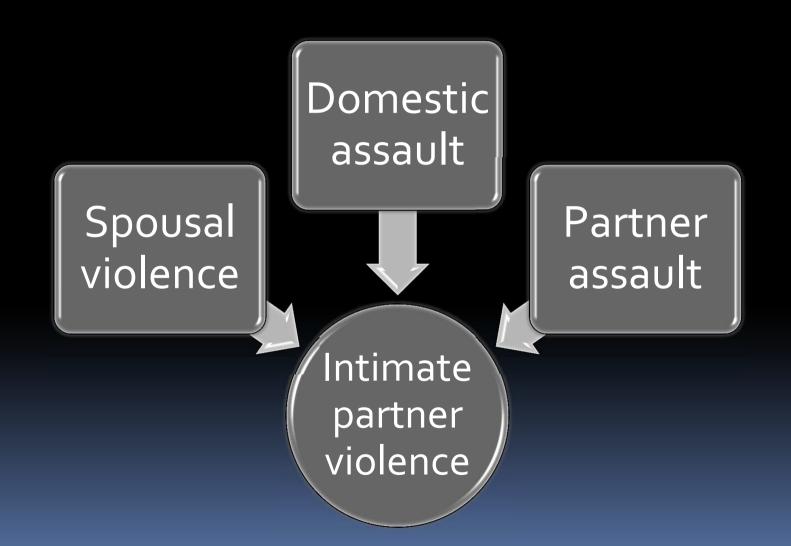




**AETAP 2015** 

# ASSESSMENT OF LETHAL SPOUSAL VIOLENCE

## Intimate Partner Violence (IPV)



#### Risk

 A hazard that is incompletely understood and therefore that can be forecast only with uncertainty

#### What Risk Factors to Consider?

- Three primary inclusion criteria
  - Empirical accuracy
    - Sources: "predictive" studies, comparisons of lethal/non-lethal samples
  - Professional practical utility
    - Sources: Government reports, crime statistics, coroner reports, fatality reviews, interviews with survivors
  - Legal fairness and reasonableness

## Risk Factors

Risk factors influence decisions



#### Models of Risk Assessment

#### Discretionary

- Information
   weighted and
   combined according
   to the evaluator's
   judgment
- AKA informal, intuitive, impressionistic

#### Non-Discretionary

- Information
   weighted and
   combined using
   fixed and explicit
   rules
- AKA actuarial, algorithmic, mechanical

## Example Non-Discretionary: DA

- Danger Assessment (Campbell, 1985)
- Multi-item actuarial instrument to assess risk for IPV "lethality"
- Completed on the basis of interview with victims of male-to-female IPV
  - First, use "violence calendar" to review frequency and severity of spousal assault in past year
  - Second, answer 20 specific questions

## DA: Development

- Originally developed to identify females at risk of killing their male batterers
  - Later, risk for IPV homicide (femicide) by males
  - Later, risk for life-threatening IPV by males
- Originally 15 items, now 20 items
  - Simple: Items scored o/1 and summed
  - Complex: Items weighted and summed

### DA: Items

- 1. Has the physical violence increased in severity or frequency over the past year?
- 2. Does he own a gun?
- 3. Have you left him after living together during the past year?
- 4. Is he unemployed?
- 5. Has he ever used a weapon against you or threatened you with a lethal weapon?
- 6. Does he threaten to kill you?
- 7. Has he avoided being arrested for domestic violence?
- 8. Do you have a child that is not his?
- 9. Has he ever forced you to have sex when you did not wish to do so?
- 10. Does he ever try to choke you?

## DA: Items (cont.)

- 11. Does he use illegal drugs?
- 12. Is he an alcoholic or problem drinker?
- 13. Does he control most or all of your daily activities?
- 14. Is he violently and constantly jealous of you?
- 15. Have you ever been beaten by him while you were pregnant?
- 16. Have you ever threatened or tried to commit suicide?
- 17. Has he ever threatened or tried to commit suicide?
- 18. Does he threaten to harm your children?
- 19. Do you believe he is capable of killing you?
- 20. Does he follow or spy on you, leave threatening notes or messages on answering machine, destroy your property, or call you when you don't want him to?

## DA: Complex Scoring

- Add 1 point for each of "yes" to questions 1 through 20
- Add 4 points for each "yes" to questions 2 and 3
  - Subtract 3 points if 3a is checked
- Add 3 points for a "yes" to question 4
- Add 2 points for a "yes" to questions 5, 6, and 7
- Add 1 point for each "yes" to questions 8 and 9

## DA: Complex Scoring (cont.)

- Less than 8 = "variable danger"
  - Be sure to tell women level can change quickly watch for other signs of danger, believe in their gut"
- 8 to 13 = "increased danger"
  - "Advise women of risk, assertive safety planning; consult with judges, high level of supervision recommendations"
- 14 to 17 = "severe danger"
  - "Advise women of risk, assertive safety planning; consult with judges, high level of supervision recommendations"
- 18 or more = "extreme danger"
  - "Advise of serious danger-take assertive actions-call for criminal justice or other professional help-recommend highest bail, highest sentencing, highest probation supervision"

