impacts motivation in several ways. Several participants identified the positive impact of structure and boundaries within the treatment setting, and how this correlates with motivation development. Participant AB stated, “we are structured so you don’t have the liberties and freedoms that you can have outside of facilities like ours... which forces offenders to understand that choices have consequences.” This reinforces offenders to learn impulse control which Participant AB

advised “can be productive and cultivate some pretty good social connections and reinforce some positive things.”

Although several participants reported seclusion from the community can be helpful in developing motivation to stop offending, they also explained ways that it may be harmful. Participant AB advised “it can ostracize them, and they can have limited social connection and then it’s like what’s the purpose, where is the motivation to care about other people because they clearly don’t care about me.” Participant AC mirrored this sentiment by stating “as a facility we don’t have access to as many freedoms and privileges...and I think sometimes that can lower motivation.” Participant AB went on to state “I think that some youths just don’t thrive in that type of environment.” Participant AG stated, “they are placed in the facilities for extended periods of time which is a form of isolation from the normal community... making it harder for them to participate.”

Theme 3: Provision of Alternative Interventions

All the participants advised that offender motivation to stop offending is negatively impacted by the lack of alternative interventions within the treatment setting.

Subtheme 3.1: More Outings to Integrate Treatment Concepts. Offender motivation is negatively impacted when they are not able to practice the different techniques that they are taught. Participant AE advised “the more outings and the more things that are available to do it just motivated them to want to be included.” Participant AD stated, “we try to do outings with them so they can be in more normal society but I really wish that they would go to a public school.” Additionally, Participant AD advised “I just wish sometimes where they can go on a field trip or somewhere where it’s

everybody.” Participant AA advised “I wish they had more access to the real world... like sometimes go to football games or basketball games, something like that in the community.” These outings can allow the offenders to be treated normally and separate from their wrongdoings and “receive praise for their non-sexualized behaviors” per Participant AA. The outings would allow offenders to begin re-acclimating to the real world and give them the opportunity to see “that other people are more comfortable around them or don’t mind being next to them” increasing their motivation to stop offending.

Participant AC explained that increased outings would allow offenders to develop an increased sense of self-worth and acknowledge their ability to stop offending and lead productive lives. Things such as “going to a volunteer event or some type of community outdoor event with appropriate supervision would give them an opportunity to see that I don’t have a big label on my forehead no one has just labeled me” which would be beneficial to motivation levels.

Subtheme 3.2: Recreational Activities Including Sports. Therapeutic recreation is an important aspect of any juvenile rehabilitative program. These programs assist in the channeling of energy in a positive manner, and support raising self-esteem. All participants spoke in some aspect about the benefit of recreational activities in improving the juvenile’s motivation to stop offending. Participant AE discussed the importance of “more activities as far as sports and physical activity” to support motivation. Participant AA added “I wish they could go sometimes to football games or basketball games” and further explained that these types of activities would allow the offenders to “start from a

basis of strength.” Participant AF explained that “more interactive activities such as sports and other therapeutic interventions” are helpful in building motivation to stop offending. Participant AB added “competitions like sports leagues would be huge and could be a wide range of things from of course your basketball, football, baseball or maybe swimming.”

Subtheme 3.3: Access to the Expressive Arts Therapy as an Alternative Energy Release. Like recreational activities, expressive arts therapy provides an alternative modality to appeal to the interests of offenders and support motivation. Participant AB discussed “other activities such as spoken word would build on emotional intelligence” and would capture the offender’s attention during treatment and help build on motivation to stop offending. Participant AF discussed how “more interactive activities” are crucial aspects of the treatment process to build motivation. Participant AC highlighted activities such as “working with animals, rather that is like equine therapy or just working with the therapy dog” and explained “almost every single one of our kiddos have been through some type of sexual abuse themselves and they feel connected with animals a lot, and it is very healing for them.” Participant AG similarly spoke about the benefits of activities such as gardening to build confidence and positively influence motivation to stop offending.

