Structured Professional Judgment (SPJ) Tools

A Reference Guide for Counter-Insider Threat (C-InT) Hubs

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Assessing and managing violence risk requires a detailed assembly of knowledge and skills typically acquired through a combination of education, training, and supervised experience.
Introduction

For more than a year, Ellen Kelly, a charge nurse tasked with supervising other employees at a military health center, attempted to manage Dan Merritt, a problematic civilian employee. Merritt was a poor performer who had received 53 patient complaints during his three years of employment—31 of which had occurred in the 13 months while Kelly was his immediate supervisor. During that time, Merritt was openly hostile, argumentative, and combative in his interactions with Kelly, often leaving her tearful and afraid. He was placed on a Performance Improvement Plan.

Kelly raised concerns with at least 14 people in her chain of command that Merritt would harm her. She shared her fears with her coworkers as well, including the health center’s head of security. Although Kelly reported her concern that Merritt was going to kill her, nothing was done. When Kelly got a new supervisor who took her complaints seriously, she was hopeful that some action might be taken. Instead, senior hospital administrators told both Kelly and her new supervisor that they were acting irrationally.

Kelly was not the only person concerned about Merritt’s potential for violence. Her administrative chain of command, health center leadership, and Human Resources department were all aware that Merritt had displayed several concerning behaviors and risk indicators, including erratic behavior, angry outbursts, and active intimidation of others. Multiple coworkers witnessed Merritt’s behavior, including when he would corner Kelly in the hallways, yelling contemptuously, making overt threats, and acting aggressively. They also saw this behavior escalate over time.

In the fall of 2019, Kelly raised concerns at least twice to others about Merritt’s dangerous behavior. One night at around midnight, Merritt sent an email to Kelly, accusing her of being out to get him. The message was so incoherent it seemed like Merritt was experiencing a mental break.

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1 This case example is adapted from actual events. Some of the names, identities, and facts have been changed to protect the privacy of those involved.
Later, Kelly called Merritt in to meet so they could work through some spreadsheets he had done incorrectly. This devolved into an episode in which Merritt loudly screamed at Kelly, accusing her of being the problem. She reported the episode to her supervisor but was told again that nothing could be done.

At the end of the workday, Kelly returned to her office and prepared to go home. Merritt walked in with a plastic bottle filled with gasoline, doused her with it, and immediately lit her on fire with two matches. Kelly ran into the hallway screaming for help. As Kelly was actively burning, Merritt stomped on her neck and attacked her with a pair of industrial scissors and a straight razor, attempting to stab her before being subdued by one of Kelly’s colleagues while another coworker came to her aid.

### Violence Risk in Insider Threat Cases

Although Executive Order (E.O.) 13587 did not specifically mention workplace violence, many agencies and organizations within cleared industry have recognized the importance of programs that both prevent violence and effectively counter threats of violence when they occur. Like the case above, reports from other workplace violence events have revealed that prior to an incident, the perpetrator had engaged in behavior and communications that concerned other people. However, those in positions to act either failed to recognize the potential threat or failed to take effective action to mitigate the risk and prevent the violent outcome. To minimize future risks to the workforce, any Hub within a comprehensive Counter-Insider Threat (C-InT) program should have the internal capability or access to an external resource to assess and manage the threat of violence risk, and that capability should operate on evidence-based or best-practice principles.

### Purpose and Scope of This Guide

The main purpose of this Guide is to improve C-InT professionals’ awareness of both violence risk assessment (VRA) and threat assessment (TA), as well as the value of structured professional judgment (SPJ) tools used in facilitating these assessments, to more effectively counter potential threats.

Throughout this Guide, we purposefully use the terms VRA and TA to refer to two distinct but complementary violence prevention strategies. While we provide a detailed overview later in this Guide, briefly, VRA is the systematic consideration of static and dynamic risk factors within a subject’s situation to assess the nature and likelihood of general violence or violence within a specific domain (e.g., sexual violence or domestic/intimate partner violence [IPV]); TA is the systematic, evidence-based assessment of multiple sources of information regarding a subject’s thinking and behavioral patterns to determine the extent to which the subject is moving toward a specific, targeted attack. Throughout this Guide, we sometimes refer to the two strategies collectively (i.e., “violence risk and threat assessment”) and at other times we refer to the strategies individually (i.e., “VRA” or “TA”).
This Guide begins with a broad look at violence risk and threat assessment and how both strategies emerged and evolved. It then focuses on how that evolution has led to the SPJ approach and how tools have been developed to support SPJ assessments. Finally, the Guide describes and reviews a selection of SPJ tools.

To be clear, this Guide is designed to inform; it is not a “how to” guide and is not designed to fully develop, certify, or equip competent violence risk or threat assessors. Awareness alone neither qualifies you to perform violence risk and threat assessments nor to use the SPJ tools discussed here. Both violence risk and threat assessment require expertise acquired through a combination of education, training, and supervised experience. You should seek the assistance of qualified VRA or TA professionals in assessment situations.

As a final note, this Guide focuses specifically on violence risk and threat assessment strategies, not the full range of investigative issues or behavioral concerns that can emerge in C-InT inquiries.

Overview of Violence Risk Assessment and Threat Assessment

The first section provides an overview of VRA and TA and distinguishes them from each other, as well as describing the contexts in which the potential for violence may emerge in a C-InT case. Review this section if you want to be able to:

- Recognize VRA and TA as distinct approaches,
- Describe the difference between VRA and TA in applied contexts, and
- Recognize the different risk factors related to general violence versus targeted violence.

The Evolution of Violence Risk Assessment and the Emergence of Threat Assessment

The second section explores the evolution of VRA and the emergence of TA. The purpose of this section is to provide context for C-InT program personnel around the current standards and procedures that violence risk and threat assessors should follow. Review this section if you want to be able to:

- Summarize the evolution of VRA to include discretionary and non-discretionary approaches,
- Summarize the evolution of actuarial assessments and SPJ assessments,
- List the seven basic steps of an SPJ assessment,
- Summarize the more recent emergence of the TA framework and the foundational principles of TA, and
- Explain how SPJ guidelines inform TA.

Selecting and Integrating SPJ Tools

The third section discusses how best to select and integrate SPJ tools for VRA and TA in C-InT contexts. Review this section if you want to be able to:

- Recognize the qualifications that assessors must have to use SPJ tools,
- Recognize how assessors select specific SPJ tools to use in C-InT Hubs, and
• Summarize the importance of considering reliability and validity when selecting SPJ tools.

**SPJ Tools for Assessing Violence Risk in Adults**

In the fourth section, we review six evidence-based SPJ tools that might be used in VRA and TA. The first three tools have been well validated in peer-reviewed scientific studies:

• Historical Clinical Risk Management-20, Version 3 (HCR-20V3),
• Short-Term Assessment of Risk and Treatability (START2), and
• Spousal Assault Risk Assessment Guide, Version 3 (SARA-V3).

The other three tools have been supported by preliminary studies but are still undergoing further validation:

• Workplace Assessment of Violence Risk-21, Version 3 (WAVR-21 V3),
• Terrorism Radicalization Assessment Protocol-18 (TRAP-18), and
• Brief Spousal Assault Form for the Evaluation of Risk (B-SAFER).

Though not yet as thoroughly researched as the first three evidence-based tools, these newer tools focus on specific issues such as workplace violence, radicalization, and IPV, all of which are related to the C-InT mission space.

Although this Guide only reviews six SPJ tools, we do not advocate for a single tool (reviewed or otherwise), and this Guide does not provide sufficient training to qualify you to use these tools. Review this section if you want to be able to:

• Provide a general description for each of the six SPJ tools,
• Summarize information on user qualifications for each of the six SPJ tools,
• Summarize overall quality and characteristics of each of the six SPJ tools, and
• Consider how each of the six SPJ tools is relevant to C-InT cases.

Finally, we close with a set of scenarios to highlight why certain behaviors matter and how those behaviors might lead to the selection of a particular SPJ tool.

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2 While the latest version of the START Manual is called Version 1.1, the authors still refer to the tool itself as the START, not START V1.1. For consistency, we also refer to the tool as the START.
Overview of Violence Risk Assessment and Threat Assessment

**Insider Threat (InT)** incidents include situations in which an insider causes physical harm to others or damage to their organization. Counter-Insider Threat (C-InT) professionals must have a basic understanding of the processes used to assess these risks. The purpose of this section is to distinguish **violence risk assessment (VRA)** from **threat assessment (TA)**, and to describe the reasons for those distinctions. By the end of this section, you should be able to:

- Recognize VRA and TA as distinct approaches,
- Describe the difference between VRA and TA in applied contexts, and
- Recognize the different risk factors related to general violence versus targeted violence.

**The Distinctions Between Violence Risk Assessment and Threat Assessment**

VRA and TA are sometimes loosely referred to in a way that suggests they are interchangeable, but they are recognized as distinct processes. Both are violence prevention strategies that depend on the accuracy and completeness of available information and are constrained by the dynamic nature of risk (Meloy et al., 2021). Although best practices for both call
for a structured and systematic approach to collecting and analyzing important information, there are several important distinctions between the two (see Table 1), and C-InT professionals should understand VRA and TA as different but complementary violence prevention strategies.

**Table 1**  
*Distinctions Between Violence Risk Assessment and Threat Assessment*

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Violence Risk Assessment</th>
<th>Threat Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Central Question</strong></td>
<td>What is the potential for this subject to engage in any violent behavior toward another person during a given period?</td>
<td>Is this subject moving toward an attack on an identifiable person?</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>Inform a risk management plan to mitigate the subject’s overall risk for general violence</td>
<td>Inform a threat management plan to disrupt the subject’s forward motion toward a specific, targeted attack</td>
</tr>
<tr>
<td><strong>Assessors</strong></td>
<td>Clinical, Forensic, and Correction Service Professionals</td>
<td>Law Enforcement, Security, and Forensic Professionals</td>
</tr>
<tr>
<td><strong>Time Constraints</strong></td>
<td>Non-Exigent</td>
<td>Pressing/Exigent</td>
</tr>
<tr>
<td><strong>Amount of Information Available</strong></td>
<td>Substantial Information</td>
<td>Limited Information</td>
</tr>
<tr>
<td><strong>Forecast Timeframe</strong></td>
<td>Moderate to Long-Term (e.g., 3, 6, 12+ months)</td>
<td>Imminent to Short-Term</td>
</tr>
<tr>
<td><strong>Assessment Focus</strong></td>
<td>Subject in Social Context</td>
<td>Relationship Between Subject and Target</td>
</tr>
<tr>
<td><strong>Evidentiary Emphasis</strong></td>
<td>Individual, Social, and Contextual Factors Based on Research Studies</td>
<td>Subject’s Thinking and Behavior</td>
</tr>
<tr>
<td><strong>Outcome Emphasis</strong></td>
<td>General or Emotional/Reactive/Impulsive Violence</td>
<td>Planned, Intentional (Targeted) Violence</td>
</tr>
<tr>
<td><strong>Nature of Judgment</strong></td>
<td>Level of General Risk</td>
<td>Level of Specific Concern</td>
</tr>
</tbody>
</table>

We will describe each strategy briefly to outline the characteristics and highlight the differences between them.
Violence Risk Assessment

In this Guide we define VRA as:

The systematic consideration of static and dynamic risk and protective factors within a subject’s situation and context to assess the likelihood of general violence\(^3\) or a specific type of violence (e.g., sexual violence, intimate partner violence [IPV]). The purpose is to inform a risk management plan to mitigate a subject’s overall risk for general violence.

VRAs are often conducted by clinical, forensic, and correctional service professionals in contexts without exigent time pressures (e.g., reviews for probation, parole, or release from a restrictive setting) and where a substantial amount of information is typically available (e.g., collateral interviews, extensive records regarding education, mental health, employment, and criminal history). Assessors often forecast violence risk within moderate timeframes of 3, 6, or 12 months.

VRAs typically focus on the subject by gathering evidence about the subject’s life and relating this information to the relevant individual, social, and contextual risk and protective factors, identified in professional literature and scientific research. The central question is: What is the potential for this subject to engage in violent behavior toward others over a given period? VRAs tend to focus on outcomes of general violence, and the resulting professional judgment is stated as a level of risk (e.g., low/moderate/high).

Threat Assessment

In this Guide we define TA as:

The systematic, evidence-based assessment of multiple sources of information regarding a subject’s thinking and behavioral patterns to determine whether, and to what extent, that subject is moving toward a specific, targeted attack (Fein & Vossekuil, 1995, 1998). The purpose is to inform a threat management plan to disrupt the subject’s forward motion toward a specific, targeted attack.

TAs are commonly conducted by law enforcement and security professionals, including investigators and analysts, who are often under pressing conditions in which available information is limited. TAs also tend to focus on imminent or short-term outcomes.

TAs typically focus on the relationship between the subject and the target, drawing evidence from the subject’s thinking and behavior. The central question is: Is this subject moving toward an attack on an identifiable person or group of people? TAs tend to focus on outcomes of targeted violence,\(^4\) and the resulting professional judgment is stated as a level of concern.

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\(^3\) “General violence” is a term similar to what Monahan (2012) calls “common violence” and refers to behaviors akin to, and contained within, the FBI violent index crimes of murder, rape, robbery, and assault.

\(^4\) Fein, Vossekuil, and Holden (1995) first published a definition of “targeted violence” to reference “situations in which an identifiable (or potentially identifiable) perpetrator poses (or may pose) a threat of violence to a particular individual or group” (Fein, Vossekuil, & Holden, 1995, p. 1).
Why Use Two Different Approaches?

VRA and TA are distinct approaches designed to answer different questions in different contexts. The differences outlined in Table 1 are not only descriptions of the two different approaches, but also highlight why different approaches may be necessary for a given case.

Consider the following analogy. Imagine your mission is to prevent “bad driving,” which you define as: driving behavior that violates traffic laws and/or causes harm to persons (e.g., other drivers, pedestrians) or property (e.g., other vehicles, telephone poles). You are asked to determine whether a subject, Willard, presents a risk for bad driving.

One way to approach the problem would be to carefully search the empirical research literature to identify the correlates and causes of bad driving. You would then assess whether risk and/or protective factors were present and, if so, how those factors applied to Willard. Given the presence of certain factors, you could envision what Willard’s potential for bad driving might be. This process is similar to classic VRA.

But what if you were faced with a specific situation in which Willard drove himself to a social gathering, then consumed a substantial amount of alcohol, and you now need to assess whether he might attempt to operate his vehicle while under the influence? Driving while intoxicated would certainly meet your definition of “bad driving,” but these are exigent conditions. That is, you are trying to determine whether there is a reasonable basis for concern and the outcome of your decision will determine whether, how, and how quickly you will intervene. You are not trying to answer an abstract question of probability or risk. Rather, you are trying to assess whether Willard is currently engaging in behavior that might lead to “bad driving” in the form of driving while intoxicated.

In this case, research-based risk factors may be less pertinent to your judgment. If you already know whether Willard has a prior DUI conviction or alcohol use problem, this knowledge might weigh into your calculus. But in this case, what’s more important than research-based risk factors is Willard’s behavior in the current situation and context. If you determine there is a reasonable basis for concern, you will probably be less preoccupied with a quantifiable probability or likelihood. Instead, you will be focused on what to do next—how to prevent a foreseeable bad outcome. This process is more like a classic TA.

Reasons for Different Approaches in VRA and TA

Breaking down the distinctions, there are at least four reasons why different situations may require different approaches to violence risk and threat assessment:

1. The critical factors to consider in risk for general violence are sometimes different than those for targeted violence,
2. The motivation for general violence is typically different than for targeted violence,
3. The nature of the behaviors of concern and the character of general violence are typically different than for targeted violence, and
4. The amount of time and information available to make a decision about general violence is typically different than for decisions about targeted violence.
Each of these reasons is discussed in detail below.

**Different Relevant Factors**

The risk factors used to develop VRA approaches have been derived from 50 years of research in criminology, psychology, and the broader social sciences exploring the causes and correlates of general violence. When researchers shift from general violence to specific types of offenses like sexual violence or IPV, the selection or strength of those risk factors tends to be different. That is likely to be true for targeted violence as well.

For example, although many perpetrators of workplace violence and lone offender terrorism may have diagnosable mental disorders (Albrecht, 2009; Corner & Gill, 2015; Katsavdakis et al., 2011), they may not have the types or severity of mental illnesses often found in individuals from which many of the common, research-based risk factors for violence were derived (Corner et al., 2018; Geck et al., 2017; Gill & Corner, 2017). Similarly, although prior violent behavior is a strong predictor of general violence, in a study of assassins and near-lethal *approachers*, only 20% had a history of any adult arrest for a violent crime (Fein & Vossekuil, 1999).

Further, some data on risk factors for general violence have been derived from studies on individuals whose violent acts were impulsive and unplanned (Borum et al., 1999), which may also limit the extent to which findings on general violence risk can be applied to targeted violence risk in organizational settings.

Although perpetrators of targeted violence may resemble criminal or forensic criminal populations in some ways, acts of targeted violence involve pre-selected targets, are rarely impulsive, and typically involve pre-attack behaviors. These findings suggest that the traditional risk factors for general violence may not always apply to acts of targeted violence, including targeted *workplace violence*.

**Different Motivations**

Motivationally, targeted violence reflects a grievance-based process (Calhoun & Weston, 2003; Scalora et al., 2002) that culminates in “long-developing, identifiable trails of problems, conflicts, disputes, and failures” between the subject and the target (Fein et al., 1995, p. 3). These internal conflicts often manifest externally in problematic behaviors (e.g., threatening or harassing communications), which may be amplified by situational and contextual factors. As a subject’s internal or external conflicts intensify beyond their ability to cope, they may begin to view violence as the best—or only—possible solution to their problems.
Different Behaviors and Character of Violence

Unlike many acts of general violence, acts of targeted violence typically (Collins, Scarborough, & Southerland, 2001; Meloy et al., 2012):

- Stem from long-lasting grievances,
- Are premeditated and planned, and
- Are purposefully focused on preselected targets.

