

AN ABSTRACT OF THE THESIS OF

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Title: The Effect of Locus of Control on Recidivism Rates

of Sexual and Non-sexual Offenders

Abstract approved: Cooper B. Holmes *Cooper B Holmes*

Recidivism of criminal offenders is an important topic with treatment providers as well as the general public. This study was designed investigate whether locus of control may be added to treatment modalities in an effort to aid the offender to learn skills that may help more acceptable choices to be made. Locus of control is one of the factors that has been recognized that may influence treatment effectiveness.

Sexual offenders who have an estimated 80% recidivism rate may tend to be externally controlled and do not have the skills to choose not to reoffend.

To examine the effect on locus of control and recidivism of offenders, two groups of newly released men and women from prison were used for this study. The groups were divided by type of offense, either sexual or non-sexual offenders and surveyed using a scale to determine internal or external locus of control. After 3 months, the recidivism of each offender was verified using the State of Kansas computer system. Results suggested more sexual offenders scored as externally controlled while non-sexual offenders scored as internally controlled. The results of the recidivism were significant as the sexual offenders were returned to prison at a higher rate than non-sexual offenders.

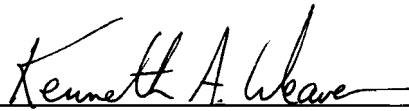
THE EFFECT OF LOCUS OF CONTROL ON
RECIDIVISM RATES OF SEXUAL AND NON-SEXUAL OFFENDERS

A Thesis
Presented to
the Department of Psychology and Special Education
EMPORIA STATE UNIVERSITY

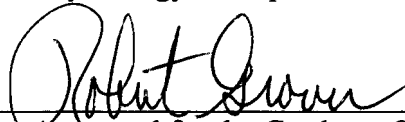
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CHAPTER 1

INTRODUCTION

The purpose of this study was to compare external versus internal Locus of Control (LOC) and the recidivism rates of non-sexual and sexual offenders. The intention is to enhance current treatment of the sexual offender to include skills the offender can use on a continuous basis to prevent reoffending. As the offenders attend sexual offender treatment programs, they may gain an internal LOC, which may assist in the ability to gain control over their actions, and choose not to reoffend.

Historically, existing treatment programs have not been statistically effective in the rehabilitation of sexual offenders. The reason for this ineffectiveness is hypothesized by this study to be a lack of internal LOC of the sexual offender. This can be shown by comparing existing locus of control of convicted sexual offenders with convicted non-sexual offenders. Locus of control is the degree to which people attributes the cause of their behaviors to environmental factors or to their own decisions. People who are externally controlled will blame or credit the outside world for their failures or successes while an internally controlled person will believe they influence their life experiences by their own skills and abilities.

With recidivism or repeat offense rates of sexual offenders as high as 80%, the treatment and rehabilitation of their behavior is very important to society and to the professionals who are attempting to provide treatment for them. Although this topic has been studied extensively in the past, it appears the current modality of treatment is not adequate to facilitate a permanent behavior change in the convicted sexual offender. The current structure of sexual offender treatment programs does not

appear to give the sexual offender enough information to develop an internal LOC which would allow a socially acceptable lifestyle.

Literature Review

Locus of Control (LOC) is defined as social reinforcement that does not automatically create a behavior (Rotter, 1966). To explain further, even though an action may have been approved or disapproved by society the behavior has not automatically been reinforced as a continued behavior. Rotter defines external LOC as believing that one attains desired outcomes due primarily to chance or fate. Internal LOC is defined as believing one can influence reinforcers via personal skills and abilities (1954, 1966). Lu (1999) indicated persons having an internal LOC have a greater chance at personal happiness. Lefley (1998) found that many believe that to favor internal versus external LOC is an idea adopted by Western cultures, as it is preferred as persons who have considerable control over events in their lives may help to determine their own course of action. The notion is that most human problems have human causes and a person with enough motivation will learn to master and triumph over problems of nature. Marks (1998) stated that having personal control over situations is “always the best scenario” (p. 251). Ward hypothesized that LOC may predict that “persons consciously decide what should be done on the basis of what is important to them” (1994, p. 984). Persons who are internally controlled believe they have the necessary skills, strengths, and resources within themselves to carry out their goals (Green, Lee, Mentzer, Pinnell, & Niles, 1998). Amrhein, Bond, and Hamilton (1999) stated that the loss of internal control

may be associated with impaired physical and mental health and a decrease in personal and social well being.