Subtheme 3.4: Community Engagement to Improve Self-Concept. Juvenile offender engagement in the community is an important aspect of their future success. Engaging with others that see them as a person, rather than an offender can heighten motivation to improve and stop offending. Youth who are ostracized and lack meaningful

interactions with community members demonstrate increased feelings of hopelessness and lack motivation to stop offending. Participant AA discussed how community engagement gives the juvenile offenders the opportunity to interact with others in real life settings and stated, “they do not have access here to appropriate relationships with females, so they can’t practice.” When the offender can practice and build self-concept motivation improves.

Participant AC advised “I wish we had more community support because I think the stigma and their worry about just how people perceive them” and ways that positive community engage can alleviate this worry and positively impact motivation. Participant AB explained that community engagement would allow the offenders to “notice that other people are more comfortable around them or don’t mind being next to them and that feels good.” Participant AG further explained ways that community engagement allows the offenders to “interact in a normal setting” and begin “practicing and being able to re-acclimate in normal setting.” This engagement allows the offender to see the benefit of change and obtain success, which increases motivation to lead lives free of offending behavior.

Theme 4: Perceptions of Self

Juvenile self-perception is a high predictor of risk. When offenders possess a high perception of self, they demonstrate increased belief in their ability to change and higher level of motivation to stop offending. Self-perception is impacted by many factors including personal traumas and stigmatization. Most of the participants discussed self-perception and motivation during their interviews.

Subtheme 4.1: Social Stigma of Sex Offender Label. Stigma is related to treatment motivation and offending behaviors. The misconceptions regarding sexual offending rehabilitation and recidivism have influenced many of the stereotypes and prejudices experienced by this population. Participant AG advised the offender's having a lack of social encouragement impacts their confidence and leaves them "feeling very trapped" and adopting beliefs that they cannot change. Participant AD advised that the offenders often discuss the impact of being labeled stating "It's like they feel they are labeled already so it's like it doesn't matter what I did, it's always going to stick with me, I'm always going to be considered this." Participant AC additionally explained "I think with the stigma they worry about just how people perceive them." Lack of motivation is correlated with the offender's inability to negative feelings associated with labeling. Participant AB advised that motivation is impacted due to "stigmatizing different youth, the different labels that come with their offenses and inappropriate behaviors that still exists overall."

Subtheme 4.2: ADHD and Autism Spectrum Diagnoses Compounding Self-Perception. Many of the offenders receiving residential treatment have diagnosed impulse control issues and an inability to regulate their behaviors to begin developing motivation. This perception that they have a disorder that affects decision-making leaves many offenders feeling powerless. Participant AB advised "learning to have control over yourself is hard especially when that hasn't been the strongest suit and you do feel like you are out of control of yourself." Self-control is a big treatment goal to support the

development of motivation “because a lot of them have just been acting loosely and going with whatever the urge was” according to Participant AB.

Participant AA stated, “I have people who developmentally are not capable of controlling their actions.” These offenders demonstrate low levels of motivation to improve due their perception that they cannot change. Participant AE advised “a lot of our kids are very impulsive, a lot of our kids are diagnosed with ADHD, a lot of our kids are on the autism spectrum” impacting their ability to control urges. Participant AC furthered this by stating “between 25 and 50% are diagnosed with ADHD so the younger they are they are still trying to get their medication correct, they are still trying to get stabilized, so they do struggle with impulse control”.

Subtheme 4.3: Around Others in Similar Situations With Similar Offenses.

When offenders are around others that have committed similar offenses who are demonstrating motivation to stop offending their own internal motivation is improved. They begin to feel like they are not “monsters” and self-perception improves. Participant AE advised “in some ways it is helpful to be around others who are in similar situations.” Participant AD stated, “they have a closer bond” because they are in treatment for similar situations “they tend to take up for one another” and “they like to motivate each other by saying things like I’m almost done”.

