

# Paper

## Screening, Risk Assessment and Safety Planning

**AVERT**  
FAMILY VIOLENCE



**Collaborative Responses in  
the Family Law System**



Australian Government  
Attorney-General's Department

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## Table of Contents

A note on terminology used in this resource .....	1
<b>Introduction</b> .....	<b>1</b>
<b>Risk factors associated with the perpetration of family violence</b> .....	<b>2</b>
Risk factors – Summary points .....	3
<b>Context: the Family Law System</b> .....	<b>4</b>
Identifying what constitutes family violence .....	6
<b>Screening, Risk Assessment, Safety Planning</b> .....	<b>7</b>
What skills are needed to identify family violence? .....	7
Screening .....	7
The benefits of screening.....	8
Screening Protocols.....	10
When not to screen .....	10
How to conduct screening.....	11
When to ask the questions.....	11
Mailed questionnaires .....	11
Safety .....	11
Risk Assessment.....	12
The benefits of risk assessment.....	13
Risk factors .....	13
Lethality Assessment .....	15
Protective factors .....	15
The importance of victim information.....	16
Engaging Perpetrators in Risk Assessment .....	16
Engaging Children in Risk Assessment.....	17
Risk Assessment tools .....	18
Risk Management and Safety Planning .....	19
<b>Implications for the family law system</b> .....	<b>20</b>
Why use risk assessment and screening tools .....	20
<b>Service and support options in relation to family violence</b> .....	<b>22</b>
Types of therapeutic or other interventions for working with family violence, their appropriateness and efficacy.....	23
<b>Conclusion</b> .....	<b>23</b>
<b>References</b> .....	<b>24</b>



## Screening, risk assessment and safety planning

### A note on terminology used in this resource

Because this resource is designed for people working within the family law system, family violence is the chosen term throughout. It is a term that incorporates a broad range of intimate relationships in which abuse might be perpetrated, and it is the preferred term of Indigenous communities. Family violence also makes explicit the relationship between family violence and its implications for children in the family. Domestic violence is a term that has been widely used in the literature in this field and is therefore used in relevant contexts and quotations. The phrase domestic and family violence is also used as it is the term used in legislation in some states and by some commentators.

### Introduction

All professionals and services which play a role in the family law system need comprehensive, ongoing training in understanding and responding to domestic violence. This should include training about: the interconnectedness of the abuse of women and children; conducting risk assessments and developing safety plans; the effects of trauma on women and children; the conditions that promote recovery from trauma; the dynamics of sexual and domestic violence perpetration; the risks and forms that post-separation violence can take; and the assessment of claims of change in the perpetrators of abuse. Laing (2010, p18):

This paper is centrally concerned with the knowledge and procedures which will minimise risk and ensure the safety of all involved in separation and family law services. It discusses screening of clients, risk assessment with victims, perpetrators and children, and safety planning. The paper considers how these practices align with the designated roles and responsibilities of family law system staff including client services staff, family dispute resolution practitioners, registrars and legal practitioners.

Relationship separation marks an increase in risk and degree of harm for victims of family violence (Braaf & Sneddon 2007 p. 9). Accessing family dispute resolution, child contact or family court services, may also exacerbate risk for victims due to enforced contact or proximity, or be a flashpoint for a violent episode. At a minimum, accessing these services is likely to be stressful for victims and their children. It is because of the clear potential for family law service providers to meet clients at a time of increased risk that family violence is of central concern.

Screening, risk assessment and safety planning are relatively new processes within the family law system.



Laing (2010 p17) has identified concerning knowledge gaps amongst family law system professionals:

...who failed to demonstrate understandings of both the complexities of domestic violence and its harmful effects of the development and well being of children... limited understanding of the forms that post separation domestic violence can take... of the impact of trauma on women and children and on the mother-child relationship... [and] how a woman may present in legal contexts; and of what is required to rebuild a relationship between a child and someone who has abused the trust inherent in the parent-child relationship.

Bagshaw and Brown (2010 p7) concur:

...the problem remains that the family law socio-legal service system has not sought to place adult and child safety after parental separation above all other principles, and unless it can move to do this family violence will remain an unresolved, serious problem for families who seek separation as a way of ending family violence, or who experience family violence as a result of separation.

## **Risk factors associated with the perpetration of family violence**

While there is no single cause or factor that leads to family violence, a number of risk factors or markers – the characteristics that increase the likelihood of re-assault – have been identified as being associated with perpetrators of family violence.

These factors include:

...age, low academic achievement, low income or exclusion from the labour market, social disadvantage and isolation and exposure to, or involvement in, aggressive or delinquent behaviour as an adolescent....Many of these same risk factors have been linked to an increased likelihood of aggressive behaviour and offending generally. (Morgan & Chadwick, 2009, p.6)

Mouzos and Makkai (2004) found that the most commonly reported risk characteristics for intimate partner violence were drinking habits, general levels of aggression and controlling behaviour. These issues are also common risk factors for violence in Indigenous relationships (Bryant & Willis 2008).