Attitudes toward the law were shown to be affected by locus of control with the internally controlled having a better attitude toward law than the externally controlled (Na & Loftus, 1998). Internal LOC was found to be an important predictor of treatment success for the sexual offender (Fisher, Beech & Browne, 1998). Graham's study (1993) focused on the “dissociation, locus of control and alienation in an attempt to develop treatment programs suited to the needs and personality characteristics of sex offenders” (p. 41). Graham suggested that sex offenders were more likely to be disassociated, to be externally controlled and to feel more alienated.

Treatment must address victim and perpetrator dynamics and should focus on “detaching the offender from an overreliance on power as a form of interpersonal connection and on helping to build an internalized locus of control” (Maddock, 1995, p. 147). Ward and Hudson (1998) developed a model of the relapse process that consisted of developing skills that allows the offender to practice goal directed actions to be use in different circumstances. Wiehe (1986) found that abusers appeared to have significantly less emphatic ability and an external LOC orientation as compared to non-abusers. Miner and Dwyer (1995) found that sex offenders who dropped out of sex offender treatment seemed to have fewer internal motivations for remaining in and completing sexual offender treatment. Crolley, Roys, Thyer, and Bordnick (1998) found that “treatment goals have changed over time, from those solely dedicated to suppressing deviant arousal to those aimed at promoting more

normative sexual behavior, including social skills essential to meeting suitable partners and self-control skills such as avoidance of high-risk situations (drug or alcohol use, contact with children, etc.)” (p. 487).

Seto and Barbaree (1999) found offender who were compliant in treatment were more likely to commit a new offense of some kind and much more likely to commit a new serious offense than offenders who denied their crimes or were resistant to treatment. The reasons for this were listed as the offender may be socially skilled and good at manipulation and those skills may have been learned in treatment. Kear-Colwell and Pollock (1997) investigated whether motivation or confrontation was the best treatment approach for the sex offender. They found that to use the confrontation method may create feelings of powerlessness in the offenders taking the responsibility of change from them but gave them conscious building skills that may help them see and accept reality. Motivation was seen as the “key aspect of treatment and a factor that must be the responsibility of offenders themselves for beneficial change to occur” (p. 30). Kear-Colwell and Pollock also found offenders that were

faced with an awareness that their engagement in the problem behavior is dissonant with their personal goals and welfare, whereas, the confrontational approach produces an awareness in offenders of their badness, often reinforcing an already low level of self-esteem and leading to possible feelings of helplessness. (p. 31)

Kaden (1999) suggested that the confrontational approach makes “little psychological sense and may be damaging to a sexual offender because it reinforces

the offender's view that his locus of control is outside himself” (p. 368). McGrath, Hoke, and Vojtisek (1998) studied recidivism rates of sexual offenders after treatment and found that after specialized treatment the rate of sexual reoffense was low (p. 220). They also state that any “treatment that produces any reduction in victimization rates prevents enormous human suffering” and is a “significant accomplishment in a society that values its members” (p. 222).

Measuring Locus of Control

Locus of control can be measured using several different test instruments: one being the Internal-External Locus of Control Scale designed by Rotter (1966). However, this scale does not allow for degree of locus of control as the test only allows for true or false responses. “One unresolved issue of the control literature concerns the dimensionality of the construct” which may not allow for scorable results determining LOC (Berrenberg, 1987, p. 195). Therefore, the scale used for this study was the Belief in Personal Control Scale (BPCS) which was designed by Berrenberg (1987). This survey was designed as a Likert scale, which allows the participant to rate the effect of each item on themselves on a scale of 1 to 5. The BPCS has three factors that are tested, the first being the general external control factor, the second exaggerated internal control and the last being God-mediated control.

