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                       (Frequently Asked Questions)

Author: Kristin Bechtel and Bill Woodward

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National Institute of Corrections
White Paper
Overview of Domestic Violence (DV) Risk Assessment Instruments
Frequently Asked Questions

Kristin Bechtel and Bill Woodward

Why do we need a risk assessment instrument for DV offenders?

There are many risk assessment instruments available to the corrections community. We need DV and general assessment instruments to:

- Build case plans focused on criminogenic needs and dynamic risk factors to reduce re-offending.
- Predict risk of re-offending generally.
- Predict risk of re-offending DV or other violence.
- Distinguish between higher risk offenders and low-risk offenders to ensure high-risk offenders receive the majority of cognitive behavioral treatment services.
- Avoid mixing high-risk offenders with low-risk offenders in treatment programs.

What instruments should I use to assess DV offenders?

We recommend that jurisdictions assess DV offenders using a general third generation assessment tool such as the LSI-R (LS/CMI), Compas, OAS (Offender Screening Tool – Arizona), etc. There is evidence that these tools do identify DV offenders, especially those who are also involved in other offenses, better than offense-specific assessments such as the Domestic Violence Screening Instrument (DVSI) or the Spousal Assault Risk Assessment (SARA). Conversely, the DVSI and SARA do not appear to predict general offending—especially for those scoring low (SARA) or administrative (DVSI) (nor were they designed to predict general offending).[1] Since this data from one state may not apply to all jurisdictions, we recommend a similar validity study be performed in your jurisdiction to ensure proper implementation.

Also longitudinal self-report studies show that most "aggravated assault" offenders progress to violent crime through predicted patterns of general offending.[2] Therefore, it is not a surprise that a general offending instrument would also predict domestic violence offending. The LSI-R shows excellent prediction of violence as well as general offending, and a recent study showed the LSI-R to have better predictive ability than the PCL-R—a known violence prediction tool.[3]

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1   Unpublished Hawaii data show low-risk SARA offenders are still recidivating 48% and the administrative level on the DVSI are recidivating 42% of the time with general offenses.

2   Delbert Elliott, "Serious Violent Offenders: Onset, Developmental Course, and Termination," *Criminology* 32(February):1–21, 1994.

3   Gendreau, et al, "Is the PCL-R Really the "Unparalleled" Measure of Offender Risk? A Lesson in Knowledge Cumulation," *Criminal Justice and Behavior* 29(No. 4):397–426, 2002.

Therefore, if your jurisdiction finds a similar failure to predict general recidivism for DV-specific risk tools, we recommend all DV offenders be assessed using a general/violent recidivism instrument prior to using the more specific instruments such as the SARA, DVSI, Dangerousness Assessment (DA), or ODARA[4].

What if our caseloads are too high to provide a full general/violent assessment of all DV offenders?

Some jurisdictions that find completing a full third generation risk instrument too time intensive use a "proxy" for that instrument to decide whether a full assessment is necessary. The most used "proxy" is the three-question proxy, i.e., age at first arrest, current age, and number of prior arrests. The scores for this proxy are arrayed in an eight-point scale. Each jurisdiction should decide where the cutoff score will occur based on their own data, ensuring to the extent possible that low- and high-risk offenders are not mixed in treatment.
Those scoring above the cutoff are then assessed using the full-risk instrument. In the case of DV, the offenders scoring below the cutoff would be treated in the lowest level of treatment available, unless overridden by the officer to higher levels of treatment. Those scoring above the cutoff would be assessed with a DV tool which maximizes dynamic risk variables and has been validated, such as the DVSI, SARA, and/or DA. These offenders are then treated as a higher risk DV offender.[5]

Can we just do our DVSI, SARA, or other assessment alone on all DV offenders?

No. We recommend that all DV offenders be assessed using one of the two strategies indicated above before a specific DV assessment is used. There are several reasons for this recommendation. First, without using the generic full assessment (with proxy, if appropriate), it is difficult to identify multiple offenders and their criminogenic needs; second, many multiple offenders are missed by using a DV assessment alone; and third, case management will be enhanced, i.e., more risk and protective factors will be identified from the full assessment and the DV-specific assessment.