Summary

The sample for this study consisted of seven self-identified therapists licensed according to Texas Therapy and Counseling Board, treating male juvenile sex offenders in a residential treatment center. The participants were recruited by criterion sampling

with the use of a recruitment flyer sent via email to the treatment providers. After consent was provided, semi-structured interviews were conducted via Zoom. During the interview process four themes and 13 sub-themes emerged to answer the research question.

Motivation of male juvenile sex offenders to stop offending was influenced by support received, the treatment atmosphere, provision of alternative interventions, perceptions of self, and impulse control.

Chapter 5 provides an interpretation of the findings, limitations of the study, recommendations for future research, implications of the study for positive social change, and conclusions.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this thematic analysis was to gain an in-depth understanding of treatment providers' perceptions of juvenile sex offenders' motivation to stop offending while engaging in residential treatment. I aimed to better understand the treatment factors impacting motivation to give insight into the specific components leading to desistance. In this study, I used thematic analysis to uncover the perceptions and observations of these treatment providers to determine how they observed residential treatment to impact juvenile sex offender motivation. To understand this phenomenon, I conducted semi-structured interviews with seven treatment providers using the research question of:

How do treatment providers perceive juvenile sex offenders experience motivation to stop offending while engaging in residential treatment?

The seven treatment providers that participated in my study worked with juvenile sex offenders receiving residential treatment. From my analysis, four main themes and 14 subthemes emerged. The main themes included: support received, treatment atmosphere, provision of alternative interventions, and perceptions of self. In this chapter, I analyze these themes and sub-themes and the connection to the literature as presented in Chapter 2. I will summarize my research results and discuss limitations of the study, recommendations for future research to contribute to the topic of juvenile sex offender motivation, and implications for social change.

Interpretation of the Findings

While there is extensive research related to the relationship between motivation and offending behaviors, there is much to learn (Frye, 2019). Literature on the impact of motivation in treatment dates back more than 20 years, but what we know about the juvenile sex offender pales in comparison to what we know about adults (ATSA, 2017; Frye, 2019). The literature outlined in Chapter 2 reviewed the major themes impacting the development and maintenance of motivation. These themes included offender age and risk factors, treatment delivery, environmental factors, relationships with intervention facilitators and community supervisors, lack of readiness, and stigmas. I evaluated various types of treatment modalities to describe how motivation is influenced. Research regarding juvenile sex offenders and treatment programs exists; however, there is minimal research regarding their motivation to stop offending while engaging in these programs, specifically residential treatment, which is the gap that my study attempted to fill.

Participant interviews produced findings that led to the development of four themes detailed in Chapter 4. The four themes that capture treatment providers perspectives of juvenile sex offender motivation to stop offending while engaging in residential treatment include: (1) support received, (2) treatment atmosphere, (3) provision of alternative interventions, and (4) perceptions of self. I assessed each theme in the current study in relation to the current literature.

Theme 1: Support Received

All participants discussed the importance of support while the juvenile sex offender is engaged in residential treatment. Support was described as a wide array of efforts including involvement with healthy, respectful relationships with people of both genders. Several participants explained when offenders are supported and have access to non-judgmental personal connections, extrinsic motivation is heightened. Participant perceptions were that offenders who identify close bonds with others that they care about want to apply what they are learning and try harder. Further, participants recognized when offenders perceive others care about them their social connections are strengthened motivating the desire to stop offending.

These participant perceptions coincide with the previous literature and add additional perspectives. Multiple research studies have highlighted the impact supportive relationships have on motivation. Prior studies suggested that therapeutic relationships and rapport with others is significant in the development of motivation (Olver et al., 2019; Schwartz et al., 2017; Stasch et al., 2018). Studies found that support from treatment providers promote positive attitudes towards therapy in terms of belief in its effectiveness and motivation to change (Howard et al., 2018; Schwartz et al., 2017; Stasch et al., 2018). The literature also highlighted the importance of support from social groups. Abrah (2018) investigated ways that negative reactions from friends and society work to change or reinforce motivation and offending behavior. The current study indicates that treatment providers have observed these positive impacts of healthy relationships.