Once the subject has committed to a violent action, they typically display overt “attack-related” behaviors, such as (Hollister & Scalora, 2015; Meloy et al. 2012; Scalora et al., 2002; Vossekuil et al., 2002):

- Acquiring and practicing with weapons,
- Communicating (intentionally or inadvertently) their violent intentions, and
- Escalating efforts to gain access to their target(s).

Because targeted violence is the result of a pathway of thinking and behavior, the subject’s pre-attack behaviors can serve as indicators and warnings, signaling a subject’s intent, planning, or preparation for an attack.

Different Time and Informational Constraints

Because VRAs are typically requested and conducted in non-exigent circumstances, there is typically a longer timeline for the assessment, which provides more time to gather more information. Assessors can conduct multiple interviews and review a wide range of official records to collect and verify information on risk and protective factors.

TAs, in contrast, are more likely to occur in exigent circumstances so less information is typically available. Assessors tend to focus more on observable, proximal behaviors and facts, rather than on a perpetrator’s characteristics (Vossekuil, Fein & Berglund, 2015). In short, in TAs, identifying concerning behaviors is critical (Meloy, Hoffmann & Hart, 2014).

Because targeted violence is the result of a pathway of thinking and behavior, the subject’s pre-attack behaviors can serve as indicators and warnings, signaling a subject’s intent, planning, or preparation for an attack.
The Evolution of Violence Risk Assessment and the Emergence of Threat Assessment

Violence risk assessment (VRA) and threat assessment (TA) are essential capabilities for professionals who work in or with Counter-Insider Threat (C-InT) Hubs. This section is not a “how to” guide for those who lack the training and experience to conduct a comprehensive violence risk or threat assessment. Instead, the purpose of this section is to provide context for C-InT professionals around the current standards and procedures that VRA and TA should follow. By the end of this section, you should be able to:

- Summarize the evolution of VRA to include discretionary and non-discretionary approaches,
- Summarize the evolution of actuarial assessments and Structured Professional Judgment (SPJ) assessments,
- List the seven basic steps of an SPJ assessment,
- Summarize the more recent emergence of the TA framework and the foundational principles of TA, and
- Explain how SPJ guidelines inform TA.

C-InT Hub: A team of multidisciplinary professionals who gather and review information about potential insider threat incidents to develop mitigation strategies.
Evolution of Violence Risk Assessment

VRA has evolved considerably in the past 25 years. Present-day VRA emerged from two broad approaches: discretionary and non-discretionary. The main difference between the two is whether the assessment is based on a human judgment.

In this Guide, we advocate for the use of **evidence-based VRA**, which involves gathering information about a subject and using the best available empirical evidence to understand their potential for violence against others in the future. This approach also helps the assessor to determine how to prevent that violence from occurring (Hart et al., 2011).

Discretionary Approaches

**Discretionary approaches** include a human judgment in the final appraisal. There are many ways to divide the discretionary sub-types; we divide them into unstructured and structured.

**Unstructured discretionary approaches** preceded structured approaches and were known as “dangerousness” assessments. Guided only by experience and opinions about what information might be relevant, an assessor would interview the subject to evaluate violence risk. They would also review information about the subject’s history and past behavior. Unstructured assessments sometimes focused on specific, past incidents of violence to understand possible patterns, triggers, and mitigations (i.e., anamnestic approach). Based on the information gathered, the assessor would determine the subject’s potential for violence. Unstructured approaches dominated VRA for most of its history, even when the evidence suggested they were not very accurate or helpful.

In the early 1980s, the best research showed that “psychiatrists and psychologists [were] accurate in no more than one out of three predictions of violent behavior over a several year period among institutionalized populations that had both committed violence in the past and who were diagnosed as mentally ill” (Monahan, 1981, p. 47). To be fair, the assessment method was not the only shortcoming; it is likely that early research studies underestimated professionals’ predictive accuracy by failing to include some violent outcomes that were not captured in the records (Monahan, 1988). Regardless, the evidence was not very encouraging, and three important trends soon emerged in VRA.

The first trend was a second generation of research that improved the ways VRA and violent outcomes were studied. Researchers started to consider violent behavior—not just an arrest or conviction for a violent crime—in their criteria for determining whether a violent outcome occurred. Not surprisingly, more cases were found to have violent outcomes. At least some of the old “missed predictions” turned out to be missed measures of the violent outcome itself. This second generation of studies provided promising results and suggested that there was at least some way to distinguish between individuals who would and would not be violent (Borum, 1996; Mossman, 1994; Otto, 1992).
The second trend was a change in the way assessors approached assessments, from a violence prediction model to a more practical violence risk assessment/management model. Instead of focusing on whether the subject was a “dangerous person,” assessors focused on risk as a contextual, fluid, and ongoing construct (National Research Council, 1989). The goal was to forecast the nature and degree of risk an individual may pose for certain behaviors over a set period and across different contexts. This laid the foundation for the risk-need-responsivity (RNR) model, which suggests that risk management strategies should be tailored to each offender based on their level of risk, specific risk/need factors, and factors most likely to help them benefit from intervention (e.g., strengths, learning style, personality, motivation; Andrews, Bonta, & Hoge, 1990; Andrews, Bonta, & Wormith, 2006; Bonta & Andrews, 2007). The model is often used in corrections to mitigate risk for repeat offenses, and its three component principles are as follows (Bonta & Andrews, 2007, p.1):

- **Risk Principle:** Match the level of service to the subject’s risk to re-offend.
- **Need Principle:** Assess characteristics/stressors that directly affect the subject’s likelihood to commit a crime and target them in treatment (criminogenic needs).
- **Responsivity Principle:** Maximize the subject’s ability to benefit from intervention by tailoring behavioral treatment to their learning style, motivation, abilities, and strengths.

The third development included key changes to the practices used to assess violence risk. Because unstructured, impressionistic assessments were not accurate, researchers needed to identify specific risk factors that set apart those who behaved violently from those who did not. This change allowed empirical evidence to guide which factors were considered. For example, based on the current state-of-the-art, Logan (2021a) outlined what might be regarded as a set of “First Principles” for risk assessment in cases of violent extremism (see Figure 1), which also apply to evidence-based VRA in general.

**Figure 1**
*Summary of Logan’s (2021a) First Principles of Risk Assessment*

- The main purpose of VRA is to inform risk management.
- VRA and risk management are not “one-off” activities. They are dynamic. Risk and mitigation can change over time based on changes in situation, condition, and context. VRAs need to be repeated periodically to reflect these changes.
- Violence risk is the product of evolving relationships between individual, situational, and social/contextual factors. These factors can increase or decrease the potential for violence.
- Professional guidelines for VRA and risk management may offer guidance for assessors when conducting VRAs. Different guidelines may be needed for different kinds of risk (e.g., workplace violence, intimate partner violence [IPV], sexual violence, violent extremism) and for different levels of assessment (e.g., from screening/triage through comprehensive assessments).
- The SPI approach is currently a standard of practice in VRA and risk management.
- Professionals involved with decisions affecting a subject’s personal liberty should have expertise in general principles of VRA and risk management and in any specialized areas (e.g., youth violence, violent extremism, sexual violence) relevant to the assessment.
• VRA and risk management professionals should rely on the best available evidence and standards to inform their information gathering, formulations, and decision-making.
• VRA and risk management professionals should seek consultation and/or clinical supervision as needed to extend their own knowledge and expertise.

Non-Discretionary Approaches

Unlike discretionary approaches, non-discretionary, or actuarial, approaches use a mathematical formula to assess risk. Actuarial assessments are a classic example of this approach (see Figure 2). Actuarial assessments are considered non-discretionary because the end estimate, or decision, is determined by a formula. Although human judgment may be involved in rating or coding individual variables—like whether the subject has an alcohol problem—the variables are combined and weighted without a human decision.

Actuarial assessments combine a specified set of variables to estimate the likelihood of an outcome in a particular population, over a specific period. These formulas are often used in the insurance industry to estimate life expectancy or health risks based on factors like gender, age, and weight. For violence risk, actuarial formulas are sometimes used in criminal justice or forensic settings, particularly with certain sex offender assessments. No actuarial tools currently exist for most non-violent C-InT related issues.

Figure 2
Example of Actuarial Assessments

Actuarial assessments are not assessments of an individual, but a way to provide a statistical reference point for people who share certain characteristics. For example, assume a given actuarial formula called the “ABC” contains five variables. After scoring those variables by the ABC’s rules, the assessor derives a total score of three.

The assessor looks up this score on the matrix and sees that it corresponds to a likelihood of 23%. That 23% is not a probability score. Instead, it refers to people in the formula’s validation sample who share certain measured characteristics with the subject of interest.

Even using the same variables, however, violence risk estimates can vary considerably across different samples. In the ABC’s validation sample, some people who had that score (23%) were violent, but most others (77%) with the same score were not. There is no real way to know whether a given examinee would share a fate with those who were violent or those who were not violent. The assessment simply assumes that all other things being equal (a rare situation), the actuarial result provides an “on average” estimate.
There are several actuarial tools, such as the Violence Risk Appraisal Guide (VRAG) and VRAG-Revised (VRAG-R) and the Static-99R, that have been used to estimate the likelihood of general or sexual violence risk (see items in Figure 3).

**Figure 3**
*Items from the VRAG-R*

- Lived with both biological parents to age 16 years (negatively/inversely related to repeat offense)
- Elementary school maladjustment
- History of alcohol or drug problems
- Marital status at time of index offense
- Charges for nonviolent offenses prior to index offense
- Failure on conditional release from corrections
- Age at index offense (negatively related to repeat offense)
- Charges for violent offenses before index offense
- Number of prior admissions to correctional institutions
- Conduct disorder before age 15 years
- Sex offending
- Antisocial behavior (i.e., poor behavioral controls, early behavioral problems, juvenile delinquency, revocation of conditional release, criminal versatility)

Non-discretionary approaches have several positive features. For example, non-discretionary approaches are:

- **Systematic and consistent**: No matter who applies the formula, the same variables are considered using the same definitions.
- **Measurable and reliable**: As long as the instructions are followed, different assessors will get the same result, even across different contexts (although some studies have shown challenges with consistency between raters when formulas are used in practice).
- **Grounded in research**: In most cases, the variables included have a known statistical association with violence in the population of interest.
- **Transparent**: The variables that contribute to the estimate and the way in which those variables produced the estimate are all made clear.

There are also downsides to non-discretionary approaches that limit the usefulness of actuarial tools in applied contexts, including in C-InT programs (Blanchard, Shaffer-McCuish, & Douglas, 2016; Douglas, 2019; Hart, Douglas, & Guy, 2017). Non-discretionary approaches (actuarial tools) tend to:

- **Rely on a limited number of general variables**: Actuarial tools consider only a small subset of risk factors and ignore case-specific variables that might affect an individual’s level of risk (Hart, 1998; Monahan, 2008).
- **Rely on mostly group data**: It is difficult to apply violence rates or probabilities from group data to individual cases (Cooke & Michie, 2010; Hart, Michie, & Cooke, 2007).
- **Rely on mostly historical variables**: This reliance can mute important behavioral information that assists in developing a risk management plan, and it prevents the assessment from adapting over time (Buchanan, 1999; Fazel et al., 2012; Hart, 1998).
- **Result in static assessments**: Non-discretionary approaches typically do not consider
situational variables and dynamic factors that could be targeted through intervention to mitigate the risk of violence.

- **Focus on the “likelihood” of an outcome:** There is very little consideration for the nature, seriousness, circumstances, or imminence of potential violence.
- **Choose variables only for their statistical associations:** Variables are selected without any regard for causality or how a risk factor may affect an individual’s behavior.

## A Systematic Method for Violence Risk Assessment

The desire to move from unstructured, intuitive approaches to a more systematic method for violence risk assessment increased the use of non-discretionary actuarial formulas (Quinsey et al, 1998). Overall, however, these formulas are not very useful for informing risk management and are less adaptable to change over time because they are based on demographic or historical factors.

There is, however, another way to make VRA more systematic without completely losing the benefit of human judgment—improve the structure of the professional assessments and judgments themselves. Many professional fields—especially those in medicine—have found that providing structure for critical decisions leads to better, more accurate outcomes (Nickerson, Taub, & Shah, 2020; Sibbald, de Bruin, & van Merrienboer, 2013). For instance, one reason for low accuracy in VRA is that assessors often fail to consider and weigh the relevant factors in their decisions (Cooper & Werner, 1990; Werner, Rose, Murdach, & Yesavage, 1989; Werner, Rose, & Yesavage, 1983). Even the most basic tool, a checklist, will help to reduce errors and biases and help assessors focus on the most important factors.

In the mid-1990s, Christopher Webster and his colleagues applied decision structuring to violence risk assessment and management, ultimately leading to what is known as the SPJ approach. When using SPJ, the assessor refers to a pre-determined list of factors contained within an SPJ tool that have a known, empirically validated relationship to violence in the target population. Each factor has rating criteria (e.g., Yes/Partially/No or Low/Moderate/High) and is defined in behavior-based terms. These criteria make ratings across different assessors more consistent. Then, based on the best available evidence derived from research, record reviews, and subject interviews, the final risk appraisal is based on human judgment, not on a specific “score.”

Studies have shown that risk ratings based on SPJ assessments are more accurate than those based on unstructured clinical judgments (Guy, 2008; Guy, Packer, & Warnken, 2012; Hart, Douglas, & Guy, 2017; Hilterman, Nicholls, & van Nieuwenhuizen, 2014). They may also perform as well as or better than some actuarial predictions (Hart, Douglas, & Guy, 2017; Heilbrun, Yasuhara, & Shah, 2010; Kropp, Hart, Webster, & Eaves, 1995; Singh, Grann, & Fazel, 2011). The SPJ approach is backed by research, sensitive to change, and directly applicable to risk management. It is, therefore, the most appropriate model for assessing and managing violence potential in insider threat cases involving violence.
The Historical Clinical Risk Management-20 (HCR-20), developed in the mid-1990s, was the first prominent SPJ tool (Webster et al., 1995). Currently in its third version (Douglas et al., 2013), the HCR-20 is probably the most widely used and extensively researched SPJ tool in the world for assessing violence risk in adults. Hundreds of research studies have been conducted on the HCR-20, and it has been translated into multiple languages. The HCR-20, which is discussed in Section 4: SPJ Tools for Assessing Violence Risk in Adults, provided a model for most of the SPJ tools that followed it.

Process for Applying the SPJ Model

The SPJ Assessment Model and SPJ tools emerged at around the same time, and each informed the other. The tools were developed to bridge the gap between violence risk research and practice. Most SPJ tools have a similar structure that includes:

- A list of risk/protective factors,
- Clear definitions for each factor,
- Instructions for determining the presence/absence or “level” of each factor, and
- A section for a summary risk rating, without a set mathematical formula for drawing conclusions.

The procedures for using or applying these tools in a case are typically similar as well. Douglas et al. (2013) outline seven steps for a comprehensive SPJ risk assessment, which, given similarities across SPJ tools, applies to most full-scope SPJ assessments:

1. Gather all the necessary information.
2. Determine the presence of risk and protective factors.
3. Determine the relevance of these factors.
4. Develop a risk formulation.
5. Create risk scenarios.
6. Develop risk management strategies.
7. Determine [final] opinions (i.e., final risk judgments or summary risk judgments).

We briefly discuss each of these seven steps below.

1. Gather Necessary Information

The first step in any assessment is to gather the data needed to make a decision. The information required may vary by question, but typically, data gathering involves interviews with both the subject and collateral informants (e.g., coworkers, supervisors). It also involves a review of relevant available records. The main goal is to obtain reliable and relevant information across various domains of interest, such as:

- The subject’s behavioral history (e.g., violent/antisocial behavior, mental health diagnoses, trauma, employment problems, relationship problems),
- Social/contextual factors (e.g., peer associations, stressors, living environment, support coping mechanisms), and
• Behavioral functioning/personality (e.g., antisocial attitudes, anger problems, impulsivity, low empathy).

Assessors should record the sources for key data points so reliable information can be weighed more heavily.

2. Determine the Presence of Risk/Protective Factors

Based on the information gathered, the assessor should identify factors that may increase or decrease the potential for violence. In the SPJ approach, empirical evidence and best practices determine which risk and protective factors receive focus. For instance, some factors can vary based on the reference population (e.g., sex offenders vs. non-offenders) or specific violence concerns.

**Risk factors** are factors that may increase the risk for violence and can be divided into two groups. First, **nomothetic factors** are derived from research samples and defined as factors that differentiate between groups of people who are violent and groups who are not. Age, gender, and psychopathic traits are examples of common nomothetic risk factors for violence. Second, there may also be factors in a case that increase the potential for violence in a specific individual. These are called **idiographic factors**, and they are specific to the subject’s case. They can operate in the same way triggers do for trauma or negative emotional reactions. For example, noisy, high-stimulation environments may not increase the potential for violence in most people, but if a person is highly sensitive to such conditions, those environments could be a risk factor specific to that case. The assessor should assess for both nomothetic and idiographic risk factors.

It is also important to look for protective factors, which may decrease an individual’s potential for violence. The absence of a risk factor does not count as a protective factor. For example, not having a substance abuse problem is not protective on its own. Protective factors bring about positive social behavior or restrain or control negative behavior. They are typically found in:

• **Psychological traits** (e.g., intelligence, resilience, empathy),
• Relationships (e.g., attachments to people or institutions), and
• Contexts (e.g., settings that encourage social behavior or are not tolerant of violence).