The Likert scale of this instrument may allow the researcher to score and receive results that show what degree a person is either externally or internally controlled. Dr. Berrenberg gave permission for this researcher to use this instrument (personal communication, Feb. 18, 2000). She felt the test was appropriate for the planned

research. Berrenberg also stated that the BPCS has the advantage “over Rotter’s LOC of already being validated with a Likert format.”

According to K.S.A. 21-3501 (1995), a sex offender is classified as having been convicted of any “unlawful sex act.” This includes, but is not limited to, such charges of indecent liberties with a child, criminal sodomy, lewd and lascivious behavior, indecent solicitation of a child, promoting and patronizing a prostitute, sexual exploitation of a child, sexual battery, incest and rape.

The Offender Supervision Handbook (1999) issued by the Kansas Department of Corrections (KDOC) is given to each offender released from prison regardless of his or her conviction. It lists the requirements placed upon each individual to complete a successful parole. Some of the requirements are to report current address and any travel, to obey all federal and state laws, to register with the local Sheriff’s office within 15 days of arrival in the county of residence if convicted of a sexual offense, to not possess any firearms or weapons of any kind. Parolees also agree to not engage in any assaultive activities or to possess or consume any narcotics or alcohol unless prescribed by a licensed medical practitioner. Parolees agree to not associate with any persons involved in any illegal activities and to secure and maintain reasonable and steady employment. Other conditions include compliance with mental health treatment programs and no contact with the victim of their convictions. The KDOC also has special conditions which can be placed upon an offender that may include items such as no contact of any kind with a person less than 18 years of age, no pornography of any kind, electronic monitoring, and community service duties. (Internal Management Manual and Procedure, 1998)

Recidivism or relapse is defined by the KDOC as the “rate of return to Kansas prisons by offenders released to post-incarceration supervision” (Bowman, personal communication, 2000). The statistics of this information is kept for offenders returning for new charges or for violation(s) of the conditions of Parole. Marshall (1999) stated that relapse prevention “should describe techniques needed to assist the offender in maintaining the progress he has made in therapy” (p. 224). Marshall (1994) completed a study of 13,000 offenders of all types released from prison in England and Wales in 1987 and followed them for 4 years. He found that 7% of the released prisoners who had a history of sexual offending were responsible for 31% of the subsequent sex offense convictions.

Research Questions

Based on the past research, which has not compared recidivism rates with LOC, the following research questions were developed:

Research Question 1: Was there a difference of LOC between sexual and non-sexual offenders?

Research Question 2: Does internal or external LOC make a significant impact on recidivism rates of offenders while on parole?

CHAPTER 2

METHOD

Participants

The sample was chosen from the newly released inmates released from August through November 2001 who were convicted of any criminal offense in the state of Kansas. There were two groups each consisting of 20 offenders for a total of 40. The first group consisted of 20 men whose most recent conviction had been of a sexual offense as defined by the state of Kansas. The second group also consisted of 12 men and 6 women parolees who had been convicted of crimes not of a sexual nature such as drug possession, theft, burglary, or murder.

Instrumentation

Each participant was given an informed consent form (Appendix A) which was collected before the distribution of the testing instrument (Appendix B). The testing instrument was the Belief in Personal Control Scale – short version (BPCS) (Berrenberg, 1987). This instrument is a 45-item scale with the purpose of measuring personal control. The test measures three factors of control: general external control consisting of 19 statements, exaggerated internal control consisting of 17 statements, and God-mediated control that had 9 statements. Examples of statements were “I can make things happen easily, getting what you want is a matter of knowing the right people, and I rely on God to help me control my life.” Each factor is scored either general external control or exaggerated internal control; the

score that was the greater of the two resulted in classification of external or internal Locus of Control.

The BPCS is a Likert scale test allowing participants to circle the level of control they feel concerning a particular item. Each of the 45 items are rated on a 5-point scale consisting of always true, often true, sometimes true, rarely true, or never true. This survey was completed in approximately 10 to 20 minutes using a pencil to circle the desired response.