This study adds to the current literature by providing perspective on the importance of support, specifically from the offender's family. Several participants explained when the family is involved, offenders exhibit higher levels of motivation to go home. Participants discussed that when offenders have family support, they are better able to separate their behaviors from their individual identity and exhibit confidence they can change. One participant disclosed evidence of this in the lie detector tests administered to offenders throughout treatment. Offenders with family support were described as having higher pass rates on these tests, which assess their motivation to stop offending. This important influence of family was also found in the literature. Negative reactions and lack of support from family was found to redirect offenders' paths into deviance, reducing motivation to stop offending (Abrah, 2018). Researchers have found that positive family support during confinement is associated with improved compliance during treatment and better outcomes (Abrah, 2018).

Theme 2: Treatment Atmosphere

Each participant discussed the impact that the treatment atmosphere has on motivation. Treatment atmosphere was defined as elements of the program environment, including culture, music and television themes, and staff communication and interactions with offenders. Negative aspects such as staff engaging in triggering behaviors and not possessing the competency to implement effective interventions were highlighted. Several participants shared their perceptions of how the treatment atmosphere was making it difficult for the offenders to be motivated. These findings correlate with the current literature, in which experts have suggested that therapeutic relationships play a

significant role in motivation (Olver et al., 2018; Schwartz et al., 2017; Stasch et al., 2018). One participant discussed staff constantly berating and yelling at the offenders, leading them to become distant and defensive. The participant advised when offenders experience this type of treatment environment, they transition into survival mode and are unable to work on their offending behaviors.

Several participants discussed that the treatment atmosphere fails to promote a realistic setting, which negatively impacts motivation. Participants explained when offenders are ostracized from the community and unable to implement the interventions, learned motivation is hindered. Participants additionally provided perspective on the impact of structured interventions, with real time re-direction from non-judging providers. Participants specifically discussed an increase in positive outcomes when offenders have an individualized treatment plan. Each advised when the plan is focused on specific offending behaviors, a treatment atmosphere of openness is promoted. This atmosphere creates an environment where offenders can navigate their deepest thoughts and know they will not be judged and can be helped.

The nature and quality of the provider/offender relationship is considered to have a profound impact on treatment outcomes. When offenders perceive a positive relationship with treatment providers, attitudes towards treatment improves and motivation increases (Carl et al., 2019; Olver et al., 2018; Schwartz et al., 2017; Seewald et al., 2018; Stasch et al., 2018). Several participants recognized the importance of these social ties, explaining units where poor staff/offender relationships are observed correlate with increased incidences of noncompliance with treatment.

In addition to what is highlighted in the literature, participants discussed other aspects that impact the treatment environment including inappropriate music and television themes. Juveniles are highly impressionable and susceptible to misinterpretation of social themes as accepted norms (Erofeeva et al., 2019). Therefore, important aspects of the treatment environment that impact motivation may be explained as a combination of the staff/offender relationship and other variables such as the culture promoted. Participants explained mixed messages are sent when treatment providers allow offenders to view inappropriate television and music themes that normalize violence, sexual inappropriateness, and deviance. Participants explained that it is difficult to get offenders to buy into the program when they are exposed to things that feed into negativity. They explained when offenders are shown television programs where crimes are shown as entertainment, they are less likely to adopt the values of an offense-free lifestyle.

Participants provided insight into ways that the treatment environment can be improved to support offender motivation. Some of these recommendations included educating treatment staff on the triggering effects of certain music and television shows and ensuring that these themes are not part of programming. For example, participants suggested facilities not allow movies to be shown unless approved by the clinical director. By implementing this checks and balances process, facilities can avoid staff allowing offenders to watch shows that can detract them from treatment goals.