**Protective factors** may reduce violence risk directly. For example, high self-control and good problem-solving abilities may make it less likely that a person will be impulsively aggressive in a stressful situation. Protective factors may also reduce risk indirectly by mitigating the negative effect of a risk factor. For instance, a person’s strong attachment to a peer group that does not condone violence can mitigate the negative effects of living in a high-crime area.
3. Determine the Relevance of Risk/Protective Factors

Not all risk/protective factors will be equally relevant for all cases. After carefully analyzing the subject’s behavioral history—particularly any past episodes of violence or aggression—the assessor will need to go back through the list of risk factors that were present to determine which are relevant to the case. A **relevant factor** is typically one that affects the following:

- Behavioral control (e.g., disinhibitors or destabilizers, such as impulsivity or psychotic symptoms),
- Decision-making about violence (e.g., motivators such as grievances or pro-violence attitudes and expectations), and
- Level of engagement with risk reduction efforts (e.g., history of treatment non-adherence).

The relevant factors should then be marked with a note about their roles (as disinhibitors, destabilizers, motivators, etc.) for easy identification. This process applies to both research-based (nomothetic) and specific case-based (idiographic) risk/protective factors.

4. Develop a Risk Formulation

Identifying the presence and relevance of key factors is the foundation for applying them to a case. But analyzing risk requires more than just adding up the number of risk factors. While more risk factors often indicate higher risk, this is not always the case. A simple tally does not account for the nature, severity, frequency, or imminence of risk, nor does it balance the potential effects of protective or mitigating factors. Perhaps most importantly, a raw count does not link factors with risk in an individual case, or help the assessor make sense of the case. Moreover, simply tallying the risk factors does not inform any risk management efforts.

A **case formulation** bridges the gap between the analysis of risk and protective factors and a plan to manage the risk. It provides the framework in plain narrative form to tell a clear story that explains as much of the available evidence about the relevant risk factors as possible. In short, a case formulation provides a working hypothesis of why. It is an attempt to give meaning to the known factors in light of the dynamics driving behaviors of concern. The assessor draws connections between the subject’s predispositions, vulnerabilities, motives, risk and protective factors, and strengths. Ideally, causal connections should be based on, or at least consistent with, existing behavioral and social science theories (Logan, 2017). As Logan (2017) notes:

> ... an understanding of individual risk potential should underpin the action taken to manage it. This is because an understanding of how the various relevant risk factors relate to one another and relate in turn to the potential for harm will ensure that interventions have the best chance of being sensitive to the needs that violence and aggression may otherwise be used [by the subject] to meet. Formulation is the name given to this process of understanding individual risk. Formulation is increasingly recognized as the central element of the risk assessment and management task, as well as the necessary precursor to treatment and intervention (p.1).
5. Create Risk Scenarios

With a case formulation in mind, the assessor understands how certain risk and protective factors might affect the potential for violence. Next, the assessor should try to specify those risk-related concerns to get a clearer idea of what they are trying to prevent. The assessor should consider several things, including:

- The types of aggression or violent behavior that seem likely,
- The timeframes in which that behavior might occur,
- The contexts for potential violence,
- Any potential targets or victims,
- The nature of the harm that could be inflicted, and
- Any possible events, warning signs, or indicators that precede a violent episode.

The assessor can integrate and organize their projections using a scenario planning method. A classic, quantitative definition views risk as a function of scenarios, probabilities, and consequences and conceptualizes a “risk analysis” as comprising “an answer to the following three questions:

1. What can happen? (i.e., What can go wrong?)
2. How likely is it that that will happen?
3. If it does happen, what are the consequences?” (Kaplan & Garrick, 1981, p. 13)

Scenario planning creates forecasts of events that could reasonably occur in the future in a case. Scenario planning experts (Hart et al., 2011; Hart & Logan, 2011; Logan, 2017; van Notten et al., 2003) have suggested several common scenarios to consider:

- **Continuation Scenario**: The subject continues to behave as they have in the past and may engage in similar acts of violence or aggression.
- **Twist Scenario**: Many aspects of the subject’s behavior stay the same, but there are changes in other areas, like the nature of violence committed or the target of violent acts.
- **Worst Case Scenario**: Violence or aggression escalates, and the nature, severity, or frequency increases.
- **Best Case Scenario**: The nature, severity, or frequency of violent/aggressive behavior decreases or stops entirely.

Because the future is uncertain, many outcomes are possible. It therefore makes sense to focus on these few scenarios for risk management planning.
6. Develop Risk Management Strategies

After analyzing the risk and protective factors and the corresponding risk scenarios, the assessor should create a management plan to prevent those scenarios from occurring. In their Manual for the Historical Clinical Risk Management-20, Version 3 (HCR-20V3), an SPJ tool for assessing violence risk in adults, Douglas et al. (2013) describe four broad categories of risk management:

- **Monitoring**: Violence prevention made possible by early and timely warnings. This may involve ongoing observation of behavior, contexts, and situations that may signal changes in risk status or potential for violence. Frequent monitoring is especially valuable in higher risk cases.

- **Supervision**: Enforced surveillance, restrictions, and oversight. This is a level of intervention beyond observation and monitoring (e.g., prohibitions against visiting particular spaces, contacting certain persons, engaging in certain activities, possessing certain materials or provisional release).

- **Treatment**: Interventions to mitigate the impact of modifiable risk factors. This may include the application of psychological/behavioral health services to mitigate mental health or substance abuse issues.

- **Victim Safety Planning**: Steps taken to reduce the vulnerability of targets. This may involve increasing security in physical spaces where targets may be located or recommending ways for potential targets to enhance protective measures and make themselves less vulnerable to serious harm.

7. Determine Final Opinions

The final step in the SPJ process is to develop a conclusion about the subject’s risk for violence. The most basic judgment is often referred to as a **summary risk rating** (see Figure 4). While inferences for risk management planning are subjective, the summary rating is measurable. It indicates a level of risk and communicates:

- The degree of concern about the likelihood of future violence,
- The intensity of resources or services needed to manage the case, and
- The intensity with which the case should be monitored and re-assessed.

In the SPJ approach, the assessor uses an SPJ tool to apply a final violence risk level (e.g., none, low, medium, high) rather than a score, ratio, or number (as with actuarial tools).
A low-risk rating conveys that violence is unlikely both now and in the future. Cases with a low-risk rating typically require no intervention, monitoring/supervision, or regular re-assessment.

A moderate-risk rating conveys an elevated potential for, and concern about, future violence. Some risk mitigation strategies are warranted. Moderate-risk cases should be monitored and periodically re-assessed for potential changes.

A high-risk rating reflects a high level of concern about the subject’s potential for violence. Timely risk management interventions are imperative for high-risk cases, and these cases should receive the highest priority for risk mitigation services and resources. High-risk cases should be closely monitored and regularly re-assessed.

As noted, risk level should not be determined by just tallying the number of overall risk factors. The number of risk factors relevant to a case may be a better indicator of risk level in that case. Conversely, a tally of the number of overall risk factors is often better at forecasting general violence, or any type of aggression toward any person, without regard to the nature/type, seriousness, and potential imminence. To determine the final risk level in a case, however, assessors focus on the number of relevant risk factors.

The General Personality and Cognitive Social Learning (GPCSLS) perspective of criminal behavior (Bonta & Andrews, 2016) identifies eight factors (which they call the “Central Eight”) that consistently predict general antisocial and criminal behavior:

1. History of Antisocial Behavior
2. Pro-Criminal Associates
3. Pro-Criminal Attitudes
4. Antisocial Personality Pattern
5. Family/Marital Issues
6. Substance Abuse
7. School/Work Difficulties
8. Low Involvement in Prosocial Leisure/Recreation

These general violence risk factors are merely a starting point. If the subject has significant risk factors of concern in several of these areas, the assessor can begin with the assumption that this is a high-risk case, then work backwards to explore whether—and why—a lower risk level may be more appropriate. The key is to start by considering whether each of the general violence risk factors is present, then to explore each factor in greater detail to inform the final risk rating. In addition to considering the presence and impact of the eight general violence risk factors, the final risk rating determination should be based on a detailed assessment of the following aspects of any potential violence:

- Nature/Type (i.e., the form of violence),
- Seriousness (i.e., the significance and impact of the violence), and
- Imminence (i.e., the timeline in which the violence is expected to emerge).
The nature/type, seriousness, and imminence of potential violence will also depend on the subject’s intent to engage in violence or do harm, the presence of destabilizing circumstances, and the availability of risk management strategies or resources.

At the end of the day, VRA is an iterative process. Determining the risk level is not the end of the process, but rather the first step of risk management. This means the assessor must continually revisit the original determination of risk level as time progresses or as risk and protective factors change.

C-InT personnel should be aware of current best practices in VRA and understand the importance of evidence-based approaches—especially the SPJ model. They should be familiar with commonly used SPJ tools, their strengths and limitations, who is qualified to use them, and circumstances where their use might be appropriate. If a Hub does not have its own trained professionals to lead a comprehensive VRA, it should identify and vet a qualified consultant⁵ who can ensure the resulting assessment is consistent with the state-of-the-art in evidence-based practice.

**Emergence of Threat Assessment**

As discussed earlier in this Guide, and in contrast to VRA, TA is the systematic, fact-based assessment of multiple sources of information regarding a subject’s thinking and behavioral patterns to determine whether, and to what extent, that subject is moving toward a targeted attack (Fein, Vossekuil, & Holden, 1995; Fein & Vossekuil, 1998; Vossekuil, Fein, & Berglund, 2015). The purpose of completing a TA is to inform a threat management plan to disrupt the subject’s forward motion toward a targeted attack.

**History of the Threat Assessment Model**

In the early 1990s, as researchers actively debated the relative superiority of human judgment (discretionary) and actuarial (non-discretionary) approaches in VRA, and as the concept of SPJ tools was first beginning to emerge, several trends converged that led to a structured assessment approach for targeted violence.

The first was a legal interest in exploring ways to potentially prevent lethal, targeted violence before it occurred. In 1989, actress Rebecca Schaeffer was shot and killed in the doorway of her West Hollywood apartment by an obsessed fan who had stalked her for three years. The next year, in 1990, in Orange County, California, five women were murdered by former intimate partners. All five women had active restraining orders against their assailants and expressed fear that their former partners would kill them. The confluence of these events ultimately led to the first anti-stalking law (in California), and perhaps the first piece of legislation to focus specifically on preventing violence by recognizing and acting on pre-attack behaviors. By 1992, anti-stalking laws existed in 19 states and Congress asked the National Institute of Justice to draft a model anti-stalking law at the federal level (Guy, 1993).

⁵ Work with known DoD experts to assist you in verifying the stated credentials, educational degrees, and experience of C-InT consultants. The information provided in this Guide serves as a starting point to better understand basic standards.
Before the emergence of anti-stalking laws, the U.S. Secret Service was one of the few law enforcement agencies tasked with preventing targeted violence crimes: namely, assassination of national leaders. When these new laws required state and local law enforcement agencies to address targeted violence, there was no clear guidance on how those cases might best be identified, assessed, and managed. To help bridge this gap, Robert Fein, a forensic psychologist, and Bryan Vossekuil, a U.S. Secret Service Agent, examined all known cases of targeted attacks (or approaches with lethal means) on public figures in the United States since 1949. They wanted to understand not only the background and characteristics of these perpetrators, but also the subjects’ ideas and actions that preceded the attack, so that investigators might better know what to look for.

What Fein and Vossekuil (1999) found in their investigation, titled the Exceptional Case Study Project (ECSP), contradicted some of the prevailing conventional wisdom about attacks on public figures. They concluded that attackers did not fit any one descriptive or demographic “profile,” mental illness rarely played a key role, and those who threatened targets were not the most likely ones to attack targets. In fact, none of the perpetrators who had attacked a public figure in the United States within the preceding 50 years had ever communicated a threat directly to the intended target.

**Principles of Threat Assessment**

The ECSP led to a new approach to protective intelligence, built on three key principles:

- **Targeted violence is the result of an understandable and often discernible process of thinking and behavior.** Targeted attacks are rarely sudden or spontaneous events. Perpetrators typically plan and prepare in advance. The behaviors associated with that planning and preparation may help to signal an impending attack.

- **Targeted violence stems from an interaction among person, situation, setting, and target.** Information about a subject’s personal history, predispositions, and characteristics must be evaluated in light of their current situation and factors pertaining to the intended target (e.g., target’s vulnerability, subject’s familiarity with the target’s work and lifestyle patterns).

- **A key to investigating potential cases of targeted violence is identifying the subject’s attack-related behaviors.** Perpetrators of targeted violence often engage in observable behaviors that precede and are linked to their attacks, including communication, planning, and logistical preparations. Identifying those behaviors may be critical to understanding a subject’s position, progress, and momentum on the pathway toward an attack.

**From Protective Intelligence to Threat Assessment**

This approach to protective intelligence became the foundation of contemporary TA methodology. Fein and Vossekuil (1998) noted:

> Threat assessment or protective intelligence is the process of gathering and assessing information about persons who may have the interest, motive, intention, and capability of mounting attacks against public officials and figures...The primary goal of every protective intelligence investigation is to prevent an attack on a potential target (Fein & Vossekuil, 1998, p. 7).

As with protective intelligence, the purpose of TA is to effectively identify, assess, and manage persons who might pose a threat to an identified or identifiable target. While protective intelligence focuses on preventing attacks against public officials and figures, TA can be used for any targeted person. The process used in protective intelligence to investigate planned assassinations and attacks...
on public figures is fundamentally the same process now applied using TA to other forms of targeted violence, such as certain types of workplace violence or school shootings.

**Key Questions in Threat Assessment and Management**

There are several key questions that assessors should consider when conducting a TA, such as:

- Is there information to suggest that the subject is on a path that might lead them to mount an attack? If so, then...
  - Where is the subject on that path?
  - How quickly is the subject moving toward an attack?
  - How close is the subject to mounting an attack?

- If a subject is assessed to be on a path to a potential attack, the key threat management questions are:
  - How should the subject be monitored?
  - What information should be gathered?
  - What interventions should be considered and when?

Note that this fact-based approach to assessment shares some characteristics with SPJ. For example, like SPJ, TA is systematic and grounded in both empirical research and a subject’s behavioral history. It is also sensitive to facts and situational influences, which allows it to be flexible and responsive to changes in circumstances. Finally, it is focused on both management and mitigation.

**Threat Assessment’s Emphasis on Observable Behaviors**

TA is an operational assessment model used to examine a subject’s thinking and behavioral patterns to determine whether, and to what extent, that subject is moving toward a targeted attack (Fein, Vossekui, & Holden, 1995; Fein & Vossekui, 1998). It is not focused primarily on identifying historical, individual, or social/contextual factors or characteristics that might increase or decrease the potential for general violence. TA focuses on proximal, observable behaviors and facts (Vossekui, Fein, & Berglund, 2015) or profiles (Borum et al., 1999).

In contrast to most VRA, TA is focused on behavioral management and is driven by the need to prevent targeted violence. It requires time-critical decisions, which are often based on limited information available in an operational, dynamic, and real-time setting (Borum et al., 1999; Meloy et al., 2021). Also, unlike most general VRA models, risk management/mitigation planning must also consider specific potential targets of the concerning behavior.

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6 These are overarching “threshold” questions. For a more detailed list of questions for a TA, see Fein and Vossekui’s Protective Intelligence Threat Assessment Investigations: A Guide for State and Local Law Enforcement Officials pp. 50-52. Available at: [https://www.ojp.gov/pdffiles/170612.pdf](https://www.ojp.gov/pdffiles/170612.pdf).
Risk Formulation in Threat Assessment

A TA’s resulting risk formulation is made in relation to specific targets implied by the subject’s concerning behavior. For each case, assessors categorize their level of professional concern (e.g., high, medium, low) and then collectively sort their cases by relative priority, to determine the appropriate level of immediate response and, ultimately, prevent targeted violence (James, Farnham, & Wilson, 2014).

Because the concept of risk typically refers to known probabilities, or at least measurable uncertainty, and because information in a TA may be limited, determining a level of concern is typically more appropriate than the concept of measurable risk (Scalora et al., 2002). Level of concern determinations, as with general VRAs, are based on professional expertise and supported by empirical evidence. Such levels of concern must be carefully defined, in terms of both assessment criteria and resulting resource allocation. High-concern cases require an urgent response, moderate-concern cases require a prompt response, and low-concern cases typically do not require any significant response or management plan.

Integrating SPJ in Threat Assessments

Although the SPJ approach and SPJ tools originally emerged as applications for VRAs, and traditional VRA methods differ from those of TA, the SPJ approach (including some SPJ tools), may complement a TA inquiry. In fact, some of the more recently developed SPJ tools are framed more explicitly around a TA model and focus less on general violence and more on types of targeted violence like workplace violence (e.g., Workplace Assessment of Violence Risk-21, Version 3 [WAVR-21 V3]) and lone offender terrorism (e.g., Terrorism Radicalization Assessment Protocol-18 [TRAP-18]). As a result, this second generation of SPJ tools may integrate even more seamlessly with TA.

While SPJ tools require training and must often be purchased, there are multiple benefits that outweigh these upfront costs. Integrating the SPJ approach and SPJ tools within a TA framework provides several benefits to support C-InT inquiries into potential violence. The SPJ approach can provide guidance for:

- Systematically structuring the assessment,
- Rating factors in the assessment,
- Making and communicating final opinions, and
- Developing threat management strategies.

