

Institution: Nottingham Trent University (NTU)		
Unit of Assessment: A04 - Psychology, Psychiatry & Neuroscience		
Title of case study: Changing policy and practice to widen the use of anti-libidinal medication to reduce problematic sexual arousal for people convicted of a sexual offence		
Period when the underpinning research was undertaken: 2014-present		
Details of staff conducting the underpinning research from the submitting unit:		
Names:	Roles:	Periods employed by submitting HEI:
Belinda Winder	Professor	2004-present
Rebecca Lievesley	Senior Lecturer	2010-present
Christine Norman	Senior Lecturer	2005-present
Period when the claimed impact occurred: 2014-2019		
Is this case study continued from a case study submitted in 2014? N		
1. Summary of the impact <p>In this five-year period, research by NTU's Sexual Offences, Crime and Misconduct Research Unit (SOCAMRU) has:</p> <ul style="list-style-type: none"> • Demonstrated the effectiveness of Fluoxetine (Selective Serotonin Reuptake Inhibitors; SSRI) as a prescription option for problematic sexual arousal (PSA) • Initiated a new UK treatment pathway across eight prisons and the community • Directed UK government debate about the prescription of anti-libidinal medication • Ensured that medical professionals and the UK Parole Board understand the research regarding the use of anti-libidinal medication • Provided training for prison and probation staff about anti-libidinal medication • Expanded international knowledge about best practice use of anti-libidinal medication among prison and medical professionals 		
2. Underpinning research <p>Sexual offending is at its highest recorded level since 2002. The Office for National Statistics estimates that 700,000 sexual offences are committed against adults and children annually and the Ministry of Justice reports that 13,400 people are serving prison sentences for a sexual offence (19% of the prison population and rising). This makes sexual offending a significant health, social and financial concern.</p> <p>Since 2000 [R3], problematic sexual arousal (PSA; also termed sexual preoccupation, hypersexuality and sexual compulsivity) has been highlighted as an important dynamic risk factor for sexual (re)offending. Despite this, PSA is the sole known risk factor that is not directly addressed by UK sexual offending treatment programmes (SOTPs) [S5]. Individuals suffering from PSA are more likely to reoffend, both in prison and the community, and PSA also appears to be a barrier to meaningful engagement in SOTPs, meaning it must be addressed prior to psychological interventions.</p> <p>The utility of pharmacological treatment for the treatment of PSA was raised in the 1990s by researchers [R4]. However, before research by SOCAMRU, anti-libidinal medication as a potentially valuable addition to the treatment of people convicted of sexual offences (PCSOs) had not been empirically evaluated in the UK prison context, and there was no such treatment pathway</p>		

available. In 2007, Her Majesty's Prison and Probation Service (HMPPS) facilitated a pilot trial in HMP Whatton, one of the largest prisons for PCSOs in Europe, and the trial commenced in 2009. The SOCAMRU team were approached by the Governor of HMP Whatton to lead the evaluation of this trial, due to their record of peer-reviewed studies in prisons, which began in 2011 led by Professor Belinda Winder. This research has been funded by Nottingham Trent University, HMP Whatton, Nottinghamshire Offender Healthcare, and the Offender Personality Disorder pathway, with the aim of addressing the health, social and financial impact of sexual offending.

Since 2014, the SOCAMRU team has published the first longitudinal studies demonstrating the impact of pharmacological treatment on PSA for PCSOs, assessed through multiple clinical tools and psychometrics [R3, R4, R6]. This research has demonstrated that both Selective Serotonin Reuptake Inhibitors (SSRIs; mainly Fluoxetine) and Anti-androgens (AAs) are effective at reducing difficulties associated with PSA by 50% and to levels similar to the general public [R3, R4]. In their 2021 study, both medications reduced the number of participants exhibiting problematic/clinical levels of sexual compulsivity, while these effects were not found for a control group [S2]. This triggered the decision by the National Offender Management Service (NOMS) in April 2016, to make anti-libidinal medication available across the majority of the UK prison estate.

Furthermore, between 2014 and 2018, the team conducted the first qualitative research into pharmacological treatment of PSA, conducting interviews with: (i) prison officers and psychological therapists [R1] (ii) PCSOs taking anti-libidinal medication for PSA [R1] and (iii) probation staff who managed PCSOs in the community [R2]. This research has corroborated the finding that pharmacological treatment is effective in managing PSA and allows PCSOs more 'head space' to engage in psychological interventions, which are essential to effective treatment [R1, S5]. Furthermore, it demonstrated the need for training to help prison staff understand who should be referred for the medication and how individuals taking the medication could be better supported [R1], as well as for probation staff on what taking the medication may mean about the individual's risk in the community [R2].

This research provides the first empirical evidence for the clinical effectiveness of SSRI, Fluoxetine (currently prescribed off-label) in reducing difficulties associated with PSA and the crucial basis for further and on-going research. The results have been a critical contribution to national and international changes in best practice for reducing PSA and risk of sexual reoffending [R5].