It should be noted that these risk factors or markers do not singly or cumulatively have strong predictive power. They may incorrectly identify a lot of perpetrators (false positives), and there may also be false negatives with re-offenders not being identified by these characteristics.



Campbell et al.'s 2003 American study of women murdered by their intimate partners found that:

- The abuser's unemployment was the strongest socio-demographic risk factor.
- Previous arrest for domestic violence decreased the risk.
- Presence of a child of the victim to a previous partner living in the home (i.e. a step child to the perpetrator) increased the risk.
- Separation from an abusive partner after cohabiting was associated with increased risk, particularly when the perpetrator was highly controlling. It is also clear that extremely controlling abusers are particularly dangerous under conditions of estrangement.
- Perpetrator's use of a gun in the worst incident of abuse and previous threat with a weapon, were strongly associated with increased risk.
- Perpetrator's use of illicit drugs was also associated with femicide, though excessive use of alcohol was not (Laing, 2004a, pp.7-8).

There are important implications here for risk assessment strategies, a topic discussed in detail later in this paper

### **Risk factors – Summary points**

There is no single cause of family violence, but a number of risk factors – characteristics that increase the likelihood of re-assault – can be identified.

Risk factors include:

- A history of previous assaults against the victim or others, suicide and homicide attempts or threats, prior arrests
- Instability of employment and income
- Drug and alcohol misuse
- Jealousy, a sense of entitlement or possessiveness, lack of empathy
- Childhood abuse and other adverse childhood experiences such as neglect
- Instability of relationships
- Separation
- The victim's escalating use of violence; victim's suicide attempts
- Depression, personality disorder, low self esteem
- Violence towards pets
- Misogynist attitudes toward women.



*Note:* Perpetrators of violence and abuse may themselves have been victims of abuse, or witnessed family violence as a child. However this is not so for all perpetrators, and may not even be the case for the majority.

Other forms of injustice, including racism and socio-economic disadvantage may also play a contributory role in family violence. These factors in no way diminish individual responsibility for family violence, but we need to appreciate the impact that pervasive trauma has on people's lives and on their coping strategies.

## **Context: the Family Law System**

The family law system is made up of a range of legal, non-legal, court and support services. These include courts at the State and Federal level which deal with the breakdown of marriage and with issues concerning children, such as the Family Courts of Australia and Western Australia, the Federal Magistrates Court and State Magistrates courts. Generally, separating families who have a dispute about parenting arrangements are required to make a genuine effort to resolve that dispute by family dispute resolution before they can apply to a court. Legal aid, which is delivered through legal aid commissions in each State and Territory, is available in family law matters. Legal aid practitioners can provide separating parents with referrals, legal advice, and family dispute resolution. Some community legal centres also provide legal advice in relation to family law matters.

A range of family support services, through FaHCSIA's Family Support Program, is available to provide information and advice to families at various stages. These include Family Relationships Centres, the Family Relationship Advice Line, post separation parenting programs, children's contact services, family and relationship counselling, specialised family violence and men and family relationship programs. Centrelink, the Child Support Agency and other government agencies at national and State and local levels, community based organisations, private practitioners, advocacy groups and volunteers are also available to assist separating parents and their children.

Professionals operating in the broad family law system come from a range of disciplines and professional roles, including lawyers, judicial officers, court administrators, counsellors, family dispute resolution practitioners or psychologists. They use diverse methods and have different approaches to addressing their clients' needs. The identification and appropriate response to family violence is a central responsibility of the family law system. It is the responsibility of all professionals involved in the Family law system to identify and respond to risk of violence, and create and implement processes to support this.

Screening, risk assessment and safety planning are complementary processes that support professionals to fulfil their obligations in relation to safe processes, and safe outcomes for clients. They have discrete purposes, and can facilitate multidisciplinary collaboration in relation to client safety. Ralfs, James and Breckenridge (2009) recommend building a *culture of response* to family violence, involving ongoing reflection and development about the service and its procedures, not only the clients.



Chisholm (2009 p. 5) is clear in articulating the breadth of responsibility across the family law system for ensuring family violence is 'disclosed, understood and acted upon':

...whether we are thinking of a lawyer interviewing a client, a dispute resolution practitioner dealing with a new case, the work of a counter clerk at a family court, or of a judicial officer. The family law system, and each component in it, needs to encourage and facilitate the disclosure of family violence, ensure that it is understood, and act effectively upon that understanding.

### **Complexities in the identification of family violence**

Identifying family violence is a challenging task. It may be masked by other dynamics or it may be deliberately or unintentionally minimised by the victim. It may be denied or minimised by the perpetrator. In some circumstances it may be difficult to distinguish family violence from forms of conflict which are not usually regarded as abusive.