Process for Applying SPJs to Threat Assessments

The same steps used to apply SPJ in VRA can be used to guide TA and ensure the process is conducted according to explicit guidelines grounded in scientific research and professional literature (Cook et al., 2014). Adapting SPJ’s seven basic steps to a TA could produce the following structure:

1. Gather all necessary information available.
2. Determine the presence of behaviors that may indicate planning, preparation, or intent to attack.
3. Determine the relevance of these behaviors in assessing where the subject is on the pathway and how quickly they are moving toward an attack.
4. Develop a risk formulation.
5. Create risk scenarios.
6. Develop threat management strategies.
7. Determine final opinions regarding the level of concern.

Incorporating SPJ tools into TA provides assessors with additional data to help develop interventions or threat management strategies. Newer SPJ tools that focus on types of targeted violence—rather than general violence—provide even more direct guidance on which factors to consider and how to think systematically about defining them.
Structured professional judgment (SPJ) tools support evidence-based judgments and actionable recommendations without relying on actuarial formulas. These judgments are made by examining both static (e.g., historical or demographic) and dynamic/modifiable (e.g., situational or contextual) evidence-based risk factors, which may increase or lessen the likelihood of violence in a given case (Andrews, Bonta & Wormith, 2006; Douglas & Skeem, 2005; Jones, Brown, & Zamble, 2010).

Although SPJ tools are currently the best practice approach for violence risk assessment (VRA) and are also applicable to threat assessment (TA), not all SPJ tools are right for all concerning behaviors that come to the attention of a Counter-Insider Threat (C-InT) Hub. Moreover, not all C-InT professionals are qualified to use all SPJ tools. Therefore, C-InT Hubs are ethically responsible for accurately assessing their personnel and consultants to make sure they are properly trained and qualified for the tools they wish to use.

This third section discusses how to best select and integrate SPJ tools for VRA and TA in C-InT contexts. By the end of this section, C-InT professionals should be able to:

- Recognize the qualifications that assessors must have to use SPJ tools,
- Recognize how assessors select specific SPJ tools to use in C-InT Hubs, and
- Summarize the importance of considering reliability and validity when selecting SPJ tools.
User Qualifications

Professional judgment is at the core of the SPJ model, so it is important to consider an assessor’s qualifications. Nearly every profession includes in its ethics code that its members should only practice within the boundaries of their competence and expertise. This requires a healthy degree of professional self-awareness and humility. Those conducting VRAs and TAs should be aware of the following:

• What they should know (prevailing standards in the profession, based on the assessor’s education, training, and experience),
• What they do know (how their current knowledge, education, training, and experience aligns with those prescriptive standards), and
• What they do not know (gaps in and limitations of their current knowledge, education, training, and experience, relative to the prevailing professional standards).

In addition to the ethical and practice standards of an assessor’s own profession, they should also be mindful of professional standards specific to VRA or TA, as conveyed by relevant professional organizations (e.g., Association of Threat Assessment Professionals [ATAP], 2020). These standards provide professional guidance, even if one is not a member of the organization. Finally, most SPJ tools also have explicit, tool-specific user qualification guidelines (discussed in the individual tool reviews below). Anyone considering the use of an SPJ tool should know and comply with the general standards for VRA and the specific qualifications to use a given SPJ tool.

Relevant Expertise in VRA and TA

Because SPJ tools support, but do not replace, professional judgment in all phases of the assessment, assessors must have a general foundation in the empirical and professional body of knowledge for VRA and TA. Salman and Gill (2020) surveyed a multi-disciplinary group of experienced violence risk and threat assessment professionals to gauge their opinions on the kinds of training and experience assessors should have. The survey focused on assessing risk for violent extremism, but its findings help to understand prevailing standards in VRA more generally. Although there was some consensus that assessors should have at least a university-level education, participants believed professional training and experience in general principles of VRA, specific SPJ tools, and psychology/behavioral health were even more critical.

Salman and Gill (2020) also mentioned the importance of supervised practice and consultation, as well as fundamental practical skills such as interviewing and assessing people within specific populations for violence risk. Supervised practice is a critical element in developing assessment skills. Access to consultation is essential for assessors because it:

• Assists in identifying proper resources when assessors encounter issues beyond their training, competence, and expertise;
• Provides a different perspective to make up for potential blind spots in the available data or reasoning; and
• Generates additional hypotheses or courses of action/management to consider.

ATAP has outlined a set of “Core Competencies” (2021) and a professional “Body of Knowledge” (2011) for professionals who pursue the Certified Threat Manager (CTM) credential. Though these
documents are specific to ATAP and the CTM, they clarify professional standards and expectations in VRA and TA. The ATAP Core Competencies can be found in Table 2.

<table>
<thead>
<tr>
<th>Competency</th>
<th>Tasks/Skills</th>
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</table>
| **Information Gathering** | • Detail the initial complaint  
• Interviewing  
• Understand how legal issues relate to information gathering  
• Ability to conduct a background investigation  
• Understand how ethics relate to information gathering  
• Documentation and record keeping  
• Information sharing  
• Identify and access relevant records  
• Conduct research to inform the case  
• Possess interpersonal skills needed to access sources of information  
• Know how and when to use assessment instruments  
• Understand basic forensic evidence concepts |
| **Interpretation of Information** | • Understand ATAP's Risk Assessment Guideline Elements for Violence (RAGE-V)  
• Able to link information to behaviors and risk  
• Evaluate credibility of information |
| **Threat Assessment and Management Principles and Practices** | • Understand terminology and models  
• Apply threat management strategies  
• Use relevant tools and methodologies  
• Apply knowledge of relevant mental health risk factors and management  
• Summarize key literature in the field of Threat Assessment and Management |
| **Legal Issues** | • Employment law  
• Regulatory Law  
• Criminal Law  
• Civil Law  
• Ethics  
• Liability and Management |
| **Ethical Issues** | • Knowledge of the ATAP Code of Ethical Conduct  
• Knowledge of other relevant professional codes of conduct  
• Application of codes to practical exercises  
• Knowledge of process limitations |
### Literacy Across Disciplines

- Understand roles, responsibilities, and limitations of the major disciplines
- Understand the basic functioning of and utilization of other disciplines
- Understand the roles and capabilities within teams (i.e., list of disciplines)
- Understanding the need to make appropriate referrals (i.e., “Stay in your own lane” accountability)
- Team player skills
- Understand communications across disciplines

### Consultation and Communication

- Awareness of methods of communication while interviewing/gathering information
- Ability to communicate risk appropriately
- Report writing and documentation
- Information sharing
- Victim Management
- Managing internal communications with co-workers and collateral participant

**Note.** From ATAP-Association of Threat Assessment Professionals (May 11, 2021). *Core competencies.* Association of Threat Assessment Professionals. Available at: https://cdn.ymaws.com/www.atapworldwide.org/resource/resmgr/certification/Core_Competencies_Outline_20.pdf. Copyright 2021 by the Association of Threat Assessment Professionals. Adapted with permission.

## Case Triage

When the potential for violence emerges in a C-InT inquiry, a trained and qualified assessor or threat management team may “triage” the case to determine whether a full VRA is warranted. A **violence risk triage** involves determining whether there is a basis for concern about violence and whether there is an emergency that requires immediate intervention. Only then can a team determine what level of assessment is required and which SPJ tool(s) may be deployed in the case. Threat management teams should discuss and consider issues like:

- The subject’s history of criminal, antisocial, or violent behavior;
- Any behavior or communication that may signal violent potential or intent;
- Any grievances or hostilities toward particular persons, classes of persons, or institutions;
- Whether others in the subject’s sphere seem concerned about their potential for violence; and
- The subject’s capacity and access to means of carrying out a threat.

**Violence Risk Triage:** A screening process to compile, review, interpret, and analyze multiple data sources to determine whether there is a basis for concern about violence and whether that concern requires immediate intervention.
If this inquiry indicates significant concern, the subject might be referred to a qualified professional (internal or external to the C-InT Hub) for a comprehensive VRA. The best practice for comprehensive VRA is not only to use the general SPJ approach, but to use an SPJ tool that is appropriate to the population and specific nature of the risk-related concern.

There is a distinction between applying general structure to an assessment and using a specific SPJ tool. An investigator or team may choose to structure their approach to the triage, but unless one or more team members meet the user qualifications, they will likely not use an SPJ assessment tool at that stage. Structuring the triage approach is like using checklists in medical or safety-sensitive settings. It serves as a general prompt to ensure that the team considers the right issues. It may also help the team articulate their concern more clearly and facilitate effective documentation.

If a comprehensive VRA is required, the assessor may use an appropriate SPJ tool. However, the tool alone is not sufficient for the assessment. Tools are instruments that help someone who has the necessary knowledge, skills, and experience to perform a task. A person may possess all the tools necessary to fix a car or build a house but still be unable to perform the repair or construction. Likewise, a qualified professional—one with the requisite knowledge, skills, and experience—needs to select the right tools for the task and apply those tools properly to get the job done correctly. It is impossible to evaluate the usefulness of a tool, however, without assessing the qualifications of the user.

Selecting SPJ Tools

Assessors should consider three factors when deciding to use an SPJ tool:

- The scope and purpose of the assessment,
- The qualifications of the user, and
- The quality and characteristics of the SPJ tool.

SPJ tools are not currently available for all concerning behaviors that may fall within the scope of an organization’s C-InT program. Those that are available usually focus on a particular subject population (e.g., adults, adolescents) and/or a specific type of violent behavior (e.g., general violence, intimate partner violence [IPV], workplace violence). Therefore, it is important that assessors select the proper tool based on the purpose of the assessment. For example:

- What behaviors of concern brought the insider to the Hub’s attention?
- Why is the assessment necessary, and what will be done with its results?
- Is the assessment voluntary or mandated (if so, by whom)?
- Was the assessment ordered as part of an action to consider whether employment will be continued?
- Is the assessment being done in cooperation with a law enforcement investigation?
- Will the results be used in legal proceedings?
- Might the results be used to develop and implement a risk management/mitigation plan (if so, who will create that plan)?
Reliability and Validity of SPJ Tools

Although SPJ tools are assessment measures, they are not “tests” in the classic sense. Many classic tests use norm-referenced, standardized scoring. That type of test involves comparing the score for a given case to a distribution of scores from a larger sample. The distribution of scores is the norm. Most SPJ tools discourage that type of scoring and, as noted in Section 2: The Evolution of Violence Risk Assessment and the Emergence of Threat Assessment, recommend against using numerical scores at all. What is important, however, is whether SPJ tools are reliable and valid.

The following sub-sections are designed to acquaint you with the basic concepts of reliability and validity and to provide context for understanding the tools reviewed in Section 4: SPJ Tools for Assessing Violence Risk in Adults of this Guide. For a more thorough explanation of reliability and validity and their applications to SPJ tools, see Appendix A: Understanding Reliability and Validity in SPJ Tools.

Reliability

The best way to think about the reliability of an SPJ tool is to think of consistency. There are different ways to measure or gauge consistency and, therefore, different types of reliability. **Inter-rater reliability (IRR)** may be the most important reliability measure for SPJ tools. IRR measures the agreement (i.e., consistency) between two or more raters when they assess the same case using the same information. When the IRR of an SPJ tool is high, the different raters’ judgments about the presence or absence of specific risk and protective factors are consistent.

**Intraclass correlation coefficients (ICC) and Cohen’s Kappa** are the metrics often used to assess consistency among different raters. ICC and Cohen’s Kappa values both range from 0 to 1 and are often rated as follows (Cicchetti et al., 2006):

- < 0.4 = Slight
- 0.4-0.59 = Fair/Moderate
- 0.60-0.74 = Good
- > 0.75 = Excellent

Validity

**Validity** represents the extent to which a tool measures what it says it measures. As with reliability, there are different kinds of validity. Criterion-related validity is probably the most important type for assessing SPJ tools. **Criterion-related validity** demonstrates how well the scores/results from the SPJ tool relate to a specified outcome (e.g., violence in the community) or another measure (e.g., another risk assessment tool). The most rigorous test of criterion-related validity for SPJ tools is **predictive validity**. Predictive validity gauges how well results of the SPJ tool predict future violent behavior.
As you review research on SPJ tools, you will find that one of the most popular analytic approaches for evaluating predictive validity is a technique called receiver operating characteristic (ROC) analysis. ROC results are reported as the area under the curve (AUC). The AUC number essentially represents the likelihood that a person randomly drawn from the violent group will have a higher “score” on the tool than a person randomly drawn from the non-violent group. So, an AUC of .65 means there is about a 65% probability that a violent subject from the sample will have a higher score than a non-violent one. AUCs can range from .50, meaning that the tool can only distinguish between violent and non-violent outcomes at “chance” levels (i.e., flipping a coin), up to 1.0, meaning the tool distinguishes perfectly between the two groups. For SPJ tools, significant AUCs typically fall between the low .60s and the mid .70s. Although these numbers seem low, it is possible that “After almost five decades of developing risk prediction tools, the evidence increasingly suggests that the ceiling of predictive efficacy may have been reached with the available technology” (Yang, Wong, & Coid, 2010, p. 759).
In this section, we review six structured professional judgment (SPJ) tools commonly used in violence risk assessment (VRA) and threat assessment (TA) that may apply to Counter-Insider Threat (C-InT) programs. We review the three SPJ tools with the most significant evidence base as well as three commonly used SPJ tools that have not yet been as extensively researched but show significant promise for use in C-InT inquiries. These reviews cover the user qualifications for, as well as the quality and characteristics of, each tool. By the end of this section, you should be able to:

- Provide a general description for each of the six SPJ tools,
- Summarize information on user qualifications for each of the six SPJ tools,
- Summarize overall quality and characteristics for each of the six SPJ tools, and
- Consider how each of the six SPJ tools is relevant to C-InT cases.

Structure of SPJ Tool Reviews

Our first set of reviews emphasizes evidence-based tools⁷ or tools grounded in empirical research and validated in peer-reviewed scientific studies; they are:

Evidence-Based Tools: Tools built upon the best available empirical research and validated by peer-reviewed scientific studies

⁷ We have reviewed the most current version of the tools at the time of writing this Guide. It is essential to check with current publishers to confirm currency of materials. Because SPJ tools may change publishers, follow-up research may be required.
We also review three tools that are supported by preliminary studies but still need to undergo further validation; they are:

- Workplace Assessment of Violence Risk- 21, Version 3 (WAVR-21 V3),
- Brief Terrorism Radicalization Assessment Protocol (TRAP-18), and
- Brief Spousal Assault Form for the Evaluation of Risk, Version 3 (B-SAFER-V3).

These tools have not been as thoroughly researched as the first three but show promising potential to address issues that sometimes emerge in C-InT inquiries, such as workplace violence, radicalization, and intimate partner violence (IPV).

Each review includes the following:

- Information about the tool’s authorship and publication,
- Appropriate subject demographics,
- A description of the tool and its associated materials,
- User/assessor qualifications,
- Empirical evidence base, including a discussion of the tool’s reliability and validity,
- An overview of the value of the tool, and
- A fictitious case example to illustrate application of the tool.
Tool Review: HCR-20\textsuperscript{V3}

The Historical Clinical Risk Management-20, Version 3 (HCR-20\textsuperscript{V3}) is a 20-item structured professional judgment (SPJ) tool designed to guide professional assessments of both short- and long-term violence risk and to assist in the development of risk management strategies. The authors of the HCR-20\textsuperscript{V3} define violence as “...actual, attempted, or threatened infliction of bodily harm of another person” (Douglas et al., 2013, p. 2). They note that the tool may also be useful for assessing risk for other concerning behaviors such as stalking, kidnapping, or property damage that may cause harm to others.

Authorship and Publication

Kevin Douglas, Stephen Hart, Christopher Webster, and Henrik Belfrage authored the HCR-20\textsuperscript{V3}, and Protect International Risk and Safety Services published the tool. The first version of the Historical Clinical Risk Management-20 (HCR-20) came out in 1995, followed by Version 2 (HCR-20\textsuperscript{V2}) in 1997, and the current version, Version 3, in 2013. The HCR-20\textsuperscript{V3} is available in five languages, with other translations underway.\footnote{Go to www.hcr-20.com/translations to see a full list of available and in-progress languages.} Currently, only hard copy versions of the tool are available for purchase.

To learn more about the HCR-20\textsuperscript{V3}, its development and research support, and training opportunities, visit www.hcr-20.com and www.protect-international.com.

Appropriate Subject Demographics

The HCR-20\textsuperscript{V3} is intended for use with male and female subjects aged 18 and older. In some cases, it may be appropriate for subjects who are slightly younger (e.g., 16 or 17) if they have been living independently for some time.

Description

As with many SPJ tools, the authors selected the items in the HCR-20\textsuperscript{V3} based on systematic reviews of “...relevant scientific, clinical, and legal literature” (Douglas et al., 2013, p. 13). The items are divided into three scales:

1. **Historical Scale (H):** focused on the subject’s behavioral/psychosocial history,
2. **Clinical Scale (C):** focused on the subject’s emotional, behavioral, and cognitive functioning at the time of the assessment, and
3. **Risk Management Scale (R):** focused on anticipated contextual, environmental, and situational factors that could affect the subject’s future functioning and risk-related behavior.

