



Risk Assessment & support of people with ID in the criminal justice system

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Today's Session

The trans-Tasman Forensic Risk Assessment Collaboration

Structured Clinical Guidelines and Actuarial Assessments

The development of the ARMIDILO
risk assessment framework – *a progress report*

Discussion concerning risk assessment
in services supporting people with behaviours
that pose a risk to themselves and others

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The trans-Tasman Forensic Risk Assessment Collaboration

A collaboration between:

The Victorian Department of Justice (DoJ)

The Victorian Department of Human Services (DHS)

Waikato University, Deakin University & RMIT University



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The trans-Tasman Forensic Risk Assessment Collaboration

Forensic Risk Assessment

- sex offenders
- violent offenders

Pre-judicial Risk Assessment

- persons exhibiting severe behaviours of concern
which are of danger to themselves & others

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Risk Assessment Objectives & Considerations

Objectives

Prediction & Prevention

- Of offence
- Of contributing circumstances

Key Considerations

Offence Behaviour Type

Frequency

Latency/Delay

Severity

Victim Specificity

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Risk Assessment – 3 approaches



Clinical Judgement

Actuarial Assessment

Structured Clinical Guidelines
(convergent approach)

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Clinical Judgment

Most commonly-used method for violence risk assessment

- > Familiar to professionals
- > Familiar to courts

General strengths of method

- > Client-centered
- > Hypothesis-driven



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Clinical Judgment

Clinical judgment is **NOT**:

“a special type of judgment rooted in a high level of clinical expertise and experience and based on extensive data”

a ‘best guess’

a substitute for systematic investigation and consideration of all available information

about saving time and money

(Schalock & Luckasson, 2005; p. iv)

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Strategies for making competent Clinical Judgments

1. Make full use of social history
2. Match data to critical questions
3. Use broad-based assessment strategies
4. Implement best-practice intervention
5. Plan, implement & evaluate individualised supports
6. Reflect cultural competence and linguistic diversity

(adapted from Schalock & Luckasson, 2005)

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Unstructured Clinical Judgment: Limitations

No systematic empirical support for method.

Generally informed by the literature, but not in a systematic manner.

While clinical judgment has been shown to be generally better than chance, some clinician's risk estimates are reliably worse than chance.

Relies on charismatic authority.

Recommendations may be excellent,
but lack empirical support.

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Actuarial Scales: Advantages

Commonly-used method for violence risk assessment

- > Familiar to many staff
- > Increasingly familiar to courts and tribunals

General strengths of method

- > Highly structured/systematic
- > Empirically-based
- > Has predictive power
- > Easy to do: often need only file information



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Actuarial Risk Scales: Limitations

Still requires professional judgment

- > Which scales to use
- > How to interpret scores with respect to individual client

Justification of test use requires induction

- > Our population and legal framework is like theirs
- > Our use of the test is like theirs

Results may be easily misinterpreted

- > Can confuse risk assessment with risk management or treatability
- > Doesn't help you understand the individual client's risk issues.



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A Convergent Approach - Structured Clinical Guidelines: features

- Structured Clinical Judgment

Imposes major structure on evaluation

- > Must consider, at a minimum, a fixed and explicit set of risk factors
- > Specifies process for information-gathering

Imposes minor structure on decision

- > Specifies language for communicating findings

Action-oriented

- > Suggests a treatment or management plan

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Strengths of Structured Clinical Approaches

Use of variables derived from clinical and research literature that are related to an outcome measure (such as recidivism).

All offenders are considered on a similar set of factors, but assessors may override due to a certain factor indicative of elevated risk.

Allows test user to derive a treatment or management plan due to inclusion of dynamic risk factors amenable to change.

Item scores and overall risk levels can change.

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Weaknesses of Structured Clinical Approaches

Not all variables have a strong relationship to risk, despite apparent clinical face validity

It is possible to incorrectly override due to a factor unrelated to elevated risk (e.g., denial).

May be more subject to bias as factor and overall risk levels are not numerically determined.

Requires more supervision and peer consultation to avoid assessor drift.

Inadequate published support data by researchers.

Tools for assessment in generic forensic populations

Sexual Violence Risk-20 (SVR-20)

Historical-Clinical-Risk-20 (HCR-20)

STATIC 99 & RRASOR

Psychopathy Checklist – Screening Version (PCL-SV)

Questionnaire on Attitudes Consistent with Sex Offences
(QACSO)

Violent Offender Treatment Programme Risk Assessment
Scale (VORAS)



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Problems with generic tools

Normative data do not necessarily include people with intellectual disability

Items do not necessarily address issues that impact on people with intellectual disability
(or place appropriate emphasis on items)



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ARMIDILO: Assessment of Risk & Manageability of Intellectually Disabled Individuals who Offend

Items that are identified in the research literature as being relevant to moderating the behaviour of people with ID

Client specific factors & Environmental factors

Stable & Dynamic factors



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The development of the ARMIDILO risk assessment framework – *a progress report*

Research Issues

Validity & Reliability of
assessment items

Method

Multiple single case
study design

Participants

15 adults with
Mild to Moderate ID;
all male;
36 years of age
sexual and violent
offenders;
1.5 to 18 years
sentence

The development of the ARMIDILO risk assessment framework – *a progress report*

Protocol

Interviews: Participant; & Staff

File review: DoJ; DHS & Medical

Skills & Behaviour Assessment: SIB-R

Risk Assessment:

SVR-20; HCR-20; Static-99; VORAS, PCL-90 SV

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	Client	Staff & Environment
Acute	<ol style="list-style-type: none"> 1. Changes in attitude or behaviour toward supervision or treatment 2. Changes in inappropriate preoccupation 3. Changes in victim-related behaviours 4. Changes in emotional state or regulation 5. Changes in ability to use coping strategies 6. Changes to mental health status and other unique considerations (e.g., access to intoxicants) 	<ol style="list-style-type: none"> 1. Changes in social relationships 2. Personnel or monitoring changes 3. Situational changes 4. Changes in victim access 5. Changes in access to intoxicants 6. Unique considerations
Stable	<ol style="list-style-type: none"> 1. Attitude toward and compliance with supervision 2. Attitude toward and compliance with treatment 3. Sexual behaviour 4. Inappropriate preoccupation 5. Victim selection and acquisition / grooming 6. Emotional coping ability 7. Self-efficacy 8. Relationship skills 9. Substance abuse 10. Impulsivity 11. Use of violence or threats towards self or others 12. Mental health and other unique considerations 	<ol style="list-style-type: none"> 1. Attitude towards ID individuals 2. Communication among supervisory staff 3. Client specific knowledge by supervisory staff 4. Consistency of supervision 5. Situational consistency 6. Unique considerations (including environmental suitability)

ARMIDILO Ratings: developing a scale that works

Risk Manageability Ratings				
-2	-1	0	+1	+2
A Definite Protective Factor	A Possible Protective Factor	No Problem, Neutral	May be a Problem	YES, a Problem

Risk Rating:

0 = No problem; 1 = Might be a problem; 2 = Yes, is a problem;

Protective Factors Rating:

0 = Neutral; 1 = Possible protective factor; 2 = Definite protective factor

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Future Project Directions

Reliability

Service influence

Predictive power

Inter-jurisdictional application

Relationship to other risk assessment tools

Application to risk assessment for non-criminal populations exhibiting behaviours of concern

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Discussion

Experiences of forensic
risk assessment

Application of the
ARMIDILO in other
settings

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