3. References to the research

- **R1** - Lievesley, R., Elliott, H.J., Winder, B., & Norman, C. (2014). Understanding service users' and therapists' experiences of pharmacological treatment for sexual preoccupation and/or hypersexuality in incarcerated sex offenders. *The Journal of Forensic Psychiatry and Psychology*, 25: 3, 262-287. Doi: [10.1080/14789949.2014.909867](https://doi.org/10.1080/14789949.2014.909867).
- **R2** - Elliott, H., Winder, B., Manby, E., Edwards, H., & Lievesley, R. (2018). "I kind of find that out by accident": probation staff experiences of pharmacological treatment for sexual preoccupation and hypersexuality. *Journal of Forensic Practice*, 20(1), 20-31.
- **R3** - Winder, B., Lievesley, R., Kaul, A., Elliott, H. J., Thorne, K., & Hocken, K. (2014). Preliminary evaluation of the use of pharmacological treatment with convicted sexual offenders experiencing high levels of sexual preoccupation, hypersexuality and/or sexual compulsivity. *The Journal of Forensic Psychiatry & Psychology*, 25(2), 176–194. DOI: [10.1080/14789949.2014.903504](https://doi.org/10.1080/14789949.2014.903504).
- **R4** - Winder, B., Lievesley, R., Elliott, H., Hocken, K., Faulkner, J., Norman, C. & Kaul, A. (2018). Evaluation of the use of pharmacological treatment with prisoners experiencing high levels of hypersexual disorder. *Journal of Forensic Psychiatry and Psychology*, 29:1, 53-71, DOI: [10.1080/14789949.2017.1337801](https://doi.org/10.1080/14789949.2017.1337801).

- **R5** - Winder, B., Fedoroff, J. P., Grubin, D., Klapilová, K., Kamenskov, M., Tucker, D., ... & Vvedensky, G. E. (2019). The pharmacologic treatment of problematic sexual interests, paraphilic disorders, and sexual preoccupation in adult men who have committed a sexual offence. *International Review of Psychiatry*, 1-10.
- **R6** - Winder, B., & Blagden, N. (2020). In C. Stott, B. Bradford, M. Radburn, & L. Savigar-Shaw (Eds.), *Making an Impact on Policing and Crime: Psychological Research, Policy and Practice*. Routledge.

The quality of this research has been evidenced by rigorous internal and external peer review panels, and via peer review through journals central to this field of enquiry.

4. Details of the impact

Between 2014 and 2019, research by the SOCAMRU has demonstrated the clinical effectiveness of anti-libidinal medication (particularly SSRI, Fluoxetine) in the treatment of PCSOs with PSA, resulting in a new UK treatment pathway across eight prisons and the community. Research findings have significantly impacted national and international debate about the prescription of anti-libidinal medication for PCSOs, and professionals and third-sector providers have been given accessible training and evidence-based advice on anti-libidinal medication for PSA.

Demonstrated the effectiveness of Fluoxetine (Selective Serotonin Reuptake Inhibitors; SSRI) as a prescription option for problematic sexual arousal (PSA)

Prior to SOCAMRU research, there was little evidence demonstrating the effectiveness of Fluoxetine as an anti-libidinal. SOCAMRU research examining the effectiveness of Fluoxetine and other SSRIs is particularly important since these medications are currently not part of NICE guidelines and therefore prescribed 'off label' [S5]. The NICE 2015 Guidelines [S1] cite Winder, Lievesley and Elliot (2014) as one of just three studies providing evidence for the potential effectiveness of SSRIs to treat PSA. Governor of HMP Whatton describes these findings as 'exceptionally important for work at HMP Whatton, driving forward prevention work in the community as well as in prisons' [S9]. This research therefore represents a significant step forward in providing PCSO suffering from PSA with the pharmacological support they need. These findings were also published in an Independent Monitoring Board report [S3].

Initiated a new UK treatment pathway across eight prisons and the community

SOCAMRU research findings, communicated through reports to HMPPS and journal papers, and evidenced in HMPPS' minutes, has led to a new UK treatment pathway, which has been rolled out to eight prisons since April 2016 and funded by HMPPS. It is estimated that anti-libidinal medication is now available to 10% of the prison population, which equates to roughly 7,000 individuals. Given that PSA is an important dynamic risk factor associated with sexual (re)offending, it is likely that this new treatment pathway will be responsible for preventing a number of sexual offences. As a national specialist for HMPPS notes, 'Prof Winder has had a substantial impact on the development of the new treatment pathway of medication for Her Majesty's Prison and Probation Service to manage problematic sexual arousal for individuals who have committed a sexual offence' [S6].