Scores for the BPCS were based upon Berrenberg's (1987) criteria. Each item was placed on a separate subscale, these scores are added for internally controlled, exaggerated externally controlled and God-mediated control. The first subscale "assesses the extent to which an individual believes his or her outcomes are self-produced (internally) or produced by the fate of others (externality)." The second subscale "measures an extreme and unrealistic belief in personal control." The third subscale "measures the belief that God can be enlisted in the achievement of outcomes (distinguishing between individuals who believe they have no control over their outcomes and those who believe they control outcomes through God)" (p. 203). Each of the three subscales was totaled individually to determine which is the greater as scores on the first subscale above 68.91 are considered internally controlled, exaggerated externally controlled are scores higher than 55.57 on the second subscale, and scores on the third subscale exceeding 28.27 were considered God-mediated controlled. Elevated scores on the second subscale indicate an unrealistic belief in personal control. Although the scores of the last subscale are not pertinent to this study, any interesting findings or correlations were reported.

Procedure

The testing for this research was conducted in the main parole office in Wichita where parolees attended an orientation meeting. Orientation is conducted once a week with group size varying from 10 to 30 new releases. The data were collected by this researcher who attended the orientation meetings weekly until the two groups of 20 were obtained. Each parolee attending the orientation was given an explanation of the survey and asked for their voluntary participation. It was explained that they would not receive any compensation or receive any special treatment for their participation. In addition, it was clarified that they were not subject to any punitive consequences if they do not wish to participate in the research project.

Participants were instructed not to place their name on the actual survey to insure confidentiality but were asked to place the first and last initial of their assigned parole officer in the upper right hand corner of the survey. This researcher read aloud the instructions that are on the top of each survey. The participants were then asked if they would like the researcher to read each statement aloud and allow adequate time to mark the appropriate response. This was not requested so the researcher encouraged the participants to ask any questions relevant to the study. Each question asked was noted to allow uniformity of information in each of the groups. The information given in each group was given to the other group. If the participants did not understand the meaning of a word on the survey, a dictionary was available to be used to allow standardization in each group. The standardization of testing procedures was maintained as each definition of the requested word was

provided to each group. Parolees not wishing to participate were taken back to the waiting room to allow the participants the opportunity to complete the survey. The researcher remained in the room while the surveys were completed to be available for questions and definitions. The participants were asked to return the surveys to the researcher whereupon the researcher verified the initials of their assigned parole officer were on the survey. This was done so the researcher was able to ascertain from the parole officer the status of the conviction. After completion of all the surveys in each meeting, all participants were thanked for their participation.

After 40 surveys were completed, 20 in each group, the surveys were scored according to the scoring instructions of the BPCS. As this was a longitudinal study, the recidivism rates for each name on the consent forms were then checked using the state reporting system 3 months after completion of the data collection.

CHAPTER 3

RESULTS

Research Question 1

Research Question 1 asked if there was a difference between sexual and non-sexual offenders concerning LOC. The cut-off scores of the BPCS were 68.91 to be considered internally controlled, 55.57 for externally controlled, and scores exceeding 28.27 were considered God mediated. Each factor was scored separately to make a determination of each offender tested.

Of the 20 sexual offenders who participated in this study, 14 scored in the externally controlled, 3 scored internal LOC, and 3 felt God influenced their lives. When scoring the 20 non-sexual offenders, 2 felt their actions were controlled by others while 16 were internally controlled, and 2 scored in the God mediated rating. Results of the Chi-square yielded significant difference, $\chi^2(2, N = 40) = 19.78, p \leq .001$. Sexual offenders indicated more external controlled and the non-sexual offender demonstrated more internal LOC. The third factor, God-mediated control, did not indicate significance for this group. Therefore, there will not be further discussion of this factor.