Studies in both family dispute resolution and health contexts have found that victims frequently do not disclose family violence (NSW Health 2004 p. 3). There may be many reasons for this (engagement skills of the interviewer, fear, confidentiality concerns, a sense of humiliation or embarrassment that they have been subjected to violence, and so on).

There is no question that disclosure is difficult. The Domestic Violence Resource Centre and Relationships Australia Victoria research partnership interviewed women about their experiences of dispute resolution (Bailey and Bickerdike 2005). Whilst legal and practice developments have been made since the research, the findings provide useful reminders of issues to heed in ongoing service delivery:

- Participation in family law services can be difficult when a victim is still traumatised or recovering from abuse
- Family law processes themselves can support alienating ideas such as believing the violence from the past was not appropriate to mention in family law service contexts that are focused on the future
- A dispute resolution practitioners' performance of neutrality can fail to acknowledge or validate the clients' experience of abuse

Mediators have to have some level of neutrality, but they need to also know what that costs the person. I think for mediators to actually understand some of the effects of abuse on women, how incredibly difficult it is just to even talk about it, to name it: that to be visible is so dangerous. To even understand the triggering process, that can take you back into an emotional timeless abused state is not a very easy place to be when you're trying to answer questions. (Bailey & Bickerdike 2005 p.13)





Screening processes tended to highlight physical violence but not detect emotional abuse.

I felt that my disclosure was dismissed...there were questions about physical violence, and violence towards children. There weren't questions about the control, like control of freedom and control of money. (Bailey & Bickerdike 2005 p.13)

All family law processes are at risk of failing clients in these ways.

### **Identifying what constitutes family violence**

There has been debate between the domestic violence sector and the family law system about whether it is appropriate or possible to make a useful distinction between an abusive relationship and a high conflict divorce. Clearly, family law system workers will encounter a whole spectrum of conflictual relationships and may be readily able to distinguish highly abusive relationships at one end of the spectrum from conflicts at the other end which, although possibly intractable, do not seem to be violent or abusive. Johnston, Roseby and Kuehnle (2009) propose the following distinction:

An *abusive relationship* is a pattern of control, domination and humiliation through:

- Physical violence, threat, inducing fear
- Emotional abuse, attacks on self esteem
- Sexual coercion and rape
- Unilateral financial and other decision making
- Insistence on sole child-rearing authority
- Social isolation/restriction on outside contacts
- Use of legal disputes to harass and punish.

High conflict divorce is identified by:

- Ongoing disagreement over parenting, mutual distrust and blaming
- High hostility, verbal abuse and occasional physically violent struggles
- Refusal to submit to one another's rules/demands
- Power is more balanced
- Intractable legal disputes initiated by both parties.

While the points above may be a useful checklist to enable you to reflect on individual cases, it is inevitable that there will be many shades of grey in any such distinctions. What is seen as *high conflict* or *high hostility* by some may well be regarded as *abusive* by others.



What is agreed in the literature is that effective screening for family violence and child abuse requires a high level of skill and knowledge derived from experience and/or specialised training. However, even with such training and experience and even with sensitive screening tools, not all cases of family violence will be identified. This is why it is important that there are multiple, system-wide opportunities for people to disclose violence/fear and receive an appropriate and adequate response. That said, the further through the system a person moves without having had this opportunity/service response, the more they will have been failed by the system in terms of a delay in their safety planning.

## **Screening, Risk Assessment, Safety Planning**

### **What skills are needed to identify family violence?**

There are a number of skills (and underpinning knowledge) necessary to identify and understand family violence:

- Recognising the dynamics of power and control in family violence contexts and the impacts of these on disclosure as a result of the screening and risk assessment questions
- Recognising the impact of disclosure on the safety of women and children living with family violence
- Providing effective information about, and explanation of, the role of screening and risk assessment to fearful and/or hostile clients
- Providing effective information about, and explanation of, the role of screening and risk assessment to clients for whom English is a second language, or where there are literacy problems
- Asking intimate questions in ways that are respectful
- Exploring appropriate and inappropriate responses in relation to diverse clients
- Making relevant referrals in ways that support clients.

### **Screening**

As Pence and McDonnell (1999 p. 49) explained in writing about the Duluth Domestic Abuse Intervention Project in Minnesota USA:

Do not leave safety or accountability to the whim, memory, or personal commitment of hundreds of people. During our audit, we found dozens of places in our system where normal institutional practices failed to account for the safety needs of victims....



Screening can be seen as the first step in a risk assessment process, but the two terms should not be equated. Screening is the systemic application of a test or enquiry (a series of questions) to identify individuals at sufficient risk of violence to benefit from further investigation and/or direct preventative action (Peckham & Dezateux 1998). Screening is thus a safety precaution and not only supports identification of those at risk but may also enable early intervention through immediate identification of supportive resources and referrals.

Screening is victim focussed and enables practitioners to frame questions which will name the possibility of violence and attend to the safety of the client (Laing 2004a).

