

Legal Maneuvers or Emotional Survival: Decoding SVP Treatment Refusal

Darla Dixon, PsyD

Level

Intermediate

Room

Track

Sex Offender

CE

CPA/BBS/CJER

Bio

Darla Dixon, PsyD is a Senior Psychology Specialist who serves as the Trauma Informed Care Supervisor at Department of State Hospitals Coalinga. An EMDRIA Approved Consultant, Dr. Dixon leads the developing EMDR program at DSH-C. Darla has been trained in Level 3 of Deep Brain Reorienting and holds the ISSTD Advanced Certificate in Complex Trauma and Dissociation. Since 2020, Darla has dedicated herself to creating trauma informed culture change through knowledge sharing, cultural engagement, as well as policy & program evaluation. Darla enjoys providing opportunities to learn about and apply trauma informed care principles.

Narrative

The 2020 California Sex Offender Management Board Sexually Violent Predator Project: Introduction & Duration of SVP Detainee Status report summarizes reasons persons under the SVP commitment code may not participate in treatment. Barriers to successfully addressing criminogenic needs are framed as resistance by way of legal maneuvering, participant insincerity, or difficulty with ambivalence or discomfort approaching one's own risk factors. However, this bird's eye perspective suggests the need to address something more essential. 75.4% of individuals in sex offense treatment report having four or more traumas before age 18 (Grady, Levenson, Glover, Kavanagh, 2022). Such trauma histories complicate the treatment process for both the provider and patient. This presentation will clarify the link between trauma and disengagement from sex offense treatment. Drawing on lessons learned from trauma treatment and trauma informed care, Dr. Dixon will offer strategies and insights to enhance engagement in SOT participants so they can quickly get to work changing their lives.

Learning Objectives

1. Explain a treatment need through the lens of the adaptive information processing model
2. Identify one treatment barrier which can be addressed with trauma treatment
3. Name one SOT specific shift experienced post trauma treatment