

## **Risk Assessment:** A Short Introduction – Part II

In Part I (“Perspectives,” Fall, 2002) we discussed ways of developing expert opinions about sexual reoffense risk, including:

1.

Traditional clinical observations and impressions

2.

Empirically guided information

3.

Structured risk assessment protocols

4.

Actuarial risk assessment tools

5.

A protocol that includes actuarial tools and allows for adjustments based on empirical factors not accounted for by the tool and adjustments based on clinical judgments (i.e., case-specific information).

The article opined that current state-of-the art is represented by the 5<sup>th</sup> approach. It also defined and compared static and dynamic risk factors and the importance of considering both. This article will summarize several tools available for that purpose. This is not an all-inclusive list. It simply mentions some of the currently better-known instruments in no particular order.

### **Static Actuarial Scales:**

**The Sexual Offense Risk Appraisal Guide:** (SORAG) – A variation of the author’s earlier “Violence Risk Appraisal Guide” (VRAG), the SORAG is an effective though relatively complicated 14-item scale. It requires a thorough and reliable social history, knowledge of the offender’s DSM diagnosis and a PCL-R score. If no PCL-R Score is available, users can substitute the Child and Adolescent Taxon Scale (CATS), but risk losing a small degree of accuracy. SORAG is best at predicating violent sexual reoffenses, though not significantly better than its predecessor, the VRAG. SORAG may be the best currently available instrument for classifying reoffense risk among violent sexual offenders but appears inferior to other instruments (RRASOR, Static-99) for classifying risk of non-violent offenses often more typical among child molesters. Additional information about VRAG/SORAG is available online at [. Detailed information on VRAG/SORAG development and scoring information is available in “Violent Offenders: Appraising and Managing Risk”](#). Given the information required,

VRAG/SORAG may require a day or more of special training and guided practice for effective use.

**Rapid Risk Assessment of Sexual Reoffending: (RRASOR)** RRASOR requires only four readily available pieces of information: prior sex offenses, offender's current age, victim gender, and offender's relationship to victim. Although obviously excluding many important items, RRASOR has proven surprisingly robust and remains the best-validated actuarial instrument for application to retarded adult male offenders. Simplicity is one of its greatest virtues. The RRASOR is available without cost at the Canadian Solicitor General's web site (). Effective use requires a few hours of training for people inexperienced with actuarial scales.

**Static-99:** In the three-plus years since its publication, Static-99 has likely become the best known and most widely used actuarial scale in sex offender work. Static-99 includes the four RRASOR items and offers a small improvement in accuracy by adding six additional items. Static-99 is also superior to RRASOR in that it yields separate probabilities for sexual reoffense risk and risk of any violent reoffense. Like RRASOR, Static-99 can be scored from record material alone and is suitable for use by corrections and field supervision personnel as well as mental health professionals. Materials needed to understand and use Static-99 are available without cost from Canada's Solicitor General ([www.sgc.gc.ca/publications/corrections/199902\\_e.pdf](http://www.sgc.gc.ca/publications/corrections/199902_e.pdf)). Effective use requires a few hours of training for inexperienced with actuarial scales.

### **Dynamic Actuarial Scales:**

**The Sex Offender Needs Assessment Rating (SONAR)** : SONAR represents the best attempt to date to apply actuarial methods to dynamic variables. However, although SONAR developers have published their development work, they have not yet published validation studies and SONAR cannot be considered fully scientific until this information is available. For now, it remains the best available but still makeshift solution to the problem of scientifically monitoring sex offenders' current functioning and classifying them into risk categories that change with circumstances. In spite of its shortcomings, using SONAR can produce fairer, more accurate and reliable opinions than operating without it.

SONAR quantifies four acute and five stable factors that have been empirically linked to reoffense.

**Acute-Dynamic** factors include:

1.

Changes in substance abuse patterns

2.

Increases/decreases in negative mood

3.