One example of a screening tool is from NSW Health (2004 p. 25) who targeted women attending ante-natal sessions. It comprises two questions with a third and fourth question being asked if domestic violence is identified:

1. Within the last year have you been hit, slapped or hurt in other ways by your partner or ex-partner?
2. Are you frightened of your partner or ex-partner?

If the woman answers NO to both questions, give the information card to her, and say: 'Here is some information that we are giving to all women about domestic violence.'

If the woman answers YES to either or both of the above, continue to questions 3 and 4.

3. Are you safe to go home when you leave here?
4. Would you like some help with this?

Consider safety concerns raised in answers to questions.

There is no set or legally required screening tool or process within the Family law system. The tools and processes will be tailored to your role in the sector / with Family Law clients (eg. your organisation may screen for violence as well as child abuse), and the policies of the agency/practice you work for.

### **The benefits of screening**

Screening is the first point in the intake process where a history of family violence, or the risk of it, may be detected. It is thus a crucial safety precaution and an essential pre-requisite to comprehensive risk assessment.

Family dispute resolution practitioners need to ensure a fair process; child contact services need to facilitate safe processes; and lawyers need to represent their clients' interests.

Screening for family violence can support this work by helping to ascertain:



- An imbalance in capacity to participate in family dispute resolution between parties
- A need to assess for risk in processes and for families
- Identification of the nuances of clients' interests and their ability to provide all information that may be necessary to argue their case appropriately.

Other benefits of asking discerning and relevant screening questions include:

- Setting the tone of interest and capability within service delivery
- Supporting disclosure and help-seeking (through naming the prevalence and possibility of violence)
- Providing an opportunity to connect with an isolated woman (which is important given that one tactic of abuse is social isolation)
- Providing crucial information to both clients and other relevant staff
- Supports informed and contextualised decision-making about safe service provision, treatment or advice
- Identifies where it is necessary to conduct further risk assessment and safety planning
- Opens an opportunity to prevent injury, illness or death
- Assists in making appropriate, safe referrals
- Enables practitioners to document cases appropriately.

Also, given the responsibility of the family law system to protect children from further harm, and that screening for child abuse is not currently widespread, identifying risk to children can be facilitated through identifying risk to a parent.

In NSW Health's pilot study of women's responses to domestic violence screening by health centres, they report that of women screened:

- 97% felt OK or relieved to be asked about violence
- 94% agreed the health service should screen.

When discussing these findings ECAV (2004) argues that screening can communicate to a victim that:

- They are respected
- They are not alone
- The worker has encountered domestic violence before
- The worker is willing to listen
- The issue is being taken seriously



- They can get help.

Family law system workers can utilise appropriately designed screening tools to set in train the correct sequence of events subsequent to a disclosure. This does not make that worker responsible for the implementation of all of those subsequent events, but ensures for example, that a victim may be able to apply the exception to the requirement under the law to attend family dispute resolution where the (risk of) violence would make the process unsuitable (section 60J).

### **Requirements for screening**

One requirement for screening is to understand your purpose in screening. Screening is not seeking *evidence* or *truth* in relation to the existence or otherwise of family violence; it is seeking to elicit a victim's fear or disclosure of violence, or a practitioner's assessment that there is a risk of violence in the future, to a client or their children.

A requirement for screening is the development of clear protocols about what should happen following a disclosure. To be *beneficial*, screening *must* be followed by a positive and appropriate response.

Identification of family and domestic violence through screening needs to be integrated into everyday work practices. The 'minutiae of work practices of players in the system – the forms, rules, regulations, documentary practices and communication networks' (Laing 2003 p. 5) need to be present in the implementation of screening tools. This means the constant review of processes and attention to the detail of the implementation of screening or risk assessment. It means ongoing organisational learning, reflective practice and never thinking any detail is too small to require attention.

*NB. Informed consent prior to involvement in screening is paramount – victims need to know how information they give will be used. Consent applies also to all collateral informants, spouses, other family etc.*

### **Screening Protocols**

#### *When not to screen*

Screening is not carried out if:

- The client is not physically or mentally well enough to respond to the questions coherently
- The client has already disclosed domestic violence as the presenting problem
- The client also has their partner, children over three year's old, or other family members or friends present.



*How to conduct screening*

- Provide an environment that is safe, in particular maximise privacy
- Support emotional safety to disclose by providing an introduction to screening questions that explain your interest and the purpose of disclosure
- Consider making adjustments to the sequence and necessity of some parts of the screening process/questions to cater for individual interactions (e.g. If you learn the person has a violence intervention order, you might choose to skip screening and move straight to risk assessment)
- Only the staff member and the client should be present during screening, except where there is a need to use an interpreter

*When to ask the questions*

- The preamble and questions should be incorporated into the intake process or first consultation
- Ask the questions around two thirds of the way through, after some rapport has been built
- Ask the questions face-to-face only.

*Mailed questionnaires*

Mailed questionnaires are inappropriate for screening. A mailed questionnaire cannot guarantee the safety of a victim during the process of answering the questions, because privacy cannot be guaranteed, and is therefore likely to result in the questionnaire not being completed.