Table 3 provides the list of HCR-20\textsuperscript{V3} items, divided by scale.
### Table 3
**HCR-20\textsuperscript{v3} Items**

<table>
<thead>
<tr>
<th>Category</th>
<th>Items</th>
</tr>
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</table>
| **Historical Scale (H)**        | • H1 History of Problems with Violence  
• H2 History of Problems with Other Antisocial Behavior  
• H3 History of Problems with Relationships  
• H4 History of Problems with Employment  
• H5 History of Problems with Substance Use  
• H6 History of Problems with Major Mental Disorder  
• H7 History of Problems with Personality Disorder  
• H8 History of Problems with Traumatic Experiences  
• H9 History of Problems with Violent Attitudes  
• H10 History of Problems with Treatment or Supervision Response  
• (Other Considerations) |
| **Clinical Scale (C)**          | • C1 Recent Problems with Insight  
• C2 Recent Problems with Violent Ideation or Intent  
• C3 Recent Problems with Symptoms of Major Mental Disorder  
• C4 Recent Problems with Instability  
• C5 Recent Problems with Treatment or Supervision Release  
• (Other Considerations) |
| **Risk Management Scale (R)**   | • R1 Future Problems with Professional Services and Plans  
• R2 Future Problems with Living Situation  
• R3 Future Problems with Personal Support  
• R4 Future Problems with Treatment or Supervision Response  
• R5 Future Problems with Stress or Coping  
• (Other Considerations) |

The assessor begins the process by collecting data about the subject to determine whether and which HCR-20\textsuperscript{v3} risk factors are present. For each risk factor, the assessor assigns one of four possible ratings:

1. **Yes**: Information indicates the factor is present.
2. **Possible**: Information indicates the factor is possibly or partially present.
3. **No**: Information indicates the factor is not present.
4. **Omit**: Information is insufficient or unreliable and the assessor cannot determine whether the factor is present or absent.
After determining whether each factor is present, the assessor then determines each factor’s relevance to the current case. Again, the assessor assigns one of four possible ratings:

1. **High**: Information indicates the factor is relevant and should be used to develop risk management strategies for the case.
2. **Moderate**: Information indicates the factor is possibly or partially relevant for developing risk management strategies for the case.
3. **Low**: Information indicates the factor is not relevant and should not be used to develop risk management strategies for the case.
4. **Omit**: Information is insufficient or unreliable and the assessor cannot determine whether the factor is relevant and should be used to develop risk management strategies for the case.

Next, the assessor formulates an opinion about the possible causes of and precursors to the subject’s violent behavior. This case formulation involves judgments about the most likely risk scenarios and strategies that might mitigate the subject’s risk of violent behavior.

Finally, the assessor develops and reports an evaluation of the subject’s risk for violence, typically using the following classification scheme:

1. **High/Urgent**: The subject urgently requires a risk management plan, which may include notifying staff of the risk, increasing intensity and/or frequency of monitoring, prioritizing the subject for treatment and services, scheduling regular or additional re-assessments, and implementing emergency responses (e.g., hospitalization, detention).
2. **Moderate/Elevated**: The subject requires some special management strategies, including, at a minimum, more intensive and/or frequent monitoring.
3. **Low/Routine**: The subject does not currently require special interventions or supervision strategies to manage violence risk and there is no need to monitor the subject closely for changes in status.

The HCR-20\textsuperscript{v3} Manual (Douglas et al., 2013) describes the evolution of and approaches to violence risk assessment (VRA), the tool’s development and previous versions, research on the tool’s reliability and validity,\textsuperscript{9} and instructions on how to use the tool. The Manual also includes the following sample forms:

- 12-Page Worksheet
- Two-Page Rating Sheet
- One-Page Rating Sheet

These sample forms are provided to illustrate the content and structure of the tool but must be purchased separately for use in any professional, clinical, or applied context. Each document is described below.

\textsuperscript{9} An annotated bibliography of 242 research studies examining the reliability and validity of the various iterations of the HCR-20, including 9 studies focused on Version 3, is available at [www.hcr-20.com/research](http://www.hcr-20.com/research).
The HCR-20\textsuperscript{v3} 12-Page Worksheet contains six sections to support the assessor through all steps of the process, including data collection, case formulation, case management, and treatment planning. For example, the data collection section:

- Instructs the assessor to list all sources of information considered during the assessment;
- Helps the assessor to identify relevant aspects of the subject’s family, childhood, relationship, educational, vocational, medical, mental health, substance use, and legal histories that require investigation; and
- Guides the assessor’s inquiries into the tool’s 20 violence risk items.

The 12-page Worksheet also provides structure to the assessor’s opinion of the subject’s risk of violence and helps identify scenarios likely to result in future violence, which result in a plan for treatment and intervention.

The assessor can record their ratings for each of the 20 items using the two-page Rating Sheet, as well as their judgments on the subject’s overall risk, type, and imminence of any potential violence.

The assessor can also opt to use the one-page Rating Sheet as a more concise record of their item ratings and opinions about case priority, as well as the likelihood and imminence of violent behavior. Because it is largely redundant with the more detailed two-page Rating Sheet, it is best used as an at-a-glance summary for the subject’s case file.

**User/Assessor Qualifications**

The HCR-20\textsuperscript{v3} Manual states that the tool should be used by a skilled professional or team of professionals. According to the Manual, qualified users should be:

- Knowledgeable about the professional and scientific literature on the nature, causes, and management of violent behavior;
- Experienced in interviewing and reviewing collateral data; and
- Experienced in assessing mental and substance use disorders.

In some cases, the HCR-20\textsuperscript{v3} may be used by people without specific expertise in assessing mental and substance use disorders if the assessor does one or more of the following:

- Consults with a qualified professional who possesses the relevant expertise,
- Uses results from prior evaluations by qualified clinicians to inform their item ratings,
- Avoids assessing risk factors related to mental or substance use disorders and discloses that this may limit judgments regarding the subject’s risk for violence, and
- Assesses risk factors related to mental and substance use disorders only provisionally and makes a point to have these ratings confirmed by a qualified professional.

The HCR-20\textsuperscript{v3} Manual states that the tool should be used by a skilled professional or team of professionals.
Empirical Evidence Base

The following section summarizes results from existing empirical research studies on HCR-20\textsuperscript{V3} reliability and validity.\textsuperscript{10}

Reliability
Douglas and Shaffer (2021) have summarized 17 studies in which researchers examined the inter-rater reliability of the HCR-20\textsuperscript{V3} with both civil clinical samples and forensic clinical samples, correctional samples, and workplace samples. Although the extent of agreement between raters varied across settings and samples, reliability coefficients were generally encouraging, with most reported values in the range considered by researchers to be good or substantial (Fleiss, Levin, & Paik, 1981; Landis & Koch, 1977).

Validity
Because the HCR-20\textsuperscript{V3} is one of the oldest SPJ tools, researchers have evaluated its validity extensively over the past 15 years, perhaps more so than any other SPJ tool. Studies indicate that assessors’ scores and ratings using the HCR-20\textsuperscript{V3} are similar to their scores and ratings using the HCR-20 and HCR-20\textsuperscript{V2}, which have demonstrated good predictive validity in the past (Douglas & Reeves, 2010).

In addition, research has shown that HCR-20\textsuperscript{V3} risk ratings align well with those from other risk assessment tools with well-established predictive validity (e.g., Level of Service Inventory-Revised, Andrews & Bonta, 1995; Short-Term Assessment of Risk and Treatability [START], Webster et al., 2009).\textsuperscript{11}

Finally, HCR-20\textsuperscript{V3} predictive validity research with clinical (both civil and forensic) and correctional samples suggests that the item ratings, item totals, and summary risk ratings predict future violent behavior well and may be useful to support professional judgments of risk for violence in both institutions and the community (Douglas & Shafer, 2021).

\hspace{1cm}

\textsuperscript{10} Additional technical details about the reliability and validity of the HCR-20\textsuperscript{V3} can be found in the Risk Assessment Tools Evaluation Directory (RATED) at: www.rma.scot.

\textsuperscript{11} See Douglas and Shaffer (2021) for a summary of findings related to the validity of the HCR-20\textsuperscript{V3}.
Case Example

We designed the following fictional case to demonstrate application of the HCR-20v3 SPJ tool. In this case, a supervisor contacted the C-InT Hub about an employee who had repeated outbursts and had vandalized company property. Prior to these acts, the employee had no previous work-related difficulties. Since there was a direct threat to coworkers, the assessor opted to conduct a threat assessment (TA); however, a VRA for general violence also could have been conducted. The assessor employed the HCR-20v3 to structure the assessment.

Background

Jason Peet, an unmarried, 26-year-old White male, is a warehouse operations worker for the U.S. Department of Agriculture (USDA). Mr. Peet’s work supervisor contacted the C-InT Hub for a case consultation. The Hub’s psychologist reviewed the subject’s records and discussed her concerns with Mr. Peet’s supervisor, who then contacted Human Resources (HR). HR referred Mr. Peet to a contract psychologist to assess his emotional, behavioral, and cognitive functioning as it affected his fitness for duty and risk for violence in the workplace.

Seven weeks prior to his referral, HR placed Mr. Peet, a four-year employee with no previous work-related difficulties, on administrative leave after he repeatedly threatened to end his employment, claiming his hard work was not appreciated and yelling at and arguing with coworkers and delivery drivers.

While on administrative leave, Mr. Peet returned to the workplace and vandalized warehouse property. He spray-painted nonsensical writing on the walls and threatened and brandished a pipe at two employees who confronted him. Police officers arrived and arrested Mr. Peet for trespassing, criminal mischief, and aggravated assault.

At the time of his arrest and assessment, Mr. Peet was living at his parents’ residence. He remained on administrative leave while awaiting results from the assessment that would determine his eligibility to return to work.

During the interview with the psychologist, Mr. Peet reported first experiencing psychiatric difficulties at the age of 22. During this time, he was hospitalized after experiencing symptoms such as grandiose delusions (i.e., false, fixed beliefs of exaggerated self-importance), confused thinking, auditory hallucinations (i.e., hearing voices), irritability, and a diminished need for sleep. He was admitted to Citrus Park Hospital, a psychiatric facility, for observation and treatment.

Records from Citrus Park Hospital indicate that Mr. Peet had previously been treated there for a week, about four years before his most recent incident. His treating professionals determined he was experiencing a “manic episode” and diagnosed him with bipolar disorder (formerly called manic-depressive disorder), which is characterized by extreme fluctuations in mood. At the time, the

12 While some of the facts in the example are derived from actual cases, all names are fictitious, and we have added fictional details to better illustrate the tool’s application. The case examples are not comprehensive and do not include all data sources an assessor should consider while using an SPJ tool or rendering an actual risk judgment.
doctors treated Mr. Peet with medication to stabilize his mood and help with the symptoms affecting his ability to accurately perceive reality. His adjustment and functioning gradually improved.

Mr. Peet explained that he continued taking the prescribed medications for about a year after this episode, but eventually discontinued them because he was uncomfortable with the side effects and thought he no longer needed them. Mr. Peet’s father offered a similar account of this episode and added that his son had “rebounded” well after his first episode and hospitalization.

Based on observations and self-report, the disruptive behaviors that led to Mr. Peet’s arrest were likely partial manifestations of a second manic episode. Mr. Peet reported that around the time he was placed on administrative leave, he experienced some grandiose delusions, confused thinking, and auditory hallucinations. His judgment was impaired, and he experienced angry outbursts. He was irritable and not sleeping very much.

After being released from jail on bail, Mr. Peet was treated for seven days at an inpatient psychiatric unit. He started a course of moderate mood stabilizing and anti-psychotic medications, which brought his manic symptoms under control. After discharge, he began an ongoing outpatient treatment plan that included the same medications, bi-weekly meetings with a counselor, and monthly meetings with a psychiatrist for medication management.

Notes from his most recent visits with the psychiatrist suggest Mr. Peet has shown some minor symptoms of depression (i.e., sad mood, low energy, lack of self-confidence, low self-esteem) since his release from the hospital, but has not experienced any manic symptoms. These records also indicate that Mr. Peet understands that—to keep his condition stable—he needs to continue his treatment plan and abstain from marijuana, which he had been using moderately (smoking no more than once per week) around the time of his arrest. Apart from marijuana use, Mr. Peet has no history of using or abusing alcohol or other illicit substances.

HCR-20v3 Application

Following are the results after discussions with Mr. Peet, his father, and supervisor, as well as a review of pertinent medical records. Each item is rated according to its presence and relevance.

H1 History of Problems with Violence
(Presence: Yes; Relevance: High)

Mr. Peet was recently arrested for trespassing, criminal mischief, and aggravated assault. Documents provided for review (i.e., results of a criminal background check completed when Mr. Peet applied to work for his current employer and information provided by Mr. Peet and his father during the interviews) revealed no other history of violent or threatening behavior except for the events that led to Mr. Peet’s administrative leave and eventual arrest.

H2 History of Problems with Other Antisocial Behavior
(Presence: No; Relevance: Low)

Documents provided for review revealed no history of other criminal/antisocial behavior or conduct.
Mr. Peet has never married and reports only one significant romantic relationship, which ended after two years due to his first manic episode. Mr. Peet, his father, and his work supervisor indicated that, although his interpersonal interactions suffer when he experiences manic episodes, he otherwise has no difficulty establishing and maintaining relationships with family members, friends, coworkers, and customers.

Mr. Peet had no history of employment problems before the incident that resulted in his current referral. A background check was completed when Mr. Peet was hired for his current position and reflects an unremarkable employment history. His current work supervisor described him as a good employee who had never presented any problems prior to the incident in question.

Mr. Peet acknowledged his moderate use of marijuana in the past and more recently but no abuse of alcohol or use of other illicit substances. His father corroborated that report. Mr. Peet was arrested two years ago for misdemeanor possession of marijuana. He indicated that he returned to weekly marijuana use shortly after his probation was completed. Mr. Peet said, in keeping with his physician’s recommendations, he now intends to abstain from using marijuana. He also expects to serve an extended probation term that is likely to include drug testing. Drug testing completed at the time of Mr. Peet’s jail admission indicated he was not under the influence of any illegal substances.

Mr. Peet has a well-documented history of bipolar disorder over the past four years, including two significant manic episodes and several periods of moderate depression. During only one of these manic episodes did Mr. Peet engage in aggressive, threatening, or violent behavior.

Review of records, interviews with Mr. Peet and his father, and the results of psychological testing (Minnesota Multiphasic Personality Inventory-2-Restructured Form [MMPI-2-RF]) did not suggest the presence of a personality disorder.

Review of records, interviews with Mr. Peet and his father, and the results of psychological testing (MMPI-2-RF) did not reveal the presence of any traumatic life experiences.
**H9 History of Problems with Violent Attitudes**
*(Presence: No; Relevance: Low)*

Information provided by Mr. Peet and his father, records provided for review, information relayed by Mr. Peet’s work supervisor, and results of psychological testing (MMPI-2-RF) all indicated that Mr. Peet does not hold beliefs and attitudes that support violence or consider violent actions to be generally acceptable. As Mr. Peet discussed the events that led to his arrest, he expressed embarrassment and remorse, and he repeatedly stated his desire to apologize to his employer and coworkers. Nevertheless, during the recent manic episode that led to his arrest, he did engage in threatening behavior.

**H10 History of Problems with Treatment or Supervision Response**
*(Presence: Yes; Relevance: High)*

Mr. Peet said he stopped treatment for bipolar disorder after his first manic episode because he was experiencing adverse side effects from the medication and believed, because his mental health condition had been stable for a year, that he no longer needed it. As a result of his most recent experience, however, he understands that he must continue to take psychoactive medications as prescribed. His recent records indicate that he has participated in recommended treatment and abstained from marijuana since the incident that prompted his referral.

**C1 Recent Problems with Insight**
*(Presence: Yes; Relevance: High)*

For the three years before the incident in question, Mr. Peet did not consider himself to have bipolar disorder or need psychiatric treatment to control or prevent symptoms of mental disorder. More recently, however, he has acknowledged that he does have a mental disorder that requires ongoing treatment.

**C2 Recent Problems with Violent Ideation or Intent**
*(Presence: Yes; Relevance: High)*

While experiencing a manic episode seven weeks prior to his assessment, Mr. Peet expressed violent intent, threatened coworkers, and brandished a weapon.

**C3 Recent Problems with Symptoms of Major Mental Disorder**
*(Presence: Yes; Relevance: High)*

Mr. Peet recently experienced a manic episode characterized by symptoms including grandiose delusions, confused thinking, auditory hallucinations, irritability, poorly controlled anger, threats to others, and a diminished need for sleep. More recently, he has experienced moderate symptoms of depression.

**C4 Recent Problems with Instability**
*(Presence: Yes; Relevance: High)*

While his mental state was impaired because of his manic symptoms, Mr. Peet engaged in threatening behavior toward his coworkers.
Recent Problems with Treatment or Supervision Release
(Presence: No; Relevance: Low)

Since his arrest and hospitalization, Mr. Peet has participated in necessary treatment and complied with conditions of his release to the community. Prior to his arrest, however, Mr. Peet had stopped recommended treatment.

Future Problems with Professional Services
(Presence: No; Relevance: Low)

Mr. Peet currently has in place a comprehensive treatment plan involving two mental health professionals who meet with him at least once every two to three weeks, and he intends to continue ongoing treatment without any anticipated difficulties.

Future Problems with Living Situation
(Presence: No; Relevance: Low)

Mr. Peet has been living with his parents in a stable environment. He plans to continue living with his parents, who understand his condition and support his need for ongoing mental health treatment.

Future Problems with Personal Support
(Presence: No; Relevance: Low)

Mr. Peet’s parents, who continue to advocate for him, are his primary support system. They are aware of his need for ongoing treatment and recognize the early behaviors that might indicate the onset of a manic or depressive episode.

Future Problems with Treatment or Supervision Response
(Presence: No; Relevance: Low)

Mr. Peet acknowledges and understands his need for ongoing mental health treatment, as recommended by his treatment providers. He has actively participated in treatment since his arrest. His parents, with whom he lives, also understand his ongoing need for treatment.