How do we know there are "low" risk DV offenders?

Research that tracked offenders for nine years indicated that there are DV offenders who offend a few times and are not otherwise involved in the criminal justice system. These offenders appear to reduce offending quite quickly.[6] Assuming these offenders will normally score low risk on a general risk assessment instrument, which should be tested in each jurisdiction, they should be treated using generally acceptable lower levels of treatment.[7]

In addition, research shows that some offenders do not re-offend after an arrest. These lower risk offenders appear to have a higher stake in conformity (such as a job, pro social friends, community engagement, pro

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4   ODARA (Ontario Domestic Assault Risk Assessment) while in limited use is showing better predictive ability (d = .68), while other results are as follows: DVSI (d = .39), SARA (d = .47), and DA (d = .58).

5   Proxies allow interviews to be reduced from an hour for most instruments to about 10 minutes and are usually highly correlated with the actual instrument being used. However, proxies should never be substituted for the full instrument in case planning, as proxies often contain only static elements and few dynamic elements, which are necessary for case planning.

6   Douglas Wilson, *A Longitudinal Study of a Cohort of Batterers Arraigned in a Massachusetts District Court 1995–2004* (National Institute of Justice, August 2006).

7   These offenders may be the same offenders who are more likely to stop offending after the arrest (employed at time of arrest). These offenders appear to have a strong stake in conformity, but they must be assessed to ensure that they are scoring lower risk based on a general risk assessment. If they are in fact low risk, they would go into a low-risk treatment group.

social significant other, etc.) which appears to protect from re-offending.[8]

We put all DV offenders in the same treatment, so why does all this assessment matter?

Assessment matters because low-risk offenders should not be placed in treatment with high-risk offenders (i.e., mixing of risk levels in treatment will increase offending of low-risk offenders[9]).

What if a low risk offender, re-offends?

Should a new DV offense occur, these low-risk offenders should be assessed again and treated as a high-risk offenders, using administrative overrides if necessary.

How should I select an assessment instrument?

The following should be considered when selecting a tool:
- Reliability of the instrument
- Validity of the instrument
- Ease of finding data used
- Time it takes to use
- Ease of adoption
- Feasibility of adoption
- Cost of adoption
- Outcome desired. DV only?
- Similarity to other instruments used in the jurisdiction

What specific instruments are available and commonly used in the U.S.?

Each instrument has its strengths and weaknesses. Some common tools are:

SARA – Spousal Assault Risk Assessment Guide
(Kropp, Hart, Webster and Eaves 1994; Kropp et al, 2000).

- 20-item instrument designed to screen for empirically established risk factors related to spousal or family-related assault
- The SARA includes both static and dynamic risk factors of violent recidivism
- Static Factors: general and DV criminal history
- Dynamic Factors: psychosocial adjustment, aversive attitudes, thinking errors associated with escalation in assaults (both violent and sexual), thinking errors associated with using weapons, threatening statements, and violating restraining orders, employment issues

DVSI – Domestic Violence Screening Instrument

- Contains generally static risk factors which makes it an efficient screening tool
- Static Factors: general and DV criminal history, prior DV treatment, prior substance abuse

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8 Arlene Weisz, *Spouse Assault Replication Program: Studies of Effects of Arrest on Domestic Violence*. National Online Resource Center on Violence Against Women, www.vawnet.org and Sharyn Adams, "*Domestic Violence programs reduce recidivism by 60%.*" Illinois Criminal Justice Information Authority summary of Larry Bennett's evaluation "*Program Completion, Behavioral Change and Re-Arrest for the Batterer Intervention System of Cook County, Illinois.*"

9   D.A. Andrews and James Bonta, *The Psychology of Criminal Conduct*, 2d ed. (Cincinnati, OH: Anderson Publishing, 1998).

treatment, child witnesses, current restraining order, and current community supervision status at time of offense, family DV history
- Dynamic Factors: employment status

DA – Danger Assessment (similar to SARA as it includes victim as a source of information)