Overall, these findings confirm what is indicated within the literature and provide recommendations that can be explored further in future studies. The findings highlight

that the social climate, including material and emotional conditions are positively correlated with motivation. Treatment programs that are focused on promoting a therapeutic alliance positively impacts offender retention and motivation in treatment (Howard et al., 2019; Jones & Neal, 2018; van der Helm et al., 2019). These conditions are important aspects in the development and maintenance of juvenile offender motivation to stop offending during residential treatment. When offenders perceive a positive relationship with treatment providers who also provide a therapeutic environment, motivation is positively supported.

Theme 3: Provision of Alternative Interventions

When discussing recommended changes to the residential treatment program, each participant discussed the provision of alternative interventions. Increasing recreational and expressive activities and community engagement were identified as recommended changes to improve the motivation of offenders. Participants discussed ways that the restrictive nature of treatment can inadvertently decrease offender desire to change. Offenders in residential settings are often confined to the treatment facility and unable engage with the community. Several participants discussed that the current treatment program fails to provide interventions that appeal to the expressive side of offenders.

The higher the risk of the offender, the greater the need is for treatment to be highly responsive (Sicard, 2021). Offenders with complex needs tend to have a range of factors impacting their abilities, including mental health, and learning disorders (Sicard, 2021). Programs that involve expressive arts, such as music therapy, offer unique and

supportive benefits to traditional treatment plans (Chong & Yun, 2020; Sicard, 2021). Music has long been used as a therapeutic medium for offending youth. Research has shown that arts have a positive impact on youths' emotional regulation, especially for juvenile offenders (Chong & Yun, 2020).

Offenders in music therapy and other expressive arts programs demonstrate increased self-concept, resilience to stress, and improved coping strategies (Chong & Yun, 2020). Additionally, participants discussed the potential benefits of recreational activities including sports to allow offenders to expend energy in a positive manner. Some additional recommendations included adding spoken word, working with animals, and horticulture. By creating a more individualized program that allows alternative energy release, motivation can be increased.

This finding builds upon prior research indicating that lack of motivation and premature treatment termination can be an indicator of problems in program implementation (Carl et al., 2019). Like the current findings, the literature reveals treatment success is predicted based on the ability of treatment delivery processes to individually engage offenders (Basanta et al., 2018; Howard et al., 2018). Treatment delivery that is flexible and allows for accommodations and open-ended therapeutic format gives offenders the opportunity to fully engage (Howard et al., 2019). If the program is not adjusted to the offender's learning style, offenders might feel overstrained and consequently experience lower levels of motivation (Carl et al., 2019). Prior studies additionally revealed treatment should be tailored to the learning style, motivation,

abilities, and strengths of the offender (Basanta et al., 2018). The current study provides specific examples of treatment modalities adding to these findings.

Theme 4: Perceptions of Self

The current study highlighted ways self-perception can influence motivation. Stigma associated with sexual offending, acceptance from others, and the impact of disorders such as ADHD and autism were each identified as factors impacting self-perception. When offenders feel they will still be viewed as a deviant or unable to control their outcomes regardless of their efforts, motivation is negatively impacted. Several participants discussed the negative impact of stigma on offender self-perception. They each stated stigma, and the limitations that society places on sex offenders makes it harder for offenders to be motivated. One participant explained the offenders do not have access to the same freedoms and privileges, limiting their options for their futures and their successes. Some freedoms mentioned included going to school with mixed populations, attending sports events, engaging in volunteer activities, and integrating with the community.

Participants went on to explain the association between stigmas and feelings of acceptance. When offenders are isolated from society and treated like monsters, motivation to stop offending is lessened. Concern about labeling individuals who have engaged in criminal activity is not new. Previous research has found that labeling associated with stigma can be disempowering and distressful (Willis, 2019). While labels are often used as a defining feature in everyday communication, they can be quite harmful. Labels such as sex offender communicate those individuals are part of a

homogenous group and opportunities for rehabilitation, reintegration, and desistance are compromised (Willis, 2019). Empirical research has found that formal labeling of individuals who have engaged in criminal behavior increases risk for future crime (Willis, 2019). This increased risk is related to identification and association with deviant peers due to identity changes.