*Safety*

Safety must be a prime consideration in conducting screening and responding appropriately. Indicators of the seriousness of safety risks include:

- The perpetrator is still in the victim's home or in the same area
- There has been a recent violent episode
- The violence is escalating
- Threats of violence or suicide have been made by the perpetrator
- Weapons are present
- Threats of violence or abuse have been made towards the children.



Much of this information may not be gleaned in initial screening questions, only if those screening questions alert you to ask further questions. Where these risks are identified, it is crucial to discuss short-term safety options with the person.

### **Risk Assessment**

Because of the prevalence of family violence, because 'risk' is inherent in all family violence (Kropp 2004), and where an organisation screens for family violence, risk assessment is a critical component of the work of all practitioners working in the family law system. Screening is an essential pre-requisite to comprehensive risk assessment.

Risk assessment can be defined as the process of evaluating individuals to:

- Characterise the likelihood they will commit or be subject to an act of violence or relationship of abuse
- Assess the likely impact of the situation on a child's safety and wellbeing, with and without further incidents of violence
- Develop interventions to manage likely trajectories
- Document information, for example in a Family Court Report.

Risk assessment focuses on the nature, form, pattern of incidence and degree of danger and uses a range of tools to assess the likelihood that family violence will be repeated or escalated (Kropp 2004). It facilitates a *prediction* of the *likelihood* of future violence, but goes beyond this to invite consideration of what can or cannot be done to avert further violence in the future. Risk assessment assesses information from both victim and offender. Risk may be weighted in terms of severity and urgency (Braaf & Sneddon 2007 p. 3).

Risk assessment is not a one-off event but rather a part of an ongoing process of assessment, review and re-assessment. Relationships are dynamic in nature, as are the factors that are associated with use of violence and common triggers, thus risk assessment needs to keep pace with dynamism. For example, changes in: victim perceptions of risk; nature and incidence of contact between partners; vulnerability of partners; drug or alcohol use; emotional distance (e.g. diminished jealousy).

There have been a number of attempts over recent years to develop theoretically and scientifically sound risk assessment instruments and procedures (Dutton & Kropp 2000). However, family violence and child abuse risk assessment is a relatively new practice in the family law system and many controversies and outstanding questions still surround its practice and predictive validity. Nonetheless, while there is no perfect tool, and nor is there likely to be one, many researchers believe risk assessment can be a useful and important exercise because it can elucidate the nature, form, degree/lethality and imminence of danger. Furthermore, there is evidence that risk instruments, while not infallible, are superior in their predictive ability to clinical judgement alone (Gondolf 2002, cited in Laing 2004b p10).



Much of the following section is summarised from Lesley Laing's paper 'Risk Assessment in Domestic Violence' (2004a).

Risk assessment in domestic violence has been defined by Roehl and Guertin (2000) as:

...the formal application of instruments to assess the likelihood that intimate partner violence will be repeated and escalated. The term is synonymous with dangerousness assessment and encompasses lethality assessment, the use of instruments specifically developed to identify potentially lethal situations. (cited in Laing, 2004a, p.1)

While risk assessment is widely seen as useful, there is little consensus on how risk should be defined. There are many forms of family violence and therefore many dimensions of risk to be considered in practice decisions. These typically involve consideration of imminence, nature (emotional, physical and sexual), frequency, lethality and likelihood that violence will occur (Kropp 2004), and includes an assessment of whether the risk is escalating or diminishing; hence risk assessments need to include discussion of the relationship over its history.

#### *The benefits of risk assessment*

The research literature identifies a number of purposes and benefits of risk assessment. There is a great deal of consensus that it can assist in:

- Preventing violence (not only predicting it)
- Providing a shared language about risk for service providers
- Educating service providers and 'victims' about family violence
- Providing structure to reflect on risk factors
- Helping the criminal justice system to identify offenders needing closer supervision, or to plan appropriate prison release arrangements treatment amounts and types
- Helping 'victims' understand their risk and increase confidence to seek support and make changes to support safety, including that of children
- Identifying risk to children can be facilitated through identifying risk to adults, particularly in the present general absence of screening for child abuse
- Helping workers and 'victims' to develop effective safety plans.

#### *Risk factors*

Risk factors (or markers) are psychological and psychosocial characteristics of offenders, victims and the victim-offender relationship that increase the likelihood of violence being repeated or escalated (Laing 2004a p3).





Risk factors can be categorised across a number of dimensions including:

- The history of the offender (e.g. previous assaults)
- The behaviour of the offender (e.g. drug and alcohol misuse; stalking; child abuse)
- The personality of the offender (e.g. jealousy, possessiveness, a sense of entitlement)
- The particular context of the relationship (e.g. recent separation, secrets emerging, substance abuse).