These findings answered Research Question 1 as it was conclusive there was a significant difference between the LOC of these 2 types of offenders. The sexual offender most often allows external influences determine life choices. This may enable reoffending with minimal guilt or remorse and allows the offender to place the blame on the victim or others. The non-sexual offender scored higher in internal LOC allowing for decisions and choices to be made with internal motivators thus

accepting blame and facing consequences of their own actions. Incorporating concepts of LOC into present cognitive based sexual offender treatment programs may assist the sexual offender to develop the skills necessary to make responsible choices. The decisions sexual offenders make affects their potential victims but places an undue burden on an already over-crowded prison system.

Research Question 2

Research Question 2 considered the impact LOC may have on recidivism rates of offenders while on parole. The externally controlled group consisted of 16 offenders that were reincarcerated at 4 times the rate of the internally controlled that had 2 returned to prison during the time period. Of the 40 participants involved in this study, 10 were returned to prison within 3 months of release. The Chi Square completed on this information indicated significance, $\chi^2(1, N = 40) = 4.8, p \leq .05$. More externally controlled offenders were likely to be returned to prison than the internally controlled group.

The results of this statistical analysis indicated there is likely an impact of recidivism rates and LOC. The offender whether sexual or non-sexual offender that is internally controlled may use self-motivators to influence decisions that affect themselves. The offender that lacks these internal skills and demonstrates external LOC may act in such ways to reoffend without accepting culpability or accountability. This type of offender again lacks the proficiency in coping well and in decision making skills to allow for a crime free life style. Persons that are externally controlled may depend too heavily on family members, parole officers, or

the court system to guide their lives. When these controllers are absent the offender may not feel they are able to understand what is considered right or wrong.

The internally controlled offender may have a better attitude toward law and the stipulations placed upon them by the courts and parole officers. Treatments that teach the offender to become less dependent on the powers of others may be more prone to learn the skills needed to develop an internal LOC. Sexual offenders who either discontinued or were discharged from treatment were more likely to display an external LOC. Addressing the issues of reoffending may not be adequate in preparing the sexual offender for a socially acceptable lifestyle, the offender should learn to adapt to changing situations and have internal self-control skills.

Treatment that addresses these factors may well reduce the numbers of victims of the sexual or non-sexual offender. While as society tends to be more concerned with the underage victims of sexual offenders we should not forget of the others that have been victims of robbery, burglary, or murder. The offender that is internally controlled may commit less offenses that may lead to reincarceration and less victims of crime in general.

CHAPTER 4

DISCUSSION

This study indicated Locus of Control (LOC) might be an important factor in the reoffending of sexual offenders. Data from this study suggested sexual offenders tend to feel they cannot control their own behaviors but does not prove they may be more prone to reoffend.

Research Questions

Question 1 asked if there was a difference of LOC in sexual and non-sexual offenders. This research found there was a significant difference in the beliefs of the participants. Sexual offenders tended to believe they lacked internal control and may be more prone to reoffend than the non-sexual offenders. The sexual offender may feel the victim may be given by chance or fate therefore they must reoffend. This offender may feel he does not have a “chance at happiness” as stated by Lu in 1999. The motivation to remain crime free should be one of an internal feeling not one set by the parole officer or the treatment provider. The non-sexual offenders who scored higher on internal LOC may feel he or she has the “skills, strengths, and resources within themselves” that allows them to achieve their own goals. The decrease of well being felt by the externally controlled sexual offender may allow them to justify the continuing sexual offenses.

The second research question asked if the effect of LOC was significant to recidivism rates of offenders while on parole. According to this research and the definition of recidivism for the State of Kansas, more sexual offenders had their

parole revoked than the non-sexual offender. The results of the BPCS indicated sexual offenders were more externally controlled and had higher recidivism rates than the non-sexual offender. Maddock (1995) found in his research that treatment must teach the offender power is not a form of “interpersonal connection” and should assist with building an internal LOC. Sexual offenders who were internally controlled were prone to dropout of treatment before completion as they did not have external motivators to remain in the treatment program (Miner & Dwyer, 1995). This suggested the sexual offender should have a balance of internal and external control. The external controls should include the justice system imposing required treatment programs and structured intensive supervision. The internal control factors should be a part of the treatment to assist the offender in making better life choices. Persons who were internally controlled had a better attitude toward the legal system which may cause either type of offender to follow the guidelines placed on them by the department of corrections. In a study completed by Seto and Barbaree it was found offenders who were amenable in treatment were more likely to “commit a new serious offense” (1999). This may imply that men who are in denial of their crimes or were resistant to treatment may be more successful in treatment if the proper treatment is used for particular offenders. Sexual offender treatment programs contracted by the State of Kansas tend to remove offenders who do not admit to their crimes or disagree with the philosophy of the program. According to Miner and Dwyer (1995) sexual offenders “who failed to complete treatment committed three times as many offenses as those who completed” (p. 90).