Future Problems with Stress or Coping
(Presence: No; Relevance: Low)

Mr. Peet’s mental health problems have consistently responded well to proper treatment. He has been regularly participating in treatment and is motivated to get better and return to work.

Opinions and Recommendations

Formulation of Violence Risk: Mr. Peet’s violent behavior is limited to a recent manic episode during which he threatened and brandished a pipe at coworkers who confronted him when he arrived at work, unannounced, after being placed on leave. Mr. Peet’s threatening behaviors were not goal-oriented; they were the product of impaired thinking and emotional instability due to a manic episode. Mr. Peet’s mental health problems have responded well to treatment in the past, and this most recent manic episode occurred while he was not (and had not been) receiving treatment.
Primary Scenarios for Violence: If Mr. Peet experiences another manic episode, he may threaten or even cause harm to others. The likelihood of another manic episode, however, is greatly reduced while Mr. Peet continues to participate in treatment and abstains from alcohol and drugs.

Develop Case Management Plans: It is recommended that Mr. Peet continue his current program of treatment. Mr. Peet and those with whom he interacts on a regular basis (e.g., his parents, his work supervisor) should be educated on, and reminded of, the early behaviors that might signal the onset of a manic or depressive episode so that it can potentially be prevented.

Future Violence/Case Prioritization: Moderate

Risk for Serious Physical Harm: Moderate

Risk for Imminent Violence: Low

Recommended Reassessment Date: Not Applicable

Case Epilogue
The disruptive and threatening behavior that prompted Mr. Peet’s referral was directly linked to a manic episode—manifestations of a mental disorder that he has had for at least the past four years. At the time of the recent incident, he was neither receiving treatment nor taking medication. He was experiencing active manic and psychotic symptoms, and his judgment was profoundly impaired. His behavior was not purposeful or goal oriented. His mental health problems have responded well to treatment in the past and did so after this episode as well. Therefore, Mr. Peet’s return to work was conditioned on his agreement to continue that treatment, which he did, and there were no further incidents during the follow-up period.
Tool Review: START

The Short-Term Assessment of Risk and Treatability (START) is a 20-item structured professional judgment (SPJ) tool designed to guide mental health professionals’ assessments of the short-term risk (i.e., approximately 3 months) for negative outcomes posed by adults with mental and substance use disorders. Unlike the other SPJ tools in this Guide, which focus only on the risk of violence to others, the START has a much broader scope. The START can be used to structure assessments and inform judgments about risk for a variety of behaviors of concern, including:

- Violent Behavior (towards others)
- Self-Harm
- Suicide
- Unauthorized Leave
- Substance Abuse
- Self-Neglect
- Victimization

The START is also intended to guide treatment planning to reduce those risks (Nicholls et al., 2021).

Authorship and Publication

Christopher Webster, Mary Lou Martin, Johan Brink, Tonia Nicholls, and Sarah Desmarais authored the START (2009), and British Columbia Mental Health and Substance Abuse Services published the tool. The first version of the START came out in 2004, followed by the second and current version in 2009. The START is available in English and has been translated into seven other languages (Danish, Dutch, Finnish, French, German, Italian, and Norwegian). Currently, only hard copy versions of the tool are available for purchase and use.

To learn more about the START, its development, and training opportunities, visit www.bcmhsus.ca.

Appropriate Subject Demographics

The START is intended for use with both male and female adults aged 18 and older. A version for use with adolescents, The Short-Term Assessment of Risk and Treatability: Adolescent Version (START: AV), is also available (Viljoen et al., 2014).
Description

The authors developed the START in response to what they considered to be four gaps in the existing violence risk assessment (VRA) tools (Nicholls et al., 2021; Webster et al., 2006). Existing tools at the time tended to:

- Focus exclusively on violent behavior directed towards others, even though people involved with the mental health and criminal justice systems tend to be at risk for a wider range of negative outcomes;
- Focus more heavily on static (historical or demographic) rather than dynamic (modifiable) risk factors;
- Provide little to no guidance on how to inform treatment planning, case monitoring, and interventions to prevent bad outcomes; and
- Focus heavily on factors that increased risk, while neglecting serious consideration of an examinee’s strengths and protective factors that might mitigate risk.

As with most SPJ tools, START items were selected based on a review of the relevant scientific and professional literature. START is unique among SPJ tools because its items are all devoted to dynamic factors.

The 20 START items (listed in Figure 5) are devoted to various subject aspects, including:

- Emotional Functioning (e.g., mental state, emotional state, coping),
- Behavioral Functioning (e.g., social skills, self-care, medication adherence, rule adherence, impulse control, substance use, conduct),
- Cognitive Functioning (e.g., attitudes, insight), and
- Situational or Contextual Factors (e.g., material resources, treatability, external triggers).

The START also allows users to identify case specific risk factors that are not included within the 20 identified items, listed in Figure 5.

Figure 5

START Items

- Social Skills
- Relationships (including client-therapist relationship)
- Occupational
- Recreational
- Self-Care
- Mental State
- Emotional State
- Substance Use
- Impulse Control
- External Triggers
- Social Support (including positive peer support)
- Material Resources
- Attitudes
- Medication Adherence
- Rule Adherence
- Conduct
- Insight
- Plans
- Coping
- Treatability
- Case Specific Items
The START directs assessors to consider the subject’s specific strengths and vulnerabilities associated with each of the 20 items. Assessors rate all START items twice (once for Strengths and once for Vulnerabilities) using three options:

- **2**: strong evidence that the item is present and relevant
- **1**: partial evidence that the item is present and relevant
- **0**: no evidence that the item is present or relevant

Assessors then identify which of the 20 START items are “Key Items” and “Critical Items” using a rating of Yes/No.

- **Key Items** are especially prominent strengths that should be mobilized in treatment planning.
- **Critical Items** are prominent vulnerabilities, or “red flags,” that should be targets of intervention in treatment planning and supervision.

Assessors use the one-page Summary Sheet to document the following information:

- Timeframe, purpose, and setting of the assessment;
- Subject’s mental health diagnoses and related conditions;
- Assessor’s ratings of the subject for the 20 START items;
- Assessor’s risk formulation, including estimates of the subject’s risk; and
- Risk management measures and plans.

**User/Assessor Qualifications**

The START should be used by “experienced clinicians” (Webster et al., 2009, p. 2), limited to social workers, psychiatrists, and psychologists. Although the authors indicate that the START can be used by a mental health professional acting independently, they stress that it “…is designed to integrate the ideas of a number of mental health specialists who work together as a team” to conduct the assessment (Webster et al., 2009, p. 24).

Although the authors indicate that the START can be used by a mental health professional acting independently, they stress that it “…is designed to integrate the ideas of a number of mental health specialists who work together as a team.”

**Empirical Evidence Base**

Although the START is one of the newer evidence-based SPJ tools for VRA, it does have a solid and growing base of empirical research studies on its reliability and validity.13

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13 Additional technical details about the reliability and validity of the START can be found in the Risk Assessment Tools Evaluation Directory (RATED) at: [www.rma.scot](http://www.rma.scot).
Reliability
Researchers have generally reported good to excellent rates of inter-rater reliability (IRR) for START items and specific risk estimates (Genenc et al., 2018; Lowder et al., 2019; Marriott et al. 2017; Nicholls et al., 2006; O’Shea et al., 2016; Troquete et al., 2015; Viljoen et al., 2011; Wilson et al., 2010; Wilson et al., 2013). Intraclass Correlation Coefficients (ICCs) for the strength and vulnerability domains have generally ranged between the mid .60s (Lowder et al., 2019; Viljoen et al., 2011) and the mid to upper .90s (Desmarais et al., 2012). For risk estimates, the ICCs typically fall in the low to mid .80s (Desmarais et al., 2012; Wilson et al., 2010).

Validity
Research examining the START’s predictive validity for a range of negative outcomes—including risk of harm to others—is promising (Braithewaite et al., 2010; Cartwright et al., 2018; Chu et al., 2017; Lowder et al., 2019; O’Shea & Dickens, 2015a; O’Shea & Dickens, 2015b; Troquete et al., 2015). Based on Receiver Operating Characteristic (ROC) analysis, a metric for a tool’s predictive accuracy, the START’s Area Under the Curve (AUC) estimates for predicting violence/aggression towards others typically range from the mid-.60s to low-.90s (Braithwaite et al., 2010; Crocker et al., 2011; Gray et al., 2011; O’Shea et al., 2016; Viljoen et al., 2011). Scores for vulnerabilities/risks have tended to be stronger predictors of violence than scores for strengths (Braithwaite et al., 2010; Gray et al., 2011; Lowder et al., 2019), indicating that risk factors are better predictors of violence than protective factors. Importantly, the START seems to predict violence/aggression in females at least as well as, and perhaps better than, in males (de Vogel et al., 2019; O’Shea & Dickens, 2015a; Viljoen et al., 2011).

Case Example
We designed the following fictional case to demonstrate application of the START tool. In this case, an employee with a history of mental health problems was referred for assessment because of a recent altercation in the workplace. The examining psychologist used the START to structure the assessment.

Background
Timothy Green is a married, 38-year-old White male who was referred for a VRA by his employer. He works as a janitor at an office building that houses the offices of several federal agencies. Mr. Green was placed on administrative leave after instigating an altercation with two Internal Revenue Service (IRS) agents as they entered the common area of the office building.

Mr. Green approached the agents (who reported never having any prior contact with him) and accused them of surveilling and harassing him, his wife, and their 4-year-old son. Two Deputy U.S. Marshals intervened and attempted to de-escalate the situation by assuring Mr. Green that the IRS employees did not know him and bore him no ill will. Mr. Green initially threatened to fight the Marshals, but ultimately (and reluctantly) ended the interaction, promising that he would be sure to defend himself and his family if the agents’ harassment continued.

14 See O’Shea and Dickens (2014) and Nicholls et al. (2021) for summaries of reliability of START tool.
After the IRS agents informed their supervisor and building administrators of the incident, Mr. Green was placed on administrative leave and referred for assessment to determine his fitness for work and whether he posed any risk to himself or others in the workplace. The psychologist conducting the assessment was asked to recommend interventions that might mitigate Mr. Green’s risk.

Once Human Resources (HR) staff told the assessor that Mr. Green had an extensive history of mental health problems, the assessor selected the START to structure the assessment. In addition to conducting interviews with Mr. Green and his wife, the assessor also gathered data from:

- John Harding, Mr. Green’s work supervisor,
- Employment/HR records,
- Lisa Hill, a licensed clinical social worker (LCSW) providing behavioral health services to Mr. Green, and
- A memorandum from the IRS agents describing their interaction with Mr. Green.

Ms. Hill and Ms. Green both reported that Mr. Green had a 7-year history of paranoia and had been diagnosed with delusional disorder, persecutory type. Mr. Green’s symptoms include pervasive suspicious thinking and ideas of reference (e.g., thinking a song on the radio is being played to harass him, believing that law enforcement vehicles or officers he encounters are surveilling him). These thoughts are accompanied by hostility in interpersonal interactions and general social withdrawal.

As is often the case with people who have delusional disorder, Mr. Green lacks any insight into the nature of his mental disorder and resulting need for treatment. Since the onset of his illness, Ms. Hill has encouraged him to undergo a trial of anti-psychotic medication. However, he has consistently refused this treatment because he believes that he does not have a mental disorder, and that the “real problem” is harassment and surveillance—including by government agencies—for reasons he cannot explain.

Ms. Green described how her husband’s mental health problems have created considerable problems for their family and caused him to lose several friendships and a higher-paying job as an accounting assistant. She said the only people Mr. Green interacts with regularly (besides her) are the members of a weekly chess club. Her leisure activities with her husband are limited to attending movies and sometimes dining out.

Approximately four years ago, Ms. Green convinced her husband to begin counseling with Ms. Hill, who has seen him under the pretense of helping him manage and cope with the stress of being harassed by others. Ms. Hill said she initially challenged some of Mr. Green’s paranoid beliefs, but she eventually stopped because his reactions suggested he would probably stop participating in treatment. Ms. Green and Ms. Hill both believe the counseling sessions provide some benefit, even though they are not addressing his underlying paranoia.

Ms. Green described herself as a housewife who cares for their 4-year-old son, who has severe autism. She described her husband as incredibly patient and understanding with their son and very emotionally connected to him. Ms. Green was concerned about the possibility of her husband losing his job because the family was wholly dependent on his employment for both income and health insurance, which supplemented some modest disability benefits for their son.
Mr. Green has never engaged in any kind of violent behavior, although he has sometimes made general, non-specific threats referencing persons he believed were harassing him and his family. He does not own any handguns or other weapons since his wife removed them after the onset of his mental disorder seven years prior.

Mr. Green’s supervisor, Jon Harding, described him as one of his most reliable and hardest-workers, and said Mr. Green’s six-year tenure as a custodian was the longest of all his employees. Mr. Harding acknowledged that Mr. Green had “some mental problems that made him really sensitive, [like] taking lots of stuff personally, and thinking people are against him,” so he assigned him to the 11:00 PM to 7:30 AM shift to minimize his contact with others. However, Mr. Green recently began working extra shifts on some days, and it was during one of these day shifts when the altercation with the IRS agents occurred.

Mr. Green was generally cooperative during the interview, although he became agitated whenever any of his beliefs about others conspiring against him were challenged. Interpersonally, he described himself as dedicated to and trusting only his wife and son. He reported no history of physical violence directed towards others and understood that such behavior could result in him being arrested and criminally charged. He also reported having no thoughts of harming others. Although he clarified that he would “act in self-defense” if he or his family were threatened, Mr. Green was unwilling to discuss what “being threatened” entailed. As the interview concluded, he expressed concern about his employment status and, like his wife, cited his family’s dependence on his income.

Mr. Green said that he preferred working evenings, which allowed him to interact with fewer people. He expressed a strong desire to keep his job and said he would even be willing to consider medication, but “only if it meant keeping the job.” Because Mr. Green believed the IRS agents from the altercation initially harassed him, he did not believe he had engaged in any problematic behavior. He stated that if he did lose his job, he would likely seek a legal remedy.

**START Application**
The START is a helpful tool to assess the short-term risk for negative outcomes posed by Mr. Green.

**Social Skills** *(Strengths: 2; Vulnerabilities: 2; Key Item: No; Critical Item: No)*

Although Mr. Green has reasonably well-developed social skills, his ability to interact with people outside of his immediate family is quite limited given his persecutory thinking.

**Relationships (including client-therapist relationship)** *(Strengths: 2; Vulnerabilities: 2; Key Item: Yes; Critical Item: No)*

Mr. Green has some strengths in the relationship domain; specifically, his therapeutic alliance with his clinical social worker, Ms. Hill; his stable, generally supportive relationship with his wife; and his deep emotional connection with his son. Ms. Hill described her therapeutic relationship with Mr. Green as “tentative” because of his lack of insight into his impairment, refusal to consider taking anti-psychotic medication, and tendency to react negatively whenever his paranoid thinking was challenged. She has adapted her therapeutic approach, however, by not challenging his paranoid beliefs and instead working with him to manage his day-to-day functioning and interactions with others. He regularly attends his sessions and accepts her supportive interventions.
Mr. Green also has some vulnerabilities in the relationship domain. He reports, and his wife affirms, that he has no social relationships. Ms. Green explained that her husband’s paranoia has made it difficult for him to seek out and maintain connections. Although she believes she and her husband have a “good relationship,” she feels unable to challenge any of his persecutory thinking without him becoming upset and distraught.

**Occupational**
*(Strengths: 2; Vulnerabilities: 2; Key Item: Yes; Critical Item: Yes)*

Despite Mr. Green’s mental health problems, he has been able to maintain stable employment for six years—longer than any of his current coworkers. His supervisor regards him as a reliable employee and a hard worker. The supervisor is aware that Mr. Green has “some mental problems that made him really sensitive, [like] taking lots of things personally, and thinking people are against him,” and has adapted Mr. Green’s work schedule accordingly by assigning him to the overnight shift to minimize his contact with others.

**Recreational**
*(Strengths: 1; Vulnerabilities: 1; Key Item: No; Critical Item: No)*

Mr. Green and his wife spend much of their time at home, caring for their 4-year-old son, who has severe autism spectrum disorder. Their recreational time together consists primarily of dining out, going to movies, and taking an annual vacation. Mr. Green does not regularly exercise, and his recreational pursuits are limited to woodworking and weekly participation in a competitive chess club at a local community center.

**Self-Care**
*(Strengths: 2; Vulnerabilities: 0; Key Item: No; Critical Item: No)*

Mr. Green demonstrates no problems, and therefore, no real vulnerabilities regarding basic self-care skills. According to START scoring criteria for this item, keeping up with basic hygiene and appropriate dress are regarded as strengths, as are maintaining regular sleep and eating patterns.

**Mental State**
*(Strengths: 2; Vulnerabilities: 2; Key Item: Yes; Critical Item: Yes)*

Mr. Green has no apparent difficulties with cognitive functioning (i.e., attention/concentration, memory, thought organization, auditory/visual hallucinations, or ability to understand and make himself understood to others). However, he has enduring and pervasive paranoid thinking, which complicates his interactions with others.

**Emotional State**
*(Strengths: 2; Vulnerabilities: 2; Key Item: No; Critical Item: No)*

Mr. Green has no apparent difficulties with depressed or unstable moods, general emotional control, or thoughts of self-harm. He is pleasant in most superficial interactions, although he is vulnerable to becoming angry and belligerent when he believes (as part of his paranoia) that others are working against him.
**Substance Use**  
*(Strengths: 2; Vulnerabilities: 0; Key Item: No; Critical Item: No)*

No interviews or records suggest a history of drug use. Mr. Green’s alcohol use is minimal and has never resulted in any type of vocational, legal, or interpersonal difficulties.