Five of seven participants discussed the impact of disorders such as ADHD and autism on the offender's ability to control their actions. They discussed approximately half of the offenders treated at the facility have one of these diagnoses and struggle with impulse control. The ability to recognize their own triggers to do the steps needed to not re-offend is integral. Individuals who are unable to recognize personal triggers tend to possess an external locus of control. Those who have an external locus of control have an increased risk of re-offending than those who have an internal locus of control (Tyler et al., 2020). This is due to a more internalized locus of control associated with higher levels of self-esteem, emotional and mental well-being, and a more positive self-concept (Tyler et al., 2020).

Several participants additionally discussed their perception that offender motivation was impacted due to being around others in similar situations. The perception of shared experiences can reduce feelings of stigmatization and promote belief in the potential for change. One participant discussed how offenders with similar backgrounds and/or experiences bond together and provide support and acceptance of one another. The participant expressed that this camaraderie during treatment positively impacts motivation to stop offending.

These findings are consistent with the current literature and add additional perspective, highlighting ways that internal processes such as neurodevelopmental conditions can impact motivation to stop offending. Previous findings explain perceptions of self and ability are pertinent for motivation to move away from crime (Doekhie et al., 2017). Research has shown it is important for individuals to feel that they are able to act on their own and possess the skills to successfully maintain desistance. The literature explains the need for treatment to support realistic autonomy and competence (Doekhie et al., 2017). Individuals are more likely to experience motivation when psychological needs for competence are met (Petrich, 2020). To accomplish this, treatment must also consider any developmental or other psychological disorders that may negatively impact perception of self. Literature suggests that interventions attuned to offender characteristics could increase motivation and decrease treatment attrition (Brunner et al., 2019; Vollm et al., 2019). Services are most impactful when matched to the unique needs of the offender (O'Brien & Daffern 2017; Sowden & Olver, 2017).

Theoretical Framework

This research study was guided by Deci and Ryan's self-determination theory, which provides context on ways that functioning can be facilitated or hindered by the social context (Deci & Ryan, 2001). Based on SDT, people are motivated to evolve and change by three innate psychological needs for competence, connectedness, and autonomy. Feelings of competence promote the belief that an individual can do a job well, or possesses knowledge required for a task (Deci & Ryan, 2001). Connectedness supports the notion that a person is bound together with others and autonomy refers to the

extent that a person's actions are self-determined rather than coerced or compelled (Deci et al., 1989). According to Deci and Ryan, everyone is inherently motivated; however, the right conditions need to be established to facilitate motivation. The way offenders view their ability to control their outcomes and the perception of the therapeutic relationship influences the development of intrinsic motivation.

Throughout this study, SDT themes regarding the need for competence, connectedness, and autonomy were evident as participants shared their perceptions of juvenile sex offender motivation to stop offending. Participants in this study addressed these connections in several ways. For example, participants spoke about competence in the context of offender's perception of self. Participants discussed competence dominates self-perception because it has a direct bearing on the belief in ability to do a skill well. Participants seemed to believe if offenders have a positive self-image as one who can desist they are more accepting of the treatment environment, increasing motivation to stop offending. Participants discussed two main aspects that impact competence, including the prevalence of neurodevelopmental conditions and offender relationships with treatment providers. It was reported that offenders with ADHD and autism disorders displayed less task attention and engaged in higher rates of inappropriate and impulsive acts. The perceived inability to control these acts reduces feelings of positive social functioning and competence. Participants additionally explained that the offender relationship with treatment providers impacts feelings of competence. All reported when this relationship is one of support and collaboration offender competence is enhanced.

Conversely, participants explained when offenders perceive a judgmental, non-supportive relationship competence is hindered.