Treatment programs in this state are typically cognitively based to allow the

offender to think and reason on their past criminal actions. However, at times the “confrontational approach” may make the offender aware of their “badness” and has the risk of “reinforcing an already low self-esteem” this may lead to further offenses (Kear-Colwell and Pollock, 1997). In 1999, Kaden found that the confrontational approach does not make sense and may harm the offender and possibly lead to further feelings of helplessness. Kear-Colwell and Pollock indicated “the skillful therapist will best facilitate change if he [sic] understands the process of change and learns how to activate or instigate the unfolding of that process” (1997, p. 21).

Interesting results were noted as data was being gathered for this study; the sexual offender did not volunteer as quickly to complete the survey as the non-sexual offender. Also, female and younger appearing parolees were typically the first to agree to participate and often encouraged others to participate as well. Most participants also seemed eager to discuss after completion of the survey their experiences from prison and expectations of the desires for the future. The participants openly discussed their feelings of treatment programs with the majority feelings what is offered is inadequate to their individual needs. This may lend impact to the study by Ward and Hudson who found a self-regulation model of relapse may work best with offenders (1998). This may indicate each offender has varied motivators to chose to reoffend or to remain crime free. “Understanding the factors associated with relapse” may help clinicians to tailor treatment to individual offenders (p. 723).

These results may be partially due to the fact that a study such as this has not yet been completed and as the offender was newly released from prison. The

participant may have not been able to change the processes that assisted with adjustment to prison life. The skills required to be compliant and cooperative while in prison may be externally motivated and may take time for the offender to develop the needed internal control. Following with these participants would be informative at six month, one year, two years, and five years post-release intervals to find if the feeling of locus of control change with time. Recidivism rates at those times may in conjunction with changes may lead to a more permanent change in the person's thinking processes.

To prove these results were conclusive, it would be helpful to survey a larger group of persons when convicted of a crime, released from prison, and a third follow-up survey after being on parole from prison for one year. This information may then be able to suggest any need for this type of information to be applied to treatment of sexual offenders. A larger sample group from several prison facilities from various regions in the United States may also lend different results as the expectations of prisoners and parolees may vary.

Lastly, the types of crimes may be interesting to compare to LOC and recidivism rates as it could be helpful to distinguish which type of sexual offenses reoccur more frequently. The motivation for such crimes as indecent liberties of a child varies greatly from those who rape adult victims. Coercion and bribery may be the method to obtain victims of the pedophile while fear or overpowering a victim may be the choice of action for the rapist. For non-sexual offenders who would be more likely to commit an act that would require a return to prison as opposed to other non-sexual but unlawful offenses?

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APPENDICES

Appendix A
Informed Consent Document

The Division of Psychology at Emporia State University supports the practice of protection for human subjects participating in research. The following information is provided so that you can decide whether you wish to participate in the present study. You should be aware that even if you agree to participate, you are free to withdraw at any time, and that if you withdraw from the study, you will not be subjected to reprimand or any other form of reproach.

This study is designed to gather information on your opinion of life expectations. This study was designed to gain insight into possible treatment programs which may be beneficial to persons being released from prison. It is hoped to be able to improve the rehabilitative process to allow a better adjustment to the release to society.

I understand that I can withdraw from this study at any time and that there is no risk or other forms of discomfort involved. My involvement includes a brief paper and pencil survey which should take no longer than 20 minutes to complete. I understand that I do not have to sign any other form or survey other than this consent document, and therefore my privacy as related to this study is ensured.

I have read the above statements and have been fully advised of the procedures to be used in this project. I have been given sufficient opportunity to ask any questions concerning the procedures and possible risks and I assume them voluntarily. I likewise understand that I can withdraw from the study at any time without being subjected to reprimand or reproach.

 Participant

 Date

 Witness

 Date

APPENDIX B

BELIEF IN PERSONAL CONTROL SCALE

This questionnaire consists of items describing possible perceptions you may have of yourself, others, and life in general. Please respond to each of statements below by indicating the extent to which that statement describes your beliefs. For each statement circle the one best answer that describes your feelings: 1 = Always True; 2 = Often True; 3 = Sometimes True; 4 = Rarely True; 5 = Never True.

- | | | | | | |
|--|---|---|---|---|---|
| 1. I can make things happen easily. | 1 | 2 | 3 | 4 | 5 |
| 2. Getting what you want is a matter of knowing the right people. | 1 | 2 | 3 | 4 | 5 |
| 3. My behavior is dictated by the demands of society. | 1 | 2 | 3 | 4 | 5 |
| 4. If I just keep trying, I can overcome any obstacle. | 1 | 2 | 3 | 4 | 5 |
| 5. I can succeed with God's help. | 1 | 2 | 3 | 4 | 5 |
| 6. I find that luck plays a bigger role in my life than my ability. | 1 | 2 | 3 | 4 | 5 |
| 7. If nothing is happening, I go out and make it happen. | 1 | 2 | 3 | 4 | 5 |
| 8. I am solely responsible for the outcomes in my life. | 1 | 2 | 3 | 4 | 5 |
| 9. I rely on God to help me control my life. | 1 | 2 | 3 | 4 | 5 |
| 10. Regardless of the obstacles, I refuse to quit trying. | 1 | 2 | 3 | 4 | 5 |
| 11. My success is a matter of good luck. | 1 | 2 | 3 | 4 | 5 |
| 12. Getting what you want is a matter of being in the right place at the right time. | 1 | 2 | 3 | 4 | 5 |
| 13. I am able to control effectively the behavior of others. | 1 | 2 | 3 | 4 | 5 |
| 14. If I need help, I know that God is there for me. | 1 | 2 | 3 | 4 | 5 |
| 15. I feel that other people have more control over my life than I do. | 1 | 2 | 3 | 4 | 5 |
| 16. There is little that I can do to change my destiny. | 1 | 2 | 3 | 4 | 5 |
| 17. I feel that I can control my life as much as is humanly possible. | 1 | 2 | 3 | 4 | 5 |
| 18. God rewards me if I obey his laws. | 1 | 2 | 3 | 4 | 5 |
| 19. I am not the master of my own fate. | 1 | 2 | 3 | 4 | 5 |
| 20. I continue to strive for a goal long after others would have given up. | 1 | 2 | 3 | 4 | 5 |

21. Most things in my life I just can't control.	1	2	3	4	5
22. God helps me to control my life.	1	2	3	4	5
23. I have more control over my life than other people have over theirs.	1	2	3	4	5
24. I actively strive to make things happen for myself.	1	2	3	4	5
25. Other people hinder my ability to direct my life.	1	2	3	4	5
26. What happens to me is a matter of good or bad fortune.	1	2	3	4	5
27. When something stands in my way, I go around it.	1	2	3	4	5
28. I can be whatever I want to be.	1	2	3	4	5
29. I know how to get what I want from others.	1	2	3	4	5
30. Fate can be blames for my failures.	1	2	3	4	5
31. With Gods' help, I can be whatever I want to be.	1	2	3	4	5
32. I am the victim of circumstances beyond my control.	1	2	3	4	5
33. I can control my own thoughts.	1	2	3	4	5
34. There is nothing that happens to me that I don't control.	1	2	3	4	5
35. Whenever I run up against some obstacle, I strive even harder to overcome it and reach my goal.	1	2	3	4	5
36. By placing my life in God's hands, all things are possible.	1	2	3	4	5
37. I am the mercy of my physical impulses.	1	2	3	4	5
38. In this life, what happens to me is determined by fate.	1	2	3	4	5
39. My actions are the result of God working through me.	1	2	3	4	5
40. I am the victim of social forces.	1	2	3	4	5
41. Controlling my life involves mind over matter.	1	2	3	4	5
42. When I want something, I assert myself in order to get it.	1	2	3	4	5
43. The unconscious mind, over which I have no control, directs my course in life.	1	2	3	4	5
44. If I really want something, I pray to God to bring it to me.	1	2	3	4	5
45. I am not really in control of the outcomes in my life.	1	2	3	4	5