The following indicators of dangerousness in an offender have been compiled from a range of sources:

- Threats of homicide or suicide
- Instability of employment or income (the strongest socio-demographic risk factor in Campbell et al's 2003 American study of women murdered through family violence)
- Availability of weapons
- A history of violence
- Drug and alcohol misuse
- Obsession or possessiveness about partner
- Dependence on the partner
- Severe depression or rage
- Mental health/personality disorder
- Misogynist attitude
- Low self esteem
- Disregard/contempt for authority or antisocial behaviours and attitudes
- Childhood abuse or violence in family of origin
- Existence of a recent stressor
- Prior arrests (i.e. involvement in criminal activity), whereas prior arrest for inflicting family violence decreased risk (Campbell et al 2001), which may be due to a public gaze on the behaviour.

The best predictor of lethality however, has been identified in research as a victim's own assessment of dangerousness (Weisz, Tolman and Saunders 2000, p77 and Gondolf 2002, p174).

Risk factors in relation to relationship dynamics include:

- Unstable relationships



- Fixed gender roles
- Separation
- Cohabitation with a child who is not the perpetrator's biological child.

#### *Lethality Assessment*

Where violence is disclosed, it may be necessary to take the risk assessment one step further, and assess for lethality. Ralfs, James and Breckenridge (2009) list the following information to glean from.

Perpetrator: Ask directly about intentions and reactions if:

- Partner were to leave the relationship
- Partner were to leave the relationship and take the children
- What makes them feel more upset?
- What helps them feel less upset?
- Do they have access to weapons?
- What is their use of illicit drugs and alcohol?
- Assess for depression and suicidality
- Be alert for minimisation of violence, dishonesty

Victim: Ask about their:

- Level of fear; level of entrapment
- Have they called the police and/or taken out an AVO?
- Current status of relationship
- Have they conveyed intentions to separate to their partner?
- Current safety options.

#### *Protective factors*

Whether assessing the circumstance of a perpetrator, victim or child, it is important to gather information about their protective resources. These include:

- Emotional supports
- Financial or social resources to reduce dependence
- Connection with support services
- Capacity to emotionally separate for perpetrators
- Personal coping strategies



- Employment or income stability.

*The importance of victim information*

The importance of victim information in predicting risk has been empirically demonstrated. Victims can provide critical information related to perception of risk and recidivism. For example, Weisz et al (2000) found that survivors' predictions of re-assault were significantly correlated with reoccurrence.

However, Weisz also found that victims may grossly minimise or underestimate the risk of violence. Campbell et al. (2001) concurred, noting that victims underestimated the risk in 47% and 53% of actual and attempted femicides respectively.

It would seem therefore, that where a victim is concerned about risk, this should be taken very seriously, and where a victim is not concerned, this should be investigated further, and with sensitivity. Victim perception should be built into the risk assessment tool.

Although it is the ideal to involve victims in risk assessment, it is important to note that many factors may impede their involvement.

- Fear for own safety. Reluctance if they feel it will put them at greater risk (Kropp 2004)
- Lack of trust in confidentiality or protection by institutions
- Asking victims to predict the abuser's future behaviour may place the victim in a difficult position, especially if information is used to make decisions about the offender's life
- Desire to protect the offender
- Concern for safety of the children (Barnett 2001).

Where a victim does not participate in risk assessment, a practitioner should consider the situation, their involvement and next steps (including inaction) in terms of what is known about the incidence and dynamics of family violence (see in particular 'Dynamics of Family Violence' section of AVERT Paper *Dimensions, Dynamics and Impacts of Family Violence*). Based only on the information gleaned from the screening process, a practitioner may decide, for example:

- To use 'shuttle mediation' as a precautionary measure, or
- That family dispute resolution is inappropriate, or
- That a child abuse report needs to be made.

*Engaging Perpetrators in Risk Assessment*

It is inadvisable to use alleged perpetrator self reports regarding their own use of violence because they may:

- Underestimate the level of risk



- Be reluctant to disclose information that may result in criminal prosecution
- Often be in a state of denial
- Significantly minimise responsibility.

That said, an alleged perpetrator can be engaged in a risk assessment in so far as their:

- Level of stress or distress
- Employment and income circumstance
- Access to weapons
- View of gender roles and level of misogyny
- Mental health , including depression or personality disorder
- Dependence on the victim
- Level of focus on their (ex) partner
- Capacity to focus on the needs of their children, and attune to their child's experience
- Drug and alcohol use
- Level of acceptance of the use of violence in general
- Experience of childhood abuse or violence

Where the claims of both parties are assessed, and both parties are making mutual claims of violence or abuse, the practitioner making the risk assessment should focus on the power imbalance/dynamics between the couple, the vulnerability of each party, and historical patterns of control, to make an assessment of each party's risk (Neilson 2004, p425-427).