This observation led to the SDT concept of autonomy, or the feeling that one has a choice in their behaviors rather than being controlled. This theme emerged in each of the participant interviews and relates to the theme of the provision of alternative interventions. The participants reported that offenders need to experience autonomy and feel like they have a choice in their behaviors to support motivation to stop offending. Participants explained that treatment providers can foster this need by attempting to understand the offender's perspective and refraining from trying to pressure them to act in a certain way. Participants appeared to believe autonomy could be fostered by providing alternative interventions in treatment based on offender characteristics, rather than expecting them to align with a preset program. Several participants discussed that providers often attempt to guilt offenders into behaving a certain way, which decreases motivation to stop offending. By acknowledging the offender's experiences and providing choice in how to behave, self-control is supported. Participants explained belief in self-control is imperative to prevent future offending.

The SDT concept of connectedness or relatedness was also captured in interviews as participants discussed the impact of the treatment atmosphere. All the participants shared their perception that support and empathetic interest from others positively impacts offender motivation. Some participants discussed this evidence in the offender-provider relationships, while others discussed connectedness in relation to peer relationships. Participants seemed to believe the stronger the connection to providers and

peers the better the treatment outcomes. Several participants discussed their personal interactions with offenders and their receptiveness to treatment when approached from an empathetic, non-judgmental stance. Participants stated when offenders can recognize that people care about them, they can build rapport and recognize that they have a lot of strengths.

Understanding that they are strong enough to complete the program and change their lives increases motivation to stop offending. Participants also appeared to believe when offenders feel connected to one another through similar experiences they are not as concerned about what their peers think. They can focus on the program and are not as worried about how they are perceived. Several participants specifically discussed ways that poor connections amongst peers negatively impacts motivation. They described that lack of connectedness to peers can cause tension and conflict during treatment, leading to issues such as anxiety. These issues make it difficult for offenders to develop motivation to stop offending because they are not focused on their recovery.

Limitations of the Study

Limitations are inherent in all forms of research including the current study. The first limitation was the inability to access the intended target of juvenile sex offenders. Due to the vulnerable nature of these individuals, and Institutional Review Board processes, I was compelled to collect my data from their treatment providers. Although the providers' perceptions provided a great amount of insight into this phenomenon, it pales in comparison to the actual lived experiences of juvenile sex offenders. The actual

lived experiences as told by juvenile sex offenders could have added additional value to this and future research.

Another limitation is the participants' perceptions were based on working with juvenile sex offenders receiving residential treatment, which may not be generalizable to other settings. Programs in juvenile detention centers, prison-based settings, and outpatient treatment centers may provide a different treatment experience for offenders.

Additionally, this study focused on male juvenile sex offenders, therefore the results may not be generalizable to other populations. For example, female offenders and offenders over the age of 18 may not have shared experiences. Therefore, the data cannot be reported to relate how these populations experience motivation to stop offending during residential treatment.

Recommendations for Future Research

When I embarked on this study, I intended to investigate the lived experiences of juvenile sex offenders receiving residential treatment. My goal was to obtain insight into ways that their motivation is developed, including aspects of the treatment program that support and hinder motivation. I chose this population and treatment setting due to the lack of research conducted in this area. Due to Institutional Review Board processes, I was unable to collect my data directly from the juveniles. Instead, data was collected from their treatment providers. Although they provided a great amount of insight into the impact of various aspects of the treatment program, the first-person experience was missing from this study. As a result, research involving the lived experiences of juvenile sex offenders receiving residential treatment remains limited. Further exploration into

their first-person experiences, specifically how they experience motivation to stop offending will be beneficial to the field.

In addition to exploring this phenomenon from the first-person experience, it is recommended that this study be replicated with enough female participants. Obtaining the female perspective will allow a comparison of gender differences in the motivation of juvenile sex offenders. I also recommend conducting this study in other settings outside of the residential treatment center including other inpatient and outpatient settings. This will help to determine if the current findings can be generalized to other settings.

Another area recommended for future research is to analyze the motivation of treatment providers working with juvenile sex offenders. Much of the data received identified the therapeutic relationship between the offender and treatment provider as having a significant impact on motivation to stop offending. By investigating how motivation within treatment providers is developed, insight can be obtained on ways to provide increased support.