#### SPJ

 Relies on guidelines to structure the exercise of professional discretion

Guide prevention via planning

Reflect best practice

Specify basic risk factors

Don't restrict scope

No scoring rules

Good for monitoring change

## SPJ Approaches



## Testing the Models

## Study 1 (Watt et al., 2013)

- Goal was to evaluate the ability of 5 risk assessment instruments to discriminate between known cases of IPV (non-lethal) and IPF (lethal)
  - 3 actuarial: DA, ODARA, and DVRAG
  - 2 SPJ: SARA and B-SAFER

#### Method

- Narratives constructed from police reports ending 24 hours before index offence
  - IPV: 13 solved cases from 2002-2009 in BC, Canada
  - IPF: 13 solved cases from 1997 in BC, Canada
- Two raters coded case narratives using risk assessment instruments, blind to outcome
  - IRR (ICC1) for ratings was high, Mdn = .88
  - Consensus ratings used for validity analyses

## Total Scores: M (SD)

	IPV	IPF	d
DA	10.69 (7.90)	14.38 (10.68)	.39
ODARA	6.46 (2.37)	4.85 (3.13)	58
DVRAG	16.38 (11.97)	10.00 (13.32)	50
SARA	17.08 (8.54)	19.23 (7.57)	.27
BSAFER	13.46 (4.61)	14.77 (4.23)	.03

## Categories: N (%) High Risk

	IPV	IPF	Odds
DA	3 (23%)	6 (46%)	2.86
ODARA	8 (62%)	5 (39%)	0.39
DVRAG	5 (39%)	2 (15%)	0.29
SARA	3 (23%)	6 (46%)	2.86
BSAFER	2 (15%)	6 (46%)	4.71*

## Appropriate to use?

- DA requires
  - History of physical violence
  - Violence within past year
- ODARA and DVRAG require
  - History of serious physical violence
  - Known to police
  - History of cohabitation

## Appropriate Cases

- IPV
  - DA: 10 of 13 cases appropriate
  - ODARA and DVRAG: 5 of 13 cases appropriate
- IPF
  - DA: 4 of 13 cases appropriate
  - ODARA and DVRAG: 4 of 13 cases appropriate

## Implications

#### Research

 Need to examine the relative utility of violence risk assessment instruments for informing management strategies and safety planning

#### Practice

- Need to clarify intended goals/uses of tools
- Need to clarify when tools are appropriate to use
- Need to examine use of tools by diverse professionals

## Study 2 (Hart & Storey, 2011)

 Goal was to evaluate the Danger Assessment as a victim-based risk assessment

#### Assessments

- Original assessments (N=100) conducted by experienced clinical-forensic psychologist between 2000 and 2009, based on interviews with perpetrators and victims and file review
- Case files subsequently coded by two trained, experienced, PhD-level graduate students in clinical-forensic psychology
  - Two independent ratings for each case, followed by consensus ratings

#### Instruments

- Danger Assessment
  - Standard procedure: Victim Only
  - Experimental procedure: Victim + File
- Ontario Domestic Assault Risk Assessment
  - Victim + File
- Brief Spousal Assault for the Evaluation of Risk
  - Victim + Flle

## DA Total Score

	M	(SD)
Current Study*		
Victim Only	17.4	(7.3)
Victim + File	18.0	(7.0)
Campbell et al. (2009)		
Attempted Femicides	18.7	(6.1)
Abused Controls	7.7	(5.0)

<sup>\*</sup> t (99) = 2.97, p = .004

## DA Risk Category

	Variable	Increased	Severe	Extreme
Current Study*				
Victim Only	11%	17%	17%	55%
Victim + File	9%	18%	16%	57%
Campbell et al. (2009)				
Attempted Femicides	1%	20%	24%	55%
Abused Controls	53%	33%	10%	4%

## Concurrent Validity, I

Risk Score	<b>Victim Only</b>	Victim + File
ODARA	.25	.27
B-SAFER	.46	.48
Intimate Partner Violence	.48	.46
Psychosocial Adjustment	.20	.24
Victim Vulnerabilities	.22	-33

## Concurrent Validity, II

ODARA Category	Variable Danger	Increased Danger	Severe Danger	Extreme Danger	N
1	0	1	0	0	1
2	1	0	0	0	1
3	1	0	0	2	3
4	0	1	0	1	2
5	1	1	2	1	5
6	5/3	7/9	6	20	38
7	3	7/6	9/8	31/33	50
N	11/9	17 / 18	17 / 16	55 / 57	100

## Concurrent Validity, III

B-SAFER Category	Variable Danger	Increased Danger	Severe Danger	Extreme Danger	N
Low	3	0	1	6	10
Moderate	7/5	15 / 17	9	25	56
High	1	2/1	7/6	24 / 26	34
N	11/9	17 / 18	17 / 16	55 / 57	100

## Follow Up

- Mdn time since assessment, 5.7 yrs
- Homicides
  - o femicides
  - 1 non-IPV homicide
- Coding of non-fatal IPV recidivism in progress