Directed UK government debate about the prescription of anti-libidinal medication

In 2020, the then Minister of Justice, David Gauke MP expressed the opinion that if anti-libidinal medication worked so well, it should be mandatory for all PCSOs. However, in 2018, Winder provided written evidence for a Ministerial Briefing, highlighting the negative ramifications of compulsory medication upon the Mental Health Act (1983) and the Mental Capacity Act (2005) [R6]. As a result of this and the work of the SOCAMRU team, the MOJ reassessed and rejected this proposal.

Ensured that medical professionals and the UK Parole Board understand the research regarding the use of anti-libidinal medication.

R1 is one of three peer-reviewed studies on the positive clinical effectiveness of SSRIs to be cited by NICE guidelines on Hypersexuality and Fluoxetine published in 2015 [S1]. This report provides best available evidence on the use of Fluoxetine for hypersexuality to UK policy makers, health professionals and social care workers. It states, '*fluoxetine may improve some measurements of hypersexuality and sexual preoccupation in men who have either been convicted of a sexual offence or who have a paraphilia or a non-paraphilic sexual addiction*'.

Furthermore, SOCAMRU research demonstrated that Parole Boards were sometimes 'seeing' prisoners on anti-libidinal medication as being more risky than other prisoners, since they needed 'drugs' to control themselves. Based on the work of the SOCAMRU team, changes were made to Parole Board Guidance to ensure that, parole boards understand the evidence regarding the use of anti-libidinal medication for PSA and have the confidence to make effective decisions in cases where the individual is taking this medication [R6]. An article was published in the Independent Monitoring Board magazine, a magazine sent to all members of the Association of Member of Independent Monitoring Board (AMIMB), where experts address a range of topics and identify best practice.

Provided training for prison and probation staff about anti-libidinal medication

SOCAMRU research has led to the development of a pilot training course for prison officers and therapists, staff responsible for providing initial referrals, which has enabled them to make appropriate referrals. This course successfully aided prison officers, probation staff and therapists in making appropriate referrals to manage Problematic Sexual Arousal' [S8]. Due to the success of this pilot course, a formal training course on sexual preoccupation was rolled out to more prison and probation staff.

In 2020 Winder was consulted by the Head of Practice and Training at HMPPS about training for probation staff in relation to the new treatment pathway. In 2018, SOCAMRU provided training for 130 Nottingham prison and probation staff. Following this, a senior probation officer noted that the training '*was immensely useful in terms of raising the profile of this medication as a treatment for offenders and will hopefully improve the outcomes for some offenders...*' [S7]. Three videos on anti-libidinal medication [S11] have since been shared with 25,000 Parole Board staff and an internal HMPPS learning platform was developed to 'help probation staff to manage service users who are taking the medication, and... support probation staff feeling competent to raise awareness of the medication to their service users, and to make referrals for the same' [S10].

Expanding international knowledge about best practice use of anti-libidinal medication among prison and medical professionals

The research team has worked with a wide-ranging group of international experts to create consistency and encourage international good practice. For example, in June 2019, the Justice Health Research Program in Sydney, Australia, requested ongoing support and guidance in setting up their own programme and evaluation of the medication. This research was helpful in guiding treatment approaches for PCSOs under supervision in the community, on parole, and those returning to the community across the country, thereby addressing Australian Government

research priority *Safeguarding Australia*, which seeks to “protect Australia from terrorism and crime”. The Head of the Justice Health Research Program described the ‘*valuable collaborative*’ relationship with Winder and noted that Winder had successfully ‘*advised on the study and also offered guidance for therapeutic intervention within our program*’ [S4].

5. Sources to corroborate the impact

- **S1:** NICE Guidelines ((<https://www.nice.org.uk/advice/esuom46/chapter/full-evidence-summary#introduction-and-current-guidance-2>)).
- **S2:** Reports to HM Prisons and Probation Service, HMP Whatton and NHS England*.
- **S3:** Independent Monitoring Board Report, 2013-2014
- **S4:** Testimonial from the Program Head for the Justice Health Research Program at the University of New South Wales*.
- **S5:** Evidence provided to Ruth Mann (Head of Interventions, HMPPS) on 01/03/2018 as a basis for her Ministerial brief to home secretary the then Minister of Justice, David Gauke MP regarding Gauke’s suggestions that MMSA should be mandatory.
- for everyone with a sexual conviction. (Ministerial Report (MoJ) to HMPPS March 2018.
- Ministerial Report (MoJ) to HMPPS March 2018.
- **S6:** Testimonial from National Specialist Lead Forensic Psychologist at HMPPS.
- **S7:** Testimonial from Senior Probation Officer stating the benefits and use of the research*
- **S8:** Testimonial letter from Research & Data lead for the OPD Pathway and Head of Joint OPD pathway
- **S9:** Testimonial from Governor of HMP Whatton.
- **S10:** Testimonial from Head of Practice Development, HMPPS
- **S11:** Evidence of training resources that NTU has provided to the South East Probation Service (10/06/16), National Offender Management Service (05/06/17), probation and prison staff (October 2020), training videos for the National Organisation for HMPPS (October 2020) and training for clinicians.

[* participant in the process of impact delivery]