**Impulse Control**  
*(Strengths: 2; Vulnerabilities: 2; Key Item: No; Critical Item: No)*

Mr. Green’s behavior is generally well controlled, and he tolerates routine frustrations well. However, he sometimes gets into verbal altercations with others when he believes they are acting against him and his family. In those circumstances, he has sometimes offered vague, non-specific threats.

**External Triggers**  
*(Strengths: 1; Vulnerabilities: 2; Key Item: No; Critical Item: Yes)*

Mr. Green consistently meets his personal and work responsibilities and has no history of contact with the criminal justice system. His interactions with others become problematic, however, when he believes people are acting against him. He recognizes this vulnerability (though not that it is caused by a mental disorder) and attempts to minimize his interactions with others. Mr. Green does not own and expresses no interest in weapons.

**Social Support (including positive peer support)**  
*(Strengths: 1; Vulnerabilities: 2; Key Item: No; Critical Item: Yes)*

Mr. Green’s wife is his only source of social support. He has no living family members and has lost all his prior friendships due to his paranoid thinking.

**Material Resources**  
*(Strengths: 2; Vulnerabilities: 1; Key Item: Yes; Critical Item: Yes)*

Mr. Green has maintained his current employment for the past six years, which allows him to meet his and his family’s financial responsibilities. It also provides health insurance, which is critical for meeting his son’s special needs. He and his wife are concerned that this recent incident could cause him to lose his job.

**Attitudes**  
*(Strengths: 2; Vulnerabilities: 1; Key Item: No; Critical Item: No)*

The domain of attitudes refers to patterns of emotions, beliefs, values, and behaviors. Pro-criminal attitudes that justify aggression and rule-breaking, interpersonal callousness, dishonesty, and self-centeredness can increase a person’s risk for a range of negative outcomes assessed in the START. Mr. Green, however, consistently demonstrates prosocial attitudes and, absent any interference from his paranoia, is generally respectful of others.

Although Mr. Green’s general beliefs and values are not antisocial, his troublesome “attributional” patterns mix with his paranoid thinking, causing him to perceive hostility and maliciousness when none is intended, and he often becomes angry and hostile in response.
Medication Adherence
(Strengths: 0; Vulnerabilities: 2; Key Item: No; Critical Item: Yes)

Although mental health professionals have recommended anti-psychotic medication numerous times in the past, Mr. Green has resolutely refused because he does not believe he has a mental disorder that requires treatment. He has, however, recently expressed a willingness to consider medication if keeping his job depends on it.

Rule Adherence
(Strengths: 2; Vulnerabilities: 0; Key Item: Yes; Critical Item: No)

When unaffected by his paranoia, Mr. Green demonstrates no issues with following rules, regulations, and other requirements.

Conduct
(Strengths: 2; Vulnerabilities: 0; Key Item: No; Critical Item: No)

Mr. Green generally tries to follow the rules, is respectful of others’ property and, according to his work supervisor, is punctual and reliable. Coding guidelines for the Vulnerabilities related to Conduct focus almost exclusively on antisocial and intentionally harmful conduct (e.g., assault, theft, destruction of property, or malicious verbal conduct). Mr. Green does not engage in this type of problematic conduct.

Insight
(Strengths: 0; Vulnerabilities: 2; Key Item: No; Critical Item: Yes)

Mr. Green lacks any insight into his mental disorder and resulting need for treatment, and he reacts quite negatively whenever his paranoid beliefs are challenged.

Coping
(Strengths: 1; Vulnerabilities: 2; Key Item: No; Critical Item: Yes)

Mr. Green manages most obligations with little difficulty. However, he has trouble managing his emotions when he believes others are acting against him and his family.

Treatability
(Strengths: 1; Vulnerabilities: 2; Key Item: No; Critical Item: Yes)

Mr. Green is currently engaged in ongoing supportive counseling. He maintains a reasonable therapeutic alliance with his social worker. This course of treatment helps him to manage some of the most problematic aspects of his behavior but does not control the paranoid thinking that complicates his functioning and adjustment. Because Mr. Green lacks insight into his mental disorder and has refused to try medication to treat it, whether anti-psychotic medication would be effective in reducing his paranoid thinking remains unknown.

Opinions and Recommendations

Based on the information gathered using START, specific risk estimates were developed. Table 4 provides a summary of the estimates of risk for each of the START risk types.
### Table 4

*Risk Estimates for Different Types of Risk*

<table>
<thead>
<tr>
<th>Risk Type</th>
<th>History</th>
<th>Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violence</td>
<td>No</td>
<td>Moderate</td>
</tr>
<tr>
<td>Self-Harm</td>
<td>No</td>
<td>Low</td>
</tr>
<tr>
<td>Suicide</td>
<td>No</td>
<td>Low</td>
</tr>
<tr>
<td>Unauthorized Leave</td>
<td>No</td>
<td>Low</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>No</td>
<td>Low</td>
</tr>
<tr>
<td>Self-Neglect</td>
<td>No</td>
<td>Low</td>
</tr>
<tr>
<td>Being Victimized</td>
<td>No</td>
<td>Low</td>
</tr>
<tr>
<td>Case Specific</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Based on Mr. Green’s risk, the following solutions were suggested to manage and monitor his case:

- Weekly supportive counseling with his social worker,
- Trial of anti-psychotic medication as a condition of continued employment,
- Placement on a work schedule that minimizes Mr. Green’s interactions with others, and
- Maintaining a lifestyle that minimizes Mr. Green’s interactions with others.

Although Mr. Green has no history of violent behavior, his paranoid thinking increases his risk for harming others. He does not appear to be at risk for self-harm, suicide, substance abuse, or victimization. Mr. Green’s risk for harming others is affected by the frequency of his interactions with other people.

Counseling seems to have been somewhat helpful in managing his risk. Mr. Green has previously refused medication-based treatment that might mitigate symptoms that increase his risk for violent behavior. However, he recently expressed a willingness to reconsider medication if it is necessary to maintain his employment. It may be beneficial to use this opportunity to encourage Mr. Green to try a course of anti-psychotic medication to determine if it controls or mitigates his paranoia. This should be supplemented by continued counseling with Ms. Hill.
Mr. Green’s risk for violent behavior is likely to increase if his employment is terminated. He will likely perceive any termination as unjustified and unfair and as further evidence of a conspiracy against him.

**Case Epilogue**

Mr. Green’s employer discussed and agreed with him that ongoing mental health treatment, including a trial course of antipsychotic medication—as recommended by a psychiatrist—and weekly counseling sessions, would be a condition of his continued employment. His symptoms of paranoia seemed to lessen a bit while on medication, but he disliked “the way it made me feel,” so he stopped taking them consistently. He returned to work on the overnight shift and has had no problematic incidents at his workplace since then.
The Spousal Assault Risk Guide, Version 3 (SARA-V3) is a 24-item structured professional judgment (SPJ) tool used to guide the assessment and management of risk for intimate partner violence (IPV), or “...any actual, attempted, or threatened physical harm perpetrated by a man or woman against someone with whom he or she has, or has had, an intimate, sexual relationship” (Kropp & Hart, 2015, p. 1). The SARA-V3 includes an updated review of IPV risk assessment literature and addresses several concerns that users raised about earlier versions. Updates include:

- The removal of critical item ratings,
- The combination of three supervision violation factors into one,
- The refinement of violence definitions, and
- The addition of vulnerability factors (i.e., ability/motivation to engage in self-protective behaviors) to facilitate safety planning.

**Authorship and Publication**

Randall Kropp and Stephen Hart authored the SARA-V3, and Project International Risk and Safety Services published the current version of the tool. The original Spousal Assault Risk Guide (SARA) came out in 1994 (Kropp et al., 1994), followed by Version 2 (SARA-V2) in 1995 (Kropp et al., 1995); these earlier versions were published by Multi-Health Systems, Inc. (MHS). The latest version, Version 3, came out in 2015.

To learn more about the SARA-V3, its development, and training opportunities, visit [www.project-international.com](http://www.project-international.com).

**Appropriate Subject Demographics**

The SARA-V3 is intended for use with suspected or identified IPV perpetrators aged 18 and older. Because no SPJ tools currently exist for assessing IPV risk in adolescents, the SARA-V3 authors suggest that, in some cases, it might also be applicable to subjects between the ages of 15 and 18. They caution, however, that research on the use of the tool with this age group is limited (Kropp & Hart, 2015). The authors note that the SARA-V3 can be used with both male and female subjects, “regardless of sexual orientation or culture” (Kropp & Hart, 2015, p. 12).
Description

The SARA-V3 includes 24 items selected based on IPV risk assessment literature reviews. These items are distributed across three domains (see Table 5):

1. Nature of IPV Factors (N)
2. Perpetrator Risk Factors (P)
3. Victim Vulnerability Factors (V)

Table 5
*SARA-V3 Domains and Factors*

<table>
<thead>
<tr>
<th>Category</th>
<th>Items</th>
</tr>
</thead>
</table>
| **Nature of IPV Factors (N)/History Includes...** | • N1 Intimidation  
• N2 Threats  
• N3 Physical Harm  
• N4 Sexual Harm  
• N5 Severe IPV  
• N6 Chronic IPV  
• N7 Escalating IPV  
• N8 Related Supervision Violations  
• N9 Other Factors |
| **Perpetrator Risk Factors (P)/Problems With...** | • P1 Intimate Relationships  
• P2 Non-Intimate Relationships  
• P3 Employment/Finances  
• P4 Trauma/Victimization  
• P5 General Antisocial Conduct  
• P6 Major Mental Disorder  
• P7 Personality Disorder  
• P8 Substance Use  
• P9 Violent/Suicidal Ideation  
• P10 Distorted Thinking About IPV  
• P11 Other Factors |
| **Victim Vulnerability Factors (V)/Problems With...** | • V1 Barriers to Security  
• V2 Barriers to Independence  
• V3 IPV Resources  
• V4 Community Resources  
• V5 Attitudes or Behavior  
• V6 Mental Health  
• V7 Other Factors |
To begin, assessors must first identify the subjects of the violence risk assessment (VRA), including the identified or presumed perpetrator(s) and the likely target(s). In some cases, friends or family members of the primary target may be targets as well. Interviews with any targets, potential perpetrators, and third parties who know the perpetrator or target are essential when using the SARA-V3. Relevant records (e.g., criminal records, documentation of prior assaults or threats, results of any psychological evaluations of the perpetrator) also provide critical data for review.

Once relevant data are collected, the assessor determines the presence or absence of each of the tool’s 24 items/factors. The tool also includes an “Other Factors” section in each of the three domains to highlight additional information not otherwise captured. Each factor is coded twice, first to specify how recently it emerged and second to detail how it has changed over time. “Recent” refers to the year preceding the assessment, and “Past” refers to any time before the preceding year. For both periods, each factor receives a categorical rating:

- **Y**: Factor present
- **P**: Factor possible or partially present
- **N**: Factor not present
- **Omit**: Not enough reliable data available to rate the item

After determining which factors are present, the assessor determines whether each of the Perpetrator Risk Factors and the Victim Vulnerability Factors are relevant to risk and risk management planning, using the same rating system noted above.

After rating all factors, the assessor develops a case conceptualization, identifies the most likely risk scenarios, and develops a risk management plan that can include a range of responses such as monitoring, treatment, supervision, and/or victim safety planning. Finally, the assessor documents the priority the case should receive, and the risk for various types of harm and other negative outcomes (e.g., child abuse, self-injurious behavior, destruction of property), as well as future dates when the case should be reviewed.

The SARA-V3 User Manual includes a sample SARA-V3 worksheet that must be purchased from the publisher. This 12-page worksheet structures how the assessor documents:

- Data sources,
- IPV history,
- Background information on the perpetrator(s) and victim(s), and
- Ratings of the 24 SARA-V3 factors.

The worksheet also helps the assessor develop the case formulation, likely risk scenarios, case management plans, and final opinions.

In addition, the Manual includes a sample SARA-V3 rating sheet; actual rating sheets must also be purchased from the publisher. This two-page rating sheet summarizes the 24 SARA-V3 item ratings and the assessor’s final opinions. It is largely redundant with, and less detailed than, the SARA-V3 worksheet. It might best be used as an at-a-glance sheet that summarizes the presence or absence of specific factors as well as the assessor’s judgments and opinions.
User/Assessor Qualifications

The SARA-V3 Manual suggests that the tool can be used by criminal justice, victim support, security, health, and mental health professionals in settings where IPV concerns arise (Kropp & Hart, 2015). However, all qualified users should have expertise in IPV generally and in assessing perpetrators and victims of IPV, specifically. Any SARA-V3 user should know the causes of and risk factors for IPV and have expertise in assessing the various constructs the SARA-V3 factors address. Such expertise requires a combination of training, supervised experience, and individual study.

Certain SARA-V3 items require users to make judgments about whether the perpetrator has a history of severe and persistent mental illness, personality disorders, or problems with substance abuse. Only users with professional qualifications and expertise in assessing mental and substance abuse disorders should make diagnostic judgments. SARA-V3 users without the knowledge and skills necessary to form opinions on these matters should:

- Consult with a qualified professional who possesses the proper expertise,
- Rely on documented results from prior evaluations completed by qualified clinicians to inform ratings on behavioral health/disorder-related risk factors, and
- Offer only provisional opinions around these items and communicate the need to have these ratings confirmed by a qualified professional.

Empirical Evidence Base

Empirical studies examining the SARA-V3’s reliability and validity are limited. Kropp and Gibas (2021) summarized numerous studies examining the reliability and validity of the original SARA and SARA-V2. While those versions share similarities with the SARA-V3, users must also understand and consider the differences.15

Reliability
Limited data are available regarding the SARA-V3’s inter-rater reliability (IRR). Good levels of agreement between different raters, however, have been reported for the SARA and SARA-V2 (Belfrage et al., 2011; Grann & Wedin, 2002; Kropp & Hart, 2000). Ryan (2016) reported acceptable rates of IRR for the SARA-V3 when used in a sample of 97 IPV offenders.

Validity
Limited data are available regarding the SARA-V3’s predictive validity. However, the professional literature suggests the tool’s earlier versions have been helpful for structuring assessments of risk for IPV and for developing and implementing risk mitigation/management strategies (Campbell et al., 2003; Helmus & Bourgon, 2011; Vitacco et al., 2012). Several empirical studies have demonstrated the predictive validity and

utility of the original SARA and SARA-V2 (Andrés-Pueyo et al., 2008; Belfrage et al., 2011; Cairns, 2004; Gibas et al., 2008; Heckert & Gondolf, 2004; Jung & Buro, 2017; Kropp & Hart, 2000; Messing & Thaller, 2013; Olver & Jung, 2017; Williams & Houghton, 2004). Preliminary results suggest that SARA-V3’s results may be similar to those of the tool’s earlier versions. When SARA-V3 and SARA-V2 were compared in a sample of 97 IPV offenders, the results were generally consistent, with moderate to large correlations between the two (Ryan, 2016).

Case Example

We designed the following fictional case to demonstrate application of the SARA-V3 tool. In this case, an employee was recommended for assessment because of a recent incident in which he threatened to harm his spouse and himself. The examining psychologist used the SARA-V3 to structure the assessment.16

Background

David Treti is a married, 42-year-old White male employed by a small defense contracting firm. He holds a bachelor’s degree in computer science and works as a data scientist. Mr. Treti has been married to Sonia Treti for four years and has a 15-year-old stepson from this marriage.

As required by company and Department of Defense (DoD) policy, Mr. Treti reported to his supervisor and the Facility Security Officer (FSO) that he had recently been arrested and charged with making terroristic threats, trespassing, and resisting arrest without violence because of interactions he had with his wife, who is employed by the same defense contractor. In response to Mr. Treti’s report, the company placed him on administrative leave. After consulting with the Counter-Insider Threat (C-InT) Hub, the FSO referred Mr. Treti to a local forensic psychologist to assess his violence risk. The assessment was requested to inform decisions about:

- Whether Ms. Treti was at risk of being harmed by her husband (at home or in the workplace),
- What types of protective measures could be put in place to mitigate any existing risk, and
- Whether—and how—the events that led to Mr. Treti’s arrest might affect his security clearance and continued employment.

The consulting psychologist used the SARA-V3 to structure her assessment of Mr. Treti. She reviewed the arrest report, which included:

- Copies of Ms. Treti’s text message log,
- Transcripts of voicemail messages Mr. Treti left for his wife in the days prior to his arrest,
- Statements that Mr. Treti, Ms. Treti, and her 15-year-old son made to the police,
- Mr. Treti’s employment file, and
- A copy of Mr. Treti’s arrest history (indicating no prior arrests).

16 We revisit this case later in the Guide using a different SPJ tool, the Brief Spousal Assault Form for the Evaluation of Risk (B-SAFER).
She also interviewed Mr. Treti, Ms. Treti, and her son.

Information from the arrest report and interviews indicate that, on Thursday, September 1st, Ms. Treti informed her husband that she intended to divorce him. That same day, she moved with her son into an apartment she had rented in anticipation of her separation. During the ensuing three-day holiday weekend, Mr. Treti repeatedly called his wife on her mobile phone and asked her to reconsider her decision to divorce. He became increasingly angry as Ms. Treti maintained her intention to divorce and refused to meet to discuss matters.

After the first day of repeated calls from her husband, Ms. Treti stopped answering her phone. In total, she received 48 voicemail and text messages from her husband over the course of the three-day holiday weekend. The voicemail messages suggest that Mr. Treti was intoxicated at times, and he made implied and direct threats to kill his wife and himself if she did not meet with him and agree to reconcile.