APPENDIX C

7/99

APPLICATION FOR APPROVAL TO USE HUMAN SUBJECTS

For R & G use only File No. _____ _____	Date approved _____ Full Review _____ Expedited Review _____ Exempted Review
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This application should be submitted, along with the Informed Consent Document and supplemental material, to the Institutional Review Board for Treatment of Human Subjects, Research and Grants Center, Plumb Hall 313F, Campus Box 4003.

1. Name of Principal Investigator(s) (Individuals(s) administering the procedures): **Brenda L. Trammel**
2. Departmental Affiliation: **Graduate Student of Clinical Psychology**
3. Person to who notification should be sent: **Brenda L. Trammel**
4. Title of Project: **An Examination of the Effects of Locus of Control on Recidivism of Sexual and Non-sexual Offenders.**
5. Funding Agency (if applicable): **None**
6. This is a: **Thesis**
7. Project Purpose(s): **To complete the requirements of a graduate degree in Clinical Psychology and to study the effects of Locus of Control and recidivism rates.**
8. Describe the proposed subjects: (age, sex, race, or other special characteristics, such as students in a specific class, etc.) **Adult males and females who are newly released by the Kansas Department of Corrections (KDOC) on to parole (post-release) status from prison facilities.**
9. Describe how the subjects are to be selected: **Randomly – as parolees attend orientation which is scheduled by the KDOC Wichita Parole Office.**
10. Describe the proposed procedures in the project. Any proposed experimental activities that are included in evaluation, research, development, demonstration, instruction, study, treatments, debriefing, questionnaires, and similar projects must be described here. Copies of questionnaires, survey instruments, or tests should be attached. (Use additional page if necessary.) **Participants will be administered a paper and pencil survey (attached). At this time, there is not a published study which compares these two variables, Locus of Control and Recidivism.**
11. Will questionnaires, tests, or related research instruments not explained in question #10 be used? **No, only the attached survey will be administered.**
12. Will electrical or mechanical devices be applied to the subjects?
No.
13. Do the benefits of the research outweigh the risks to the human subjects?
Yes, it is hoped this research will help to gain insight into the possible causes of the recidivism rates of offenders.

14. Are there any possible emergencies which might arise in utilization of human subjects in this project?

No, there are no known dangers to the participants.

15. What provisions will you take for keeping research data private? (Be specific.)

The participants will not be required to sign their names on the actual survey. Also, after the data is accumulated and scores assigned, the questionnaire will be destroyed.

Attach a copy of the informed consent document, as it will be used for your subjects.

STATEMENT OF AGREEMENT: I have acquainted myself with the Federal Regulations and University policy regarding the use of human subjects in research and related activities and will conduct this project in accordance with those requirements. Any changes in procedures will be cleared through the Institutional Review Board of Human Subjects.

Signature of Principal Investigator

Date

Faculty Advisor/instructor on project (if applicable)

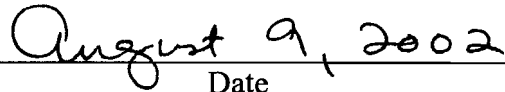
Date

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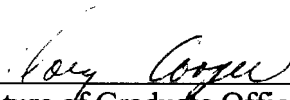
Signature of Author



Date

The Effect of Locus of Control on Recidivism
Rates of Sexual and Non-Sexual Offenders

Title of Thesis



Signature of Graduate Office Staff Member

revised