#### *Engaging Children in Risk Assessment*

Specialist skills are required in engaging children in risk assessment, and are important to access for the reasons listed in the section above regarding the need for child inclusive practice. Areas you may be assessing in relation to a child's wellbeing and experience include:

- Experience of childhood abuse or violence
- Their feelings, including emotion modulation
- Psychological disposition, including fear
- A sense of burden or responsibility
- Their capacity to make meaning of their experiences, and resources supporting them to do so
- Sense of safety and protection.



Dr Jennifer McIntosh identifies that it is generally not a specific episode of fear or crisis that interrupts a child's development, so much as their incapacity to make meaning of the episode, lack of support to incorporate the experience and restore faith in the sense that their carers will keep them safe (See AVERT Expert Discussion 'Impact on Children' with Jennifer McIntosh and Lawrie Maloney DVD 3). It is lack of recovery of this kind that produces trauma effects in children.

#### *Risk Assessment tools*

Risk assessment generally fits into three categories:

1. Mechanistic processes using structured tools, with a decision about risk being made by the tool itself (e.g. tools that utilise a numbering system and a process that involves responding to the number tallied on the tool)
2. Structured processes and tools that provide professionals with indicative information, from which they make a professional judgement
3. Unstructured processes that rely on professionals making assessments without tools ('gut' intuition) to determine who is dangerous

Although not infallible, structured processes and tools that allow a professional to exercise judgement and nuance for specific circumstances (category 2 above), have been found to be superior in their predictive ability to clinical judgement alone (category 3) (Gondolf 2002). Mechanistic processes (category 1) may be of particular use to inexperienced professionals who have less clinical judgement experience.

Two existing instruments which have widely acknowledged credibility are:

a) *The Danger Assessment (DA) Scale*, developed by Campbell for use by health personnel in consultation with women to enhance the 'woman's self care agency'. It is a 15 item instrument which assesses factors such as:

- Escalation of frequency and severity of violence
- Availability of weapons
- Violence towards others
- Substance abuse
- Suicide threats
- Jealousy
- Assaults during pregnancy.



b) *SARA (Spousal Assault Risk Assessment)*. SARA assesses factors such as criminal history, psychological adjustment, spouse abuse history and current offence characteristics. It involves the use of multiple sources of data including:

- Interviews with the accused and with victims
- Standardised measures of physical and emotional abuse and of drug and alcohol use
- A review of collateral records – e.g. police reports, victim statements, criminal records (Dutton & Kropp 2000 cited in Laing, 2004a, p.13).

#### *Risk Management and Safety Planning*

*Responding* to disclosures of family violence or risk in screening or assessment processes is the most important stage in the risk management process. Responding is designed to promote safety, accountability and healing, and will look different at the different stages of screening and risk assessment. Screening and risk assessment processes provide the vehicle for congruence between a person's experience, and a service response that promotes individually contextualised safety.

The Education Centre Against Violence (ECAV 2004) suggest some supportive responses following disclosure:

These are some things you could say:

- Unfortunately this happens in lots of families who use our services
- It can be hard to talk about this
- It's not your fault. No-one ever deserves to be hit.
- You have the right to be safe
- Domestic violence is a crime
- You have options available to you.

Responses to disclosures of violence or risk in screening process involves:

- Focusing on safety concerns, rather than on assessing the likelihood of risk and may include:
  - Decision-making regarding information and service provision
  - Development of a plan for immediate safety
  - Referral for completion of a risk assessment



- Law enforcement outcomes where perpetrators are held accountable for behaviours/crimes
- Responding to information provided in a risk assessment involves:
  - reflective conversations with victims about their potential safety or risk, and may include:
  - Providing information about the nature of family violence
  - developing, in collaboration with clients, a plan to ensure as far as practicable both their safety and their effective participation in family law system services
  - conducting a risk assessment with the (ex-)spouse to assess their capacity to respectfully engage in the service provided by your organisation, eg. assess desire/expectation to control process, capacity to focus on children's needs
  - referral to support services

## Implications for the family law system

The first, obvious and most practical implication for the sector is that to engage in any of these processes will require skill development, *time* allocated within service provision, and protocols and tools created that are specific to what your agency/company will be screening for, and the context of engagement with clients.

### Why use risk assessment and screening tools

Risk assessment and screening tools are a stage in an ongoing process of risk management. They are useful not just to predict the likelihood of future violence, but more importantly to inform what can be done to prevent further violence in the future, and ensure our processes (especially those mandated) do not contribute to harm.

Screening is intended to identify victims, and provide a *trigger* for responding; screening is not the response.

There are a number of caveats regarding the use of risk assessment tools. Laing (2004a) summarises these from the research literature. They include:

- A risk assessment tool should not be used as the sole basis for safety planning with women, but rather used in conjunction with other information (such as criminal justice records or police information on call outs if available).
- Research on the reliability, validity, and predictive accuracy of risk assessment is in its infancy.