Ms. Treti was reluctant to contact police, fearing it might negatively affect her and her husband’s employment. She finally did so on Labor Day evening when her husband somehow obtained her new address and showed up unannounced at her apartment. Officers dispatched to the scene described Mr. Treti as appearing “intoxicated,” and they said he had been banging on the apartment door, demanding entrance. After officers reviewed the voicemail and text messages, they charged Mr. Treti with making terroristic threats, trespassing, and resisting arrest without violence. After he was arrested and jailed, Mr. Treti was granted bail on the condition that he have no contact of any type with his wife and stepson.

**SARA-V3 Application**
The SARA-V3 is a valuable tool in this case because there is concern about IPV. The assessor opted to conduct a threat assessment (TA) because the specific concern was that Mr. Treti might harm Ms. Treti, an identified target, rather than that he might engage in violence more generally.

**Nature of IPV Factors/History**
In this section of the SARA-V3 Worksheet, the examining psychologist rated each item for recent and past presence.

**N1 Intimidation**

(*Recent: Y, Past: N*)

Mr. Treti acknowledged responsibility for the voicemail and text messages that included threats to kill himself and his wife. However, he described the events precipitating his arrest as a “one time thing” that resulted from him being “blindsided” by his wife leaving him and announcing her intention to divorce.

By the time he was interviewed, Mr. Treti had resigned himself to the pending divorce. He said he was “probably better off without her” and he repeatedly asserted that he intended to get his “fair share” of the marital assets, because he had earned considerably more than his wife during their marriage.
**N2 Threats**

*(Recent: Y, Past: N)*

Ms. Treti reported, and her son corroborated, that her husband had often hit her in the past, typically while intoxicated. They both stated, however, that Mr. Treti had only made threats, including the threat to kill his wife and himself, in the days preceding his arrest.

**N3 Physical Harm**

*(Recent: Y, Past: Y)*

According to Ms. Treti and her son, Mr. Treti had physically assaulted her between 5 and 10 times in the preceding 18 months. These assaults involved pushing Ms. Treti to the ground, grabbing her, and once slapping her. Ms. Treti said that she never needed nor sought medical care for her injuries. She did not report these incidents to the police, given concerns that it could affect her husband’s security clearance and employment.

Although he did not deny them, Mr. Treti minimized the incidents of physical assault that his wife and stepson described. He acknowledged pushing his wife to the ground “once or twice...but while drinking” and indicated that during their arguments, she would often try to prevent him from leaving a room and that he would slap or grab her in response.

Both Mr. Treti and Ms. Treti reported that Mr. Treti had never brandished any weapons, possessed no firearms, and showed no interest in weapons.

**N4 Sexual Harm**

*(Recent: N, Past: N)*

Ms. Treti reported no history of sexual abuse or mistreatment at the hands of her husband. She indicated that their sexual contact had become less frequent in the preceding two years, largely because her husband was dissatisfied with her weight gain.

**N5 Severe IPV**

*(Recent: N, Past: N)*

This factor reflects conduct by the perpetrator that causes or is likely to cause “severe physical harm,” which the tool defines as “grievous or life-threatening injury.”

According to Ms. Treti and her son, Mr. Treti had physically assaulted her between 5 and 10 times during the preceding 18 months. These assaults involved pushing her to the ground, grabbing her, and once slapping her. Ms. Treti reported that she never needed nor sought medical care for her injuries.

**N6 Chronic IPV**

*(Recent: Y, Past: Y)*

Ms. Treti and her son both reported that Mr. Treti first assaulted her approximately 18 months prior, but there was a longer-standing pattern of emotional abuse.
According to Ms. Treti and her son, throughout most of their 5-year relationship, Mr. Treti spoke to his wife using demeaning terms (e.g., “stupid,” “whore,” “fat,” “lazy”), and diminished her accomplishments and abilities (e.g., stating that her recent promotion was primarily a result of his efforts). When interviewed, Mr. Treti reluctantly acknowledged that he sometimes referred to his wife using these terms, but he indicated that it was typically in response to criticism that his wife directed at him, explaining, “she gives as good as she gets.”

**N7 Escalating IPV**

*(Recent: Y, Past: N)*

Mr. Treti’s pattern of IPV has increased during the preceding 18 months and clearly escalated in the days after his wife separated from him and announced her intention to divorce. Prior to the incident that led to his arrest, Mr. Treti had never threatened or attempted to kill himself or his wife.

**N8 IPV-Related Supervision Violations**

*(Recent: Y, Past: N)*

In the weeks since he was arrested and bonded out of jail, Mr. Treti failed once to comply with his court-imposed conditions of release. Before Ms. Treti changed her cell phone number, Mr. Treti twice sent her text messages imploring her to reconsider her decision to divorce and stating that he would “punish her financially” if she insisted on divorcing. Mr. Treti remained in the community after these communications were brought to the attention of law enforcement officials. There is no evidence of other supervision violations.

**N9 Other Factors**

*(Recent: N, Past: N)*

Not applicable.

*Perpetrator Risk Factors/Problems*

In this section of the SARA-V3 Worksheet, the examining psychologist rated each item for recent and past presence as well as its relevance to risk and risk management.

**P1 Intimate Relationships**

*(Recent: Y, Past: Y; Relevance: Y)*

According to Mr. and Ms. Treti, they met in the workplace and married after a year of dating. This is his first marriage and her second. Ms. Treti said her 5-year relationship with Mr. Treti had problems from the start. She said her husband was emotionally distant for much of their time together and unwilling to acknowledge or address problems in their relationship.

In hindsight, Ms. Treti described her relationship with her husband as being born out of her loneliness and stated that she regretted ignoring “the many red flags” she observed prior to and during her marriage.
P2 Non-Intimate Relationships
(Recent: Y, Past: Y; Relevance: Y)

Mr. Treti described himself as a “homebody” who does not regularly socialize with others. He reported having no close friends and only a few work acquaintances with whom he sometimes ate lunch or attended happy hour.

Ms. Treti confirmed that her husband had no close friends. She said he had encountered difficulties with coworkers he had socialized with because of his alcohol abuse and was less involved with them as a result. Ms. Treti corroborated Mr. Treti’s report that he was alienated from his two siblings and parents. She said the only time she had met them was the day they married at city hall.

P3 Employment/Finances
(Recent: Y, Past: Y; Relevance: Y)

Mr. Treti and Ms. Treti accrued considerable debt during their four-year marriage. They reported being three months behind on mortgage payments on the home they purchased two years prior. They also reported being unable to pay federal income taxes they owed for the prior year. A boat and motorcycle Mr. Treti purchased two years ago were recently repossessed by the lenders.

Mr. Treti reported no problems with his work performance. During his six years with his current employer, he consistently received ratings of “performs as expected” or “performs above expectations.” Nonetheless, Mr. Treti understood that his employment status was now precarious. He expressed concerns that he could lose his job because of this incident and held his wife responsible for that.

P4 Trauma/Victimization
(Recent: Y, Past: Y; Relevance: P)

Although Mr. Treti said he had never been victimized or experienced any traumatic life events, he did say that he witnessed his father routinely belittle his mother, which precipitated his parents’ divorce when he was 10 years old.

P5 General Antisocial Conduct
(Recent: Y, Past: N; Relevance: N)

Mr. Treti’s history of antisocial behavior is limited to his emotional and physical abuse of his wife and his failure to meet his financial obligations (e.g., a pending foreclosure, recent repossession of a boat and motorcycle, unpaid taxes) because of excessive spending.

P6 Major Mental Disorder
(Recent: N, Past: N; Relevance: N)

Interviews with Mr. Treti, Ms. Treti, and Ms. Treti’s son indicate that Mr. Treti has no history of major mental disorder.
P7 Personality Disorder
(Recent: N, Past: N; Relevance: N)

Interviews with Mr. Treti, Ms. Treti, and Ms. Treti’s son indicate that Mr. Treti does not have behavioral problems of sufficient breadth, severity, or duration to suggest a personality disorder.

P8 Substance Abuse
(Recent: Y, Past: Y; Relevance: Y)

Accounts offered by Ms. Treti and her son suggest Mr. Treti has an alcohol use disorder. Their reports suggest he has a longstanding pattern of regular and heavy alcohol use that increased in severity in the preceding 18 months (i.e., up to 5 or 6 ounces of liquor per night, up to 5 evenings per week). Ms. Treti indicated that her husband had sometimes missed work (i.e., calling in sick) because of his alcohol use as well.

Although Mr. Treti acknowledged drinking alcohol, he described more moderate use (i.e., 2 to 3 drinks, 2 or 3 nights per week) and denied experiencing any interpersonal, legal, or vocational problems as a result. Mr. Treti said that he has never missed work because of his alcohol use, but he acknowledged being intoxicated during some of his problematic interactions with his wife.

Mr. Treti confirmed that he was intoxicated when he threatened to kill his wife and himself, but he dismissed this as a “one time incident” in response to his wife’s stated intention to divorce. Although Mr. Treti does not intend to stop using alcohol, he has indicated that he will monitor and moderate his use to avoid intoxication. Both Ms. Treti and Mr. Treti reported he had no history using or abusing drugs or any other illicit substances.

P9 Violent/Suicidal Ideation
(Recent: Y, Past: N; Relevance: Y)

In voicemail and text messages shortly after his wife separated from him, Mr. Treti threatened to kill his wife and himself. Ms. Treti indicated that her husband had never made such threats in the past, nor had he ever engaged in such behavior. Mr. Treti reported having no thoughts of harming his wife or himself at the time of the assessment.

P10 Distorted Thinking about IPV
(Recent: Y, Past: Y; Relevance: Y)

Mr. Treti disputed or downplayed many of the accounts of IPV that his wife and stepson reported. He believes his wife bears some responsibility for his emotional and physical abuse of her, and he minimized the events that led to his recent arrest. Mr. Treti considers himself, in some ways, to be the victim in this matter. He made clear his intent to make it difficult for his wife to divorce him and to “punish her financially.”

P11 Other Factors
(Recent: N, Past: N; Relevance: N)

Not applicable.
**Victim Vulnerability Factors/Problems**

In this section of the SARA-V3 Worksheet, the examining psychologist rated each item for recent and past presence as well as its relevance to risk and risk management.

**V1 Barriers to Security**

*(Recent: Y, Past: Y; Relevance: Y)*

Ms. Treti indicated she was concerned for her safety because her husband has found her new address and she is unable to move again, although she is exploring whether she can relocate to a gated part of her apartment community. She also expressed concerns about the risk of interacting with her husband in the workplace, and she noted their offices are in the same building. In the past, Mr. Treti had access to Ms. Treti at home and at work. Ms. Treti has changed her cell phone number and personal email address since her husband’s arrest.

**V2 Barriers to Independence**

*(Recent: N, Past: Y; Relevance: Y)*

While acknowledging that she and her husband would likely default on their mortgage and lose the home they purchased two years prior, Ms. Treti was confident that she would be able to support herself and her son on her current salary.

**V3 Interpersonal Resources**

*(Recent: P, Past: P; Relevance: Y)*

Although Ms. Treti said she does not have much of a local support system, she has two sisters and two long-time friends who are strongly supportive and with whom she maintains regular contact. She said she has already discussed with all four of them her intention to divorce, and all offered their encouragement and support. Ms. Treti had yet to inform her parents of her intentions because they might encourage her to remain married due to their religious convictions.

**V4 Community Resources**

*(Recent: N, Past: N; Relevance: N)*

Ms. Treti reported that, at the suggestion of her attorney, she contacted a local domestic violence shelter in the weeks before separating from her husband. She initiated counseling there and is aware of other resources available to her.

**V5 Attitudes or Behavior**

*(Recent: N, Past: Y; Relevance: Y)*

Ms. Treti was resolute in indicating her intent to divorce and minimize any future contact with her husband. She was previously reluctant to separate from him because of her religious beliefs and because she hoped he would change his behavior. However, she says she has now concluded that her marital relationship is “unfixable and not healthy.”

Ms. Treti indicated that she had never contacted law enforcement officials in response to past abuse given her concerns that it might affect her husband’s employment. She described herself as “a survivor of domestic violence” who would no longer allow herself and her son to be abused.
Ms. Treti wishes to pursue any legal protections that would keep her husband from having contact with her. She recently changed her cell phone number and email address and intends to relocate to a gated section of her current apartment complex.

V6 Mental Health

(Recent: Y, Past: Y; Relevance: Y)

Ms. Treti estimated that she had been depressed for the preceding two years, which she attributed to her marital difficulties and concerns about her weight. She recently enrolled in counseling at a local domestic violence shelter where therapy sessions have focused on her depression and issues surrounding the domestic violence she has endured.

V7 Other Factors

(Recent: N, Past: N; Relevance: N)

Not applicable.

Opinions and Recommendations

After collecting and analyzing all relevant data and reviewing the ratings from the SARA-V3, the assessor developed a formulation of Mr. Treti’s IPV risk. That formulation was based on the presence of certain risk factors and the causal role those factors might have in increasing his risk. To develop a risk formulation, the SARA-V3 Manual specifically directs the assessor to consider motivational factors, disinhibitors, and destabilizers, and distinguishes between the latter two:

- **Disinhibitors** decrease the likelihood that perpetrators will inhibit or self-censor thoughts of violence as a potential response in a situation or decrease the perceived potential costs or negative consequences of violence.
- **Destabilizers** generally disrupt, disturb, or disorganize the decision-making process, making it difficult for perpetrators to accurately perceive and appreciate situational cues, consider alternatives, or weigh potential costs and benefits (p. 21).

**Motivators:**
- Mr. Treti wants to maintain control of his wife and avoid divorce.
- Mr. Treti wants to avoid financial problems.

**Disinhibitors:**
- Alcohol abuse
- Poorly controlled anger, especially regarding the pending divorce

**Destabilizers:**
- Existing financial problems (will likely be exacerbated with the pending divorce)
- Possible termination of employment

Based on the risk formulation, the SARA-V3 Worksheet prompts the assessor to identify the most likely risk scenarios (see Table 6) and build a case planning table (see Table 7) to help consider a range of interventions that might mitigate that risk, including monitoring, treatment, supervision, and/or victim safety planning.
<table>
<thead>
<tr>
<th>Risk Characteristic</th>
<th>Questions to Consider</th>
<th>Risk Scenario 1</th>
<th>Risk Scenario 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nature</strong></td>
<td>What kind of IPV is the person likely to commit?</td>
<td>Mr. Treti returns to using alcohol and, while intoxicated, attempts to contact and/or threaten Ms. Treti and/or himself, either at her residence or at their shared workplace.</td>
<td>Mr. Treti contacts Ms. Treti in the workplace or at her residence, seeks reconciliation, and becomes angry when Ms. Treti does not respond as he wants.</td>
</tr>
<tr>
<td></td>
<td>Who are the likely victims?</td>
<td></td>
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<tr>
<td></td>
<td>What is the likely motivation?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Severity</strong></td>
<td>What would be the psychological or physical harm to the victim?</td>
<td>Harm could range from psychological distress to Ms. Treti, to serious physical harm to Ms. Treti, her son, and Mr. Treti.</td>
<td>Harm could range from psychological distress to Ms. Treti, to serious physical harm to Ms. Treti, her son, and Mr. Treti.</td>
</tr>
<tr>
<td></td>
<td>Is it possible the IPV may escalate to serious or life-threatening physical harm?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Imminence</strong></td>
<td>How soon might the perpetrator engage in IPV?</td>
<td>The risk for harm is probably greatest now and will likely diminish over time. If Mr. Treti’s alcohol use goes unchecked or if he loses his job because of the precipitating incident, his risk will increase.</td>
<td>The risk for harm is probably greatest now and will likely diminish over time.</td>
</tr>
<tr>
<td></td>
<td>Are there any warning signs that might signal that risk is increasing or imminent?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Frequency/Duration</strong></td>
<td>How often might the IPV occur—once, a few times, many times?</td>
<td>IPV is likely to occur a limited number of times, and the risk should diminish over time. However, it could be exacerbated if Mr. Treti abuses alcohol or loses his job.</td>
<td>IPV is likely to occur a limited number of times, and the risk may diminish over time.</td>
</tr>
<tr>
<td></td>
<td>Is the risk chronic or acute?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Likelihood</strong></td>
<td>In general, how common is this type of IPV?</td>
<td>Physical or emotional abuse is not uncommon and may be expected in the future if Mr. Treti’s alcohol use goes unchecked or if he suffers significant financial problems.</td>
<td>Physical or emotional abuse is not uncommon and may be expected in the future if Mr. Treti’s alcohol use goes unchecked or if he suffers significant financial problems.</td>
</tr>
<tr>
<td></td>
<td>Based on this perpetrator’s history, how likely is it that this type of IPV will occur?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Table 7
SARA-V3 Case Planning

<table>
<thead>
<tr>
<th>Management Strategy</th>
<th>Questions to Consider</th>
<th>Risk Scenario 1</th>
<th>Risk Scenario 2&lt;sup&gt;17&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monitoring</strong></td>
<td>What is the best way to monitor warning signs that the risks posed by the perpetrator may be increasing?</td>
<td>If Mr. Treti remains in the workplace, it may be useful to alert his supervisors to behaviors and events that might reflect elevated risk.</td>
<td>If Mr. Treti remains in the workplace, it may be useful to alert his supervisors to behaviors and events that might reflect elevated risk.</td>
</tr>
<tr>
<td></td>
<td>What events, occurrences, or circumstances should trigger a reassessment of risk?</td>
<td>If Mr. Treti remains in the community and is placed on probation, any supervision violations, indications of continued alcohol abuse, or efforