



ABEL
SCREENING

STOPPING SEXUAL VIOLENCE- *particularly against CHILDREN*

Science-Based

Tools for Evaluation

& Treatment

The Abel Assessment *for sexual interest-2*[™] (AASI-2)

for Men, Women, Boys, or Girls

The Abel-Blasingame Assessment System

for individuals with intellectual disabilities[™]

Tools to Protect Children

The Diana Screen[®]

a screen to identify adults who are a sexual risk to children



THE
DIANA
SCREEN[®]

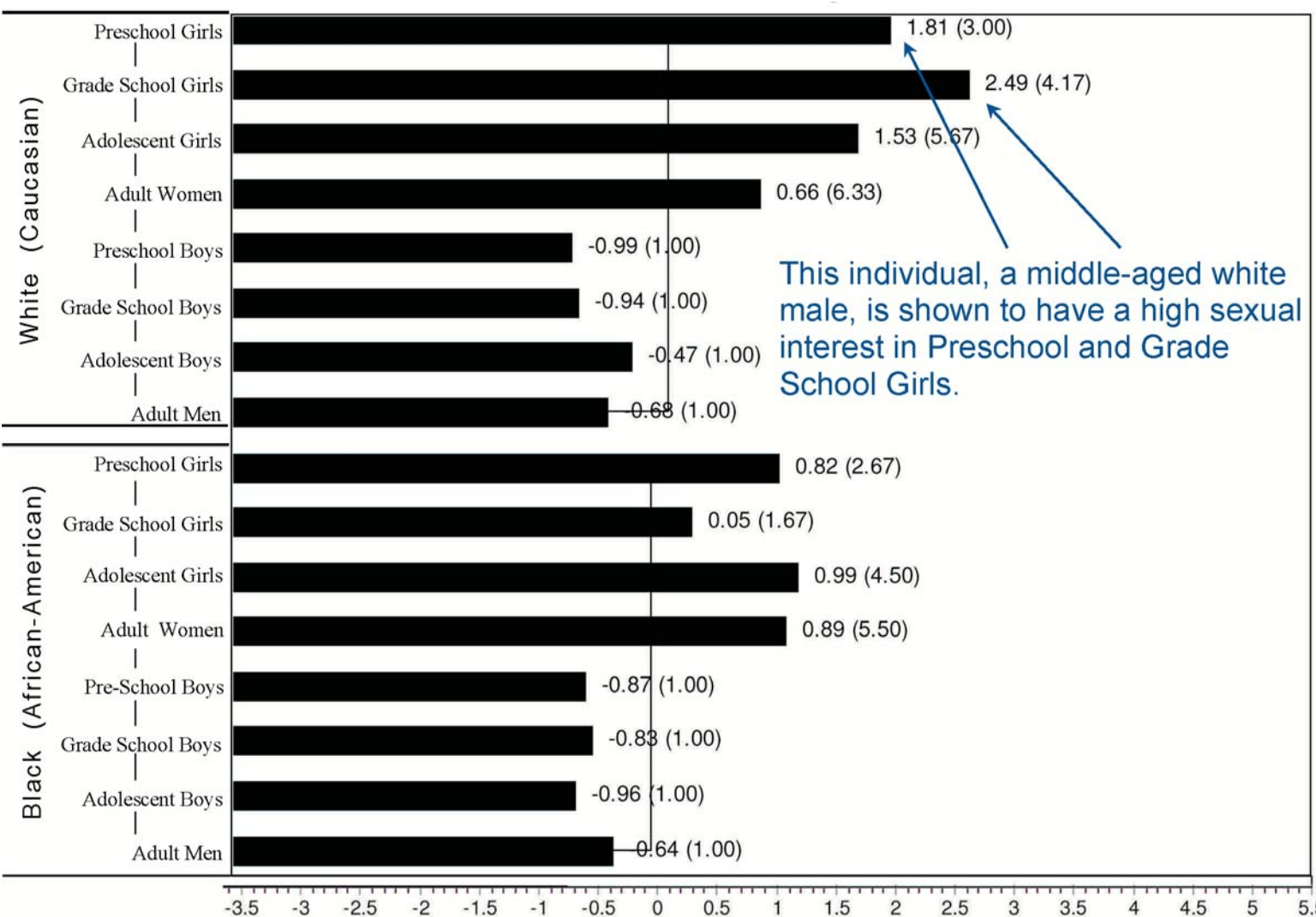
An Abel Child Protection Test

Comprehensive & Objective

Abel Assessment tests are administered on a Windows® laptop in two parts:

The primary component measures the client's **objective sexual interest** while viewing 160 digital pictures of clothed adults, adolescents, and children.

Sexual Interest Graph



This individual, a middle-aged white male, is shown to have a high sexual interest in Preschool and Grade School Girls.

The **comprehensive questionnaire** component records the client's self reported behaviors, accusations, arrests, and convictions. Questions regarding Internet pornography and a section for child sexual abuse survivors are now included. There are also questions designed to identify cognitive distortions and the client's degree of truthfulness.

Why are Abel Assessments

vital to the therapist?

Because you can...

Objectively measure sexual interest in children.

Identify the likelihood of past child sexual abuse behavior in men who deny.

Get immediate and detailed sex-specific behavior summarized in a comprehensive report

Write evidence-based reports

Determine client's dangerousness and supervision / surveillance requirements

Develop a treatment plan and monitor progress

Use the included report writing templates to merge summary and sexual interest graph results

Get free clinical support

Provide assessments for men, women, boys, girls, and those with intellectual, developmental, or learning disabilities

Because Abel Tests are...

Computerized

Easy-to-administer

Non-invasive & have no nude stimuli

Standardized

Accepted - used more than 100,000 times & passed Daubert hearings for admissibility

In use by over 3,000 therapists across North America

Empirically validated

Supporting research and prevention by collecting de-identified data

The Abel Assessment *for sexual interest -2™*

The Abel Assessment for sexual interest - 2™ (AASI-2) is a comprehensive tool for the evaluation of sexual abusers. It is specifically designed to objectively measure a client's sexual interests and obtain information regarding involvement in a number of abusive or problematic sexual behaviors.

Assessments for: ▶ Men ▶ Women ▶ Boys ▶ Girls

English or Spanish

Because different sections of the test work together, the AASI-2 is really a **system of evaluation tools** that allow the therapist to quickly receive a range of valuable information organized in one detailed report.

Each Abel Assessment Report includes:

- ▶ Objective Measurements of Sexual Interest in Children [Visual Reaction Time (VRT)]
- ▶ Danger Registry
- ▶ Cognitive Distortion Score
- ▶ Social Desirability Score [lie scale]
- ▶ Sexual Behaviors Summary Table
- ▶ Therapist's Reasons for Evaluation
- ▶ Detailed Summary of Admitted Sexual Behaviors
- ▶ Detailed Summary of Sexual Health Concerns
- ▶ History as a Victim of Sexual Abuse
- ▶ Emerick Sexual Victimization Scales
- ▶ Sexual Behaviors Ratings
- ▶ Sexual Fantasies Ratings
- ▶ Accusations, Arrests, and Convictions
- ▶ Questionnaire Data

Reports for Adult Men also contain:

- ▶ Probability of **PAST** Child Sexual Abuse* [See Next Page]

Reports for Adolescent Boys and Girls also include:

- ▶ Sexual Interest Vignette Scales
- ▶ Summary of Drug and Alcohol Use

***The Probability of PAST Child Sexual Abuse Behavior...**

*helps to **identify deniers***

*is **difficult to falsify** because it incorporates both the VRT and Questionnaire data into a complex logistical equation*

*provides **a powerful compliment** to the Sexual Interest Graph.*

*aids in **classifying client behavior***

Using the AASI-2

The AASI-2 is administered on a Windows®-based laptop.

Once the client completes the test, the evaluator sends the data electronically to Abel Screening for processing. The detailed report is returned to the evaluator within 10 to 20 minutes.

The AASI-2 for Adults (Men and Women) is written at a 7th Grade reading level and is intended for clients over 18.

The AASI-2 for Adolescents (Boys and Girls) is written at a 5th Grade reading level and is intended for clients as young as 12.

Treatment Planning:

Following assessment, the AASI-2 can also be used during treatment:

- ▶ If the clinician is looking for changes in the client's sexual interest in children, then a pre-treatment assessment using the AASI-2, followed by a post-treatment AASI-2, adds an evidence-based element to treatment progress.
- ▶ If treatment will be long in duration, you may want to do a pre-treatment AASI-2, use the AASI-2 halfway through treatment, and then a post-treatment AASI-2.
- ▶ If a client has completed the treatment program and has been moved to a maintenance program, we recommend re-assessment with the AASI-2 every 3-6 months.

The Abel-Blasingame Assessment System *for individuals with intellectual disabilities*[™]

The Abel-Blasingame Assessment System for individuals with intellectual disabilities[™] (ABID) also contains the objective measure of sexual interest and questionnaire components, but is specifically designed for use with adults and adolescents with FSIQs of 60 and above. The ABID is a comprehensive assessment system that may also be used with individuals who have learning and/or developmental disabilities.

appropriate for individuals with intellectual, learning or developmental disabilities

The ABID Questionnaire, written on a 2nd grade reading level, is read aloud by the evaluator and is administered as a semi-structured interview. Questions with **concrete visual aides** assist the therapist in determining the client's level of understanding of age, body parts, and sexuality.

Each ABID Assessment Report includes:

- ▶ Objective Measurements of Sexual Interest in Children [Visual Reaction Time (VRT)]
- ▶ Age Discrimination Review
- ▶ Sexual Attraction and Fantasy Survey
- ▶ Cognitive Distortion Scale
- ▶ Psychosexual and Sexual Abuse Victimization History
- ▶ Social Desirability Scale [Lie Scale]
- ▶ Substance Abuse History
- ▶ Accusations, Arrests, and Convictions Review
- ▶ Inappropriate Sexual Behaviors Summary and Narrative
- ▶ Items of Concern or Requiring Follow-up

Risk Assessment Tools:

- ▶ Client's Age
- ▶ Age and Gender of Victims
- ▶ Sexual and Non-sexual Accusations, Charges and Arrests
- ▶ Length of Live-in Relationships
- ▶ Maladaptive Sexual History
- ▶ Sexual Interest in Children

Preliminary Research on the ABID

Findings as presented by Gerry Blasingame, MA, LMFT at CCOSO 2007

The data from 150 adult male clients, both inpatient and outpatient were analyzed. The ages ranged from 18 to >65 years old. The FSIQ's of the sample ranged from 40 to over 90.

The abuse survivors of record were both adults and children. The findings of this preliminary study included:

- ▶ Visual reaction time (VRT) to the child stimuli categories were found to be significantly related to endorsing sexual fantasy vignettes about sexual behavior with children and forced sexual behavior with children.
- ▶ Endorsing sexual fantasy vignettes about sexual behavior with children and forced sexual behavior with children was also significantly related to the self-reported number of different children sexually abused.
- ▶ Disclosures of problematic sexual behaviors increased by an average of 46% over what was known prior to administering the ABID.
- ▶ Internal reliability for the 13 fantasy vignettes topics ranged from Cronbach alpha = .66 to alpha = .94.
- ▶ Internal reliability of the cognitive distortion items was alpha = .74
- ▶ Internal reliability of the social desirability items was alpha = .75

The median administration time for the ABID was 1 hour and 20 minutes (Mean = 1 hour and 30 minutes, Range = 30 minutes to 5 hours). This included breaks and stoppages for bathroom use, etc. At any time during administration of the questionnaire, the testing can be suspended and resumed at a later time.

Setting the Standard

Use and acceptance of the AASI-2 has grown dramatically over the past decade. Today many federal and state agencies, as well as professional organizations have made this test a part of their standards for the evaluation and treatment of child sexual abusers.

California: In 2003, the Department of Corrections began requiring the use of the AASI-2 by the therapists contracting to provide evaluation and treatment services to High Risk Sex Offenders.

Colorado: In 1992, the Colorado General Assembly passed legislation calling for the development of standards and guidelines for the assessment, evaluation, treatment, and behavioral monitoring of sex offenders. The first standards and guidelines were published in January 1996 and have been updated periodically. The standards developed by the Sex Offender management Board for the evaluation and treatment of adult sex offenders require the use of the AASI-2.

Georgia: In 2000, the state adopted rules for the evaluation and treatment of sex offenders on probation and later extended them to sex offenders on parole. The use of the AASI-2 is required under these rules.

Illinois: Beginning first in Cook County in the late 1990s, standards were adopted calling for the use of the AASI-2 in the evaluation and treatment of sex offenders. In 2003, these rules were expanded to encompass the entire state.

Iowa: The state's Civil Commitment Unit uses the AASI-2 in the evaluation of sex offenders.

Montana: The AASI-2 is used in the State Prison in Deer Lodge.

North Dakota: All eight of the State's Regional Human Service Centers use the AASI-2 in court ordered pre-sentencing evaluations.

Ohio: The Cuyahoga County Adult Probation Department provides an AASI-2 testing system to county therapists who conduct their evaluations. The Court Psychiatric Clinic in Cleveland also uses the AASI-2 in their evaluations.

South Carolina: The state's SVP Program uses the AASI-2 in its evaluations.

South Dakota: The AASI-2 is used at the South Dakota State Penitentiary.

Texas: In 1995, the Texas Council on Sex Offender Treatment adopted the Standard of Practice for Sex Offender Treatment Providers that delineated the appropriate evaluation and treatment procedures for sex offenders. The standards are updated every two years and call for the use of the AASI-2.

The U.S. Department of Defense: The AASI-2 is used in the evaluation of sex offenders at the Lackland Air Force Base facility.

What Clinicians Say...

I have used the Abel Assessment for sexual interest™ since 1995 and have found it not only to be a helpful component of my forensic evaluations, but a necessary element of my assessments and practice.

*William Burke, Ph.D.
South Eastern Assessments
Summerville, South Carolina*

I have used the Abel Assessment for sexual interest-2™ over 100 times in my private practice. It has been a very useful assessment device. It has provided necessary information for both treatment plans and for testifying in court.

*Paul Kradel, Ph.D.
Private Practice
Shepardstown, West Virginia*

The Abel Assessment for sexual interest™ has been an integral part of my practice for 11 years. I am impressed with the ongoing research that keeps the test on the cutting edge. The technical support and service at Abel Screening is great.

*Pam Hiner, Psy.D.
Treatment & Evaluation Services
Aurora, Colorado*

The AASI-2 is an invaluable component of our small sex offender treatment program. Results from the AASI-2 have helped inform our assessment of offenders' risk, while contributing to our recommendations regarding appropriate guidelines and limitations for offenders. Having the AASI-2 'in-house' allows us timely and flexible assessment of our own sex offender clients as well as allowing us to provide comprehensive evaluations for the courts and other treatment programs in our area. Thus far we have found the AASI-2 to be uncannily accurate, frequently reinforcing our clinical impressions, according well with the offense histories, and sometimes alerting us to previously unknown sexually deviant interest.

The administration of the test could not be simpler, and the staff at Abel Screening are incredibly supportive. There is always technical assistance available during business hours, and the staff are patient and informative. We have greatly appreciated the free clinical consultations with well-trained therapists. These consultations are particularly helpful when confronting a clinically challenging case. In short, the AASI-2 has brought a new dimension to our treatment program, and we consider it essential to the provision of treatment that meets the existing professional standards for sex offender treatment.

*Richard Cohan, Ph.D.
Sexual Abuse Services of the Northbay
Napa, California*

The Abel has been a very valuable tool in my working with individuals who commit sexually abusive behaviors. It provides me the data I need and I find that it facilitates client disclosures thereby increases treatment effectiveness. I would not operate in this field without this assessment instrument. The staff at Abel Screening are extremely helpful and responsive and have always treated me with dignity and respect.

*Bret White, Ph.D.
Midwest Clinical Forensics
Belton, Missouri*

Abel Screening Website: *free referrals*

Your agency or practice can be listed on our public website for referrals. In addition to the public-accessible site, there is a password-protected "Sites-Only" section of the website that allows access to:

educational updates
Q & A with Dr. Abel

training & support materials
the ASI Data-Bank

Continuing Education Training Conferences: *for new & experienced users*

Therapists can refine and refresh their skills in using Abel Assessments to evaluate and treat problematic sexual behavior, keep up-to-date on the latest enhancements to the software and reports, and learn about Abel Screening's latest research findings. This comprehensive training conference now offers a full-day just for new users where extensive hands-on training is provided. The following day(s) focus on clinical applications, integration of results, court testimony, and research. Training conferences are offered one to two times a year in Atlanta, Georgia.

*Customized training in other locations or for large groups available by arrangement.
Please call 800-806-2235 to discuss options.*

Processing

Processing includes electronic transmission of the:

- ▶ Sexual Interest Graph from the objective data (digital image portion of the test).
- ▶ Report Summary from the Questionnaire
- ▶ Ratings and Values derived from both Graph and Questionnaire data

Fee Range: \$47.50 - \$95.00 (*per assessment based on volume*)

Volume processing discounts are based on the combined number of Abel Tests processed per calendar quarter. This fee is reduced for non-profit and government organizations.

Hardware Requirements

Abel Assessment Tools are administered on a Windows®-based laptop meeting the following specifications:

- ▶ **Laptop Computer Only** - CD-ROM, Internet Connection, and external corded mouse
14" or 15" standard screen OR minimum 17" widescreen
- ▶ **Operating Systems:** Windows 2000, XP Home, XP Pro, Vista Complete or Vista Enterprise in 32 bit operating systems. *64 bit versions of Vista or Windows XP are not supported.*
- ▶ **Memory:** At least 512 Megabytes of RAM
- ▶ **Processors:** Pentium III Celeron or better
- ▶ **Speed:** 750 MHz or better

About the Developer

Gene G. Abel, M.D., is a physician, psychiatrist, and scientist. He is nationally and internationally recognized as a leading authority in the field of sexual violence. For more than 30 years, Dr. Abel has researched sexual behavior problems to find ways to stop sexual violence - particularly against children.

In 1995 he established Abel Screening, Inc. to provide therapists and criminal justice professionals with tests to evaluate and treat individuals with sexual behavioral problems.

The National Institute of Mental Health (NIMH) has awarded Dr. Abel funding for six long-term studies and has published over 100 medical articles in scientific journals. Dr. Abel has presented his research in the United States, Australia, Canada, Denmark, Venezuela, Sweden, Germany, Israel and England.

He has been recognized for his research and contributions to the field with numerous awards including: **MASTERS AND JOHNSON AWARD**, presented by The Society for Sex Therapy and Research in recognition of sex research, **SIGNIFICANT ACHIEVEMENT AWARD**, given by the Association for the Treatment of Sexual Abusers in recognition of dedication and leadership in the field of sex offender research, evaluation and treatment, and the **NATIONAL AWARD** given by the International Conference on the Treatment of Sex Offenders for perseverance in a new field of study and willingness to share new knowledge.

Dr. Abel is the Director of Behavioral Medicine Institute and the Founder and President of Abel Screening, Inc., both located in Atlanta, Georgia. He is also a co-founder of a national, science-based nonprofit organization, The Child Molestation Research and Prevention Institute. He co-authored with Nora Harlow *The Stop Child Molestation Book*.

The Abel-Blasingame Assessment System *for individuals with intellectual disabilities*[™] was developed by Gene G. Abel, M.D. and **Gerry D. Blasingame, MA, LMFT**. Mr. Blasingame is a licensed marriage and family therapist practicing in California who has worked with child abuse victims and offenders since 1985. He is the Executive Director of New Directions to Hope, a nonprofit community based organization that specializes in treatment and professional mental health services in the field of family violence. Mr. Blasingame is also the Program Director of the Sexual Offender Rehabilitative Treatment (SORT) Program, serving those who have committed acts of sexual misconduct including individuals with intellectual disabilities.

Mr. Blasingame is the past president of The California Coalition on Sexual Offending and is on the Board of Directors of the association for the Treatment of Sexual Abusers. He has provided numerous training and workshops on the treatment of mainstream and developmentally delayed clients and is the author of *Developmentally Disabled Persons with Sexual Behavior Problems, 2nd edition (2005)*.

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Also Available...



Protect children in your organization by identifying child sexual abusers

What is it?

The Diana Screen® (The Diana) is a two-part computerized test used to determine the risk of the test-taker having sexually abused a child in the past.

While The Diana is a pass / fail test, it goes beyond a simple questionnaire to include objectively measured sexual interest in children. The technology that identifies sexual interest, which is a major part of The Diana Screen® formula, is empirically validated and has been used by therapists and criminal justice professionals more than 100,000 times.

Who should use it?

Any organization where there are professionals or volunteers who work with children. The Diana Screen® protects children from sexual abuse and helps protect the organization from sexual abuse litigation.

We already do criminal records and background checks...why should we use The Diana Screen®?

While criminal records checks, background checks, interviewing, and even psychological evaluations are all important and should be done, none of these specifically address sexual interest in children. Furthermore, only about 4% of all child sexual abusers have a criminal record; the majority of individuals who molest children have never been convicted.

Call 1-800-806-2235 for additional information

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Suite 120
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www.abelscreening.com**