Finally, research exploring the impact of sexualized music and television themes on motivation is recommended. Data from the current study suggests that these themes can send mixed messages by normalizing offending behaviors. By exploring this concept further, information can be obtained on ways that popular culture can deter the development of motivation, to inform future treatment interventions.

Implications

For several decades research has been conducted into sex offender motivation levels. We have learned a great deal about the adult offender, but little about the juvenile

offender. I focused on this gap in the current study and identified several implications for social change. These implications could mean that the focus of research not only addresses juvenile sex offender motivation, but also examines specific treatment interventions to reduce recidivism. Increasing social change may take time due to the accessibility of this population; however, implementing incremental changes can prove impactful.

The results of this study provide insight into how providers' perceptions of juvenile sex offender motivation during treatment can impact public policy and social change. One of the most important recommendations to social change would be to develop programs that include interventions involving support systems. Participants in the current study explained family involvement allows the offender to assimilate better upon discharge. This finding is also supported in the literature. Family involvement in treatment can help in identifying factors that can increase recidivism, and provide a better transition for juveniles exiting programs, to help manage future risk and facilitate healthy behaviors (Tolou-Shams et al., 2018). Implementing interventions such as family sessions could allow guardians to gain insight into ways that they can best support their juvenile and increase the potential for positive outcomes.

In addition to involving the family, this study found that policies can be implemented to improve the treatment atmosphere. Treatment providers can significantly impact offender motivation (Kelley et al., 2019). Requiring providers to undergo more relevant and specific training can increase competencies and support a positive treatment atmosphere (Kelley et al., 2019). Trauma-informed training on escalating behaviors,

trigger responses, and therapeutic rapport building are a few areas that can support this process. If staff are required to undergo this training the likelihood that they will unintentionally engage in triggering behaviors is reduced. If staff are not engaging in triggering behaviors offenders are better able to focus on their treatment, supporting positive social change at both the individual and societal level.

The current study also highlighted the importance of providing alternative interventions during treatment. No offender is the same. Individualized treatment plans that appeal to the responsivity of the juvenile supports a strengths-based approach. Offenders are empowered to build an internal locus of control supporting reduced recidivism, making rehabilitation possible. Implementing recreational therapy such as art, music, and pet therapy can allow offenders to discover new, healthy ways to express themselves which is beneficial to the offender reentering society (Bosgraaf, 2020).

The results of the study also revealed the impact of positive perception of self. When juveniles feel confident in their ability to change, they are more likely to become a productive citizen. Implementing treatment plans that support the development of positive self-concept and empowerment can support self-perception. Taking what is revealed in this study can promote social change by instilling hope in offenders that they are not defined by their past behaviors.

Conclusion

In this study, I evaluated the previous literature surrounding juvenile sex offender treatment. I evaluated treatment in various settings and the reported impacts on motivation. My goal was to expand on the current knowledge through assessment of the

perceptions of treatment providers of male juvenile sex offenders. I utilized thematic analysis to capture the themes from the perceptions of treatment providers of juvenile sex offenders receiving residential treatment. I established four themes from the research question. The four themes included support received, treatment atmosphere, provision of alternative interventions, and perceptions of self.

The results of this study and the themes presented can be utilized to inform future research exploring juvenile sex offender motivation to stop offending. All seven participants reported that support was a major influence on the formation of motivation to stop offending. They reported that offenders who lack familial/societal support, specifically those who did not have a positive male support in their lives, demonstrated low motivation levels. The majority participants reported that the treatment atmosphere significantly impacts motivation to stop offending. This is inclusive of all aspects of the atmosphere including education level and behaviors of staff, music and television themes, culture, interventions, peers, and being ostracized from the community. All the participants advised that offender motivation to stop offending is negatively impacted by the lack of alternative interventions within the treatment setting. Self-perception is impacted by many factors including personal traumas and stigmatization. Most of the participants discussed self-perception and motivation during their interviews. Further research into specific types of treatment programs and the impact on juvenile sex offender motivation may provide additional perspective on ways to support this population.

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