#### Conclusions

- Relying solely on victims resulted in lower estimated risk on the DA
- DA scores were much higher in this sample than in past research by Campbell et al. (2009)
- DA had moderate to high concurrent validity with respect to ODARA and B-SAFER
  - Moderate for risk categories
  - High for risk scores
- DA appears to over-estimate risk

#### Recommendations

- Use DA to elicit history of IPV and risk factors for IPV in risk assessment and safety planning
  - Use items, Ignore total scores and categories
- Use DA as an index of relative risk
  - Use items and total scores, Ignore categories
- Use different DA cutoffs
  - Use categories established by new research or local norms

## Using the SPJ Method

The SARA-V<sub>3</sub>

# SARA-V3

Worksheet for Version 3 of the Spousal Assault Risk Assessment Guide (SARA-V3)

# Step 1: Case Information

# Jentifying Information

N. Contract of

Name:

Evaluated by:

₫

Date completed (YYYY-MM-DD):

Sources of information reviewed:

National Offender Management Service

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## Development

#### Revision of earlier versions of SARA

- 1994, 1995, 1999
- Response to feedback

#### Influenced by advancements in SPJ

- B-SAFER, SAM, HCR-20<sup>V3</sup>
- Added relevance ratings, formulation, scenario planning, victim vulnerability factors, expanded management

#### Updated literature review

- Scientific and professional literatures
- More attention to lethality

### Administration

Step 1

Case information

Step 2

Presence of factors

Step 3

Relevance of factors

Step 4

Risk scenarios

Step 5

Management strategies

Step 6

Conclusory opinions

## Nature of IPV

### History includes...

- 1. Intimidation
- 2. Threats
- 3. Physical Harm
- 4. Sexual Harm
- 5. Severe IPV
- 6. Chronic IPV
- 7. Escalating IPV
- 8. IPV-Related Supervision Violations

## Perpetrator Risk Factors

### Problems with...

- 1. Intimate Relationships
- 2. Non-Intimate Relationships
- 3. Employment Finances
- 4. Trauma/Victimization
- 5. General Antisocial Conduct
- 6. Major Mental Disorder
- 7. Personality Disorder
- 8. Substance Use
- 9. Violent/Suicidal Ideation
- 10. Distorted Thinking About IPV

## Victim Vulnerability Factors

Problems with...

- 1. Barriers to Security
- 2. Barriers to Independence
- 3. Interpersonal Resources
- 4. Community Resources
- 5. Attitudes or Behavior
- 6. Mental Health

### Basic Scenarios

### Repeat

 Consider all past IPV, not just most recent

#### Twist

 Change in motivation, victimology, behavioral topography

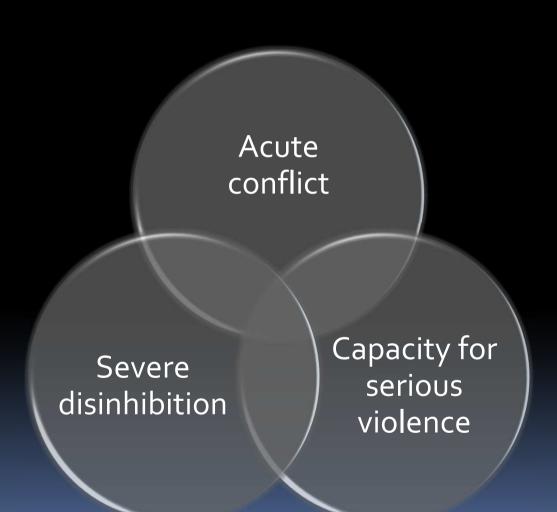
### Escalation

Including lethal or "worst case"

### Improvement

 Including desistence or "best case"

# Lethality Scenarios



### Acute Conflict

- Involved in serious dispute or very upset over outcome of dispute
  - Especially marital separation, child custody
- Important warning signs:
  - Stalking
  - Ultimatum or conditional threat
    - "If you don't..."

## Capacity for Serious Violence

- Demonstrated ability or willingness to engage in life-threatening violence
  - Especially current thoughts of violence, history of lifethreatening violence
- Important warning signs:
  - Current thoughts of violence involve weapons or other high-lethality methods (e.g., strangulation)
  - Used weapons or high-lethality methods in past
  - Recent escalation of violence or violent thoughts

### Severe Disinhibition

- Mental state may overcome usual inhibitions against life-threatening violence
  - Especially mental or emotional problems
- Important warning signs:
  - Serious substance use
  - Serious mental illness (e.g., psychosis, depression)
  - Suicidal or nihilistic thoughts (loss of hope)

# Management Strategies

#### Monitoring

Surveillance or repeated assessment

#### Supervision

 Imposition of controls or restriction of freedoms

#### Treatment

 Rehabilitation, including further assessment

#### Victim Safety Planning

 Enhancement of security resources for identifiable targets

### Issues

### Case Prioritization

 Degree of effort or intervention required

# Serious Physical Harm

 Risk for serious or life-threatening violence

#### Imminent Violence

 Risk that violence will occur in near future

### Other Risks Indicated

 Urgent intervention taken or needed

#### Case Review

 Date for review and triggers for special review

### Contact Information

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