- The quality of information on which risk assessment is based is critical. Multiple sources and multiple methods of data collection, including the victim/s are necessary.
- The use of risk assessment scores should not be a substitute for listening to women. There is a risk that, because of the aura of 'science' around risk assessment tools, women's voices and experiences may be disregarded:

...they employ a scientific language that seeks to foretell the future. Steeped in the aura of scientific legitimacy, relying upon 'clean data' that are checked into boxes on questionnaires, women's lives are stripped of their idiosyncrasies, their complexities, and subsumed into a final score or final solution that obscures the richness of their personal experiences.  
(Websdale 2000 p. 5)

- Women should not be placed in the situation of completing these tools where there is any possibility that this can place them at further risk from abusers – e.g. surveys should not be sent home for women to complete and return.
- It is important to be clear about 'what type of risk you are assessing for, and what change in intervention will occur as a result of the assessment' (Abrams, Belknap & Melton, 2001, p. 45). They argue that risk assessment should not be used to limit eligibility for services, but rather to identify when enhanced or expedited intervention is necessary. (Adapted from Laing, 2004 pp.13-14)

Others point out that, in any case, screening tools may not be effective in identifying couples whose disputes are founded in a history of domestic violence and where there are significant power inequalities. In particular, screening tools often highlight physical violence at the expense of emotional abuse (Bailey & Bickerdike 2005 p.10) or, most importantly, relationship dynamics that indicate abusive control.

These comments highlight some intrinsic dilemmas involved and raise a number of important questions:

- Should screening for family violence be used to restrict eligibility for services? (consistent with the Family Law Act's identification of violence and abuse as grounds for exemption from dispute resolution processes for example)
- If not, what 'enhanced or expedited' interventions should accompany mediation or other family law system services when violence is a factor?
- If so, what other counselling or support services are appropriate for such couples to be referred to? Are there sufficient appropriate alternative intervention programs available to cope with the very high number of separating couples with a history of violence in





their relationship? Does this response (referral) abdicate responsibility for ensuring the family law process does not contribute to further risk/harm?

### **Service and support options in relation to family violence**

The importance of collaboration between specialised domestic violence and other relevant services such as child protection agencies cannot be overstated. One of the encouraging developments in the sector in recent years has been the emergence of an increasingly open climate for collaborating and the sharing of expertise amongst many organisations and professional groups.

Effective responses to family violence need to be taken up on three tiers – systemically/sectorally, organisationally and individually. ‘Good individual practice cannot be sustained unless it is supported by organisational cultures and legitimated formally...by being enshrined in policy’. (PADV 2004 Book 3, p. 14)

A broad co-ordinated multi-system response to family violence is needed (see Laing, 2004b, p18) and it is important that counselling and mediation services know where they fit in such a systemic response and what other services complement their own. Strategic alliances need to be developed with a range of other workers in the field, including:

- Specialist domestic violence services
- Women’s groups
- Men’s groups
- Indigenous and multicultural services
- Police
- Health services
- Women’s refuges
- Child Protection workers
- Family Law services
- Teachers. (Laing 2004b pp. 21-25)

Victim advocates such as the National Abuse Free Contact Campaign (NAFCC) are vocal in calling for the expansion of support services for women and children escaping domestic violence and for parents and children recovering from living with violence and abuse. They are also insistent that there is a need for more adequate services providing information and advice about the family law system, legal aid and proper procedures when there is abuse and violence. This is especially necessary for Indigenous people and people from culturally and linguistically diverse backgrounds, who may not be familiar with these systems.

In each state and territory there are specialised services for the victims of family and domestic



violence, including Women's Legal Services, Legal Aid Offices, and Aboriginal Legal Units, as well as a range of other services such as Helplines. There is also a range of Domestic Violence Crisis Services and Resource Centres. A list of these support services is provided in the AVERT family Violence Training Package under *Useful Links* on DVD 1

### **Types of therapeutic or other interventions for working with family violence, their appropriateness and efficacy**

There is a range of family violence services in Australia. These include services provided by:

- Community health centres
- Family and community services
- Women's refuges, shelters or safe houses
- Family support services
- Church based and secular relationship and family welfare services
- Programs within correctional facilities and other programs which are part of a criminal justice response
- Community legal services
- Private consultants and practitioners.

What is critical in building relationships with these services is finding out which practice models and ideas inform their work. It is not enough to assume that all services that claim to understand family violence share perspectives, values or practices in common.

### **Conclusion**

Supporting families to develop respectful relationships, especially parental alliances, which will foster a healthy and nurturing environment for children, is increasingly a focus for the family law system. To achieve this detailed and systematic methods for identifying and responding to family violence are needed.

Consequently, screening and risk assessment are emerging practices that are increasingly playing an important role in the family system. The more the family law system recognises that family violence is a central concern, the more significant the appropriate practices of screening and risk assessment become. Likewise, the ability to develop effective safety plans in response to the identification of family violence is an important aspect of work within the family law system. While the different professional roles in the family law system may conduct these practices in different ways, the principle that identification of violence must be followed with a response to support safety is fundamental for all family law system workers.



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