Increases/decreases in anger

4.

Changes in opportunities for victim access.

Given adequate information, SONAR'S acute factors are relatively clear and easy to work with. But their usefulness is limited to understanding changes in risk for only the coming few days or at best, a few weeks. SONAR classifies offenders into dynamic risk pools for longer periods (a month to a year) by relying on five **Stable-Dynamic** factors. These are:

1.

Intimacy deficits

2.

Social influences

3.

Attitudes towards sexual offending

4.

Sexual self-regulation

5.

General self-regulation

The stable factors are not so easily understood. The first for example, asks whether an offender lives with a current lover and if so, whether the relationship is "troubling" or has "no obvious problems." Since virtually every intimate relationship involves some degree of turmoil, how are we to know where to draw the line? Extensive scoring guidelines offer help, but nonetheless such questions can be difficult to answer precisely - even when the rater has a great deal of knowledge about the offender.

But all too often, supervision officers and therapists may not be privy to the precise nature of the relationship an offender has with his spouse or lover. Offenders learn what is expected of them and may misrepresent attitudes about sexual offending to their supervision officers or even their therapists. They may not report growing difficulties with self-regulation until it is too late. SONAR is useful only to the degree that independent, objective monitoring verifies offender self-report. (i.e., polygraph, physiological sexual interest/arousal monitoring,

urine drug. screens, surprise field visits and frequent collateral contacts.)

Since all nine SONAR factors are “dynamic” (i.e., changing over time), raters cannot rely on record material but must be familiar with each offender’s day-to-day behavior and situation as well as his cognitive and emotional states. To the degree this information is available, raters can use SONAR to develop meaningful opinions about dynamic risk but even with full information, the scoring process can be complicated. Substantial training and guided practice (at least a full day) are advisable to maximize effective use. Materials needed to understand and begin using the SONAR can be downloaded without cost from , another gift from Canada’s Solicitor General.

A number of other scales (e.g., MnSOST-R, RRAG) combine static and dynamic factors, but have not proved useful in day-to-day practice and are not widely used at this time.

### **General Criminality:**

Legally, all convicted sex offenders are criminals and substantial numbers have chronic non-sexual criminal records before coming to our attention as sex offenders. Many of these men committed their sexual offenses impulsively, consistent with generalized criminal thinking and behavior. For these men, unless their general criminogenic traits are adequately addressed, further offenses (including sexual offenses) are likely. The “Level of Service Inventory – Revised” (LSI-R) is an excellent tool for that purpose.

Based on sound empirical research, the LSI-R consists of 54 items grouped into 10 domains that include both static and dynamic risk factors. Completion yields risk classification as well as a “profile” that can help case managers and treatment agents maximize community safety. LSI-R accomplishes this by targeting specific areas for increased attention and identifying those areas where significant time and resources need not be spent. As with any rating scale, effective use will be maximized when raters are formally trained, but even without formal training, LSI-R is not overly difficult for experienced personnel to use. Complete materials can be purchased from Multi-Health Systems. ( )

Finally, it’s important to note the following:

1.

None of the above instruments is, in-and-of-itself, a risk assessment. Each is a tool that practitioners can and should use to make individualized assessments that include consideration of:

a.

Nature of the hazard under consideration

b.

Likelihood the hazard will occur

c.

Frequency with which the hazard is likely to occur

d.

Seriousness of the hazard's consequences

e.

Imminence of occurrence

2.

All of the above instruments have been statistically validated for classifying RE-offense risk among convicted adult male offenders. (LSI-R can also be applied to females.) They should never be used in the absence of an official conviction or with populations not included in their development samples.

3.

Rating scales, like any psychometric instrument, should only be employed by individuals adequately trained in their use and must be utilized in strict accordance with the procedures and definitions provided by each instrument's developers.

When these caveats are adhered to, actuarial tools like the ones described above provide a dimension so valuable that no sex offender risk assessment should be without it.