- 19-item pencil-and-paper checklist-style instrument
- Applied to adult males only (the tool was developed on a male sample)
- Originally developed to assess risk of homicide among batterers but can be used to predict future domestic violence
  - Must understand that homicide has a low base rate; as such, it is difficult to predict
- Psychometric properties have been published and Goodman, Bennett and Dutton (2000) found replications on large samples were promising
  - In a validation review of the DA on a small sample (N = 49), the correlation between the DA and re-abuse was .61
- Easy to use and interpret

Psychopathy Checklist Revised (Hare, 1990, 2003)

- 20-item checklist which examines interpersonal and behavioral characteristics associated with psychopathy (e.g., superficial charm, pathological lying, manipulation, lack of empathy, impulsiveness, shallow affect, etc.)
- Debate exists as to whether or not the PCL-R is measuring psychopathy as a taxon or on a continuum
  - Has implications for treatment
- In a meta-analysis comparing the PCL-R and the LSI-R, correlations for both general and violent recidivism were .25 for the PCL-R and for the LSI-R the correlations were .39 and .28 respectively (Gendreau, Goggin & Smith, 2002)
- In combination with the Violence Risk Appraisal Guide (V-RAG), which added 11 items to the PCL-R, the correlation increased to .44 from .34 for violent recidivism (Rice & Harris, 1997)

Level of Service Inventory – Revised/LS/CMI

- While the instrument is a valid measure of both general and violent recidivism, the tool has been able to examine more specific DV related outcomes
- Rooney and Hanson (2001) have noted that the tool has predicted treatment dropout
- Hanson & Wallace-Capretta (2000) found that the LSI-R was also able to predict partners' reports of abuse and violent recidivism
- Kroner & Mills (2001) conducted an ROC analysis of the LSI-R total score and violent recidivism and found an AUC value of .68

Compas (Brennan, Tim, *Research Synthesis Reliability and Validity of Compas Northpointe*, Institute for Public Management, Inc. Golden, CO 2007. www.northpointeinc.com)

- Third generation general risk assessment tool
- Designed to predict violence, recidivism, failure to appear, and community failure
- Internal validation indicates ROC of .70
- Uses 20 risk areas
- Three instruments: core, probation, and re-entry

Which tools are available but have less current research in the DV literature?

ODARA – Ontario Domestic Assault Risk Assessment (Hilton et al, 2004)

- Spousal assault risk scale
- Designed from items that could be reliably assessed by police and examined for incremental validity in predicting subsequent police contact
- Thirteen items scored dichotomously and summed for a total score
- Items cover substance abuse, prior history of violence, the number of children in family, and victim's barriers to support
- Meta-analysis of 18 studies, average sample size of 333 compared this with SARA, DVSI, and victim's expectation of a future assault. The recidivism based results (28.5 months average followup time) were as follows: victim prediction = .47, SARA = .47, DA = .58, DVSI = .39, and ODARA = .68. (average weighted accuracy "d")[10]

Partner Abuse Prognostic Scale

- Scale obtained information from both offenders and partners in its development
- A prognostic index derived from 17 well-established risk factors
- For use with adult males only
- Found prediction of additive model (putting different risk factors together) was good
- Provides cutoff scores for risk
- Reported psychometric data are very promising

Kerry's Femicide Scale

- Scale based on information gathered from convicted killers and community
- Scale is unique in that it identifies characteristics of men who kill women with whom they have been in an intimate relationship
- For use with adult males only (developed on male offenders)
- Identifies a constellation of factors, including psychological, emotional, physical abuse, and attitudes toward women

CTS/CTS2 – Conflict Tactics Scale (Strauss & Gelles, 2000)

- CTS2 can assess for verbal as well as physical aggression
  - The older version, CTS, was criticized for ignoring emotional and verbal abuse (Andrews & Bonta, 2003)
- CTS/CTS2 examined in several experimental studies that measure the victims' reports of their offender's abusive behavior and demonstrated modest correlations

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[10] Karl Hanson, "The Validity of Risk Assessments for Intimate Partner Violence: A Meta-Analysis 2007," (Corrections Research, Public Safety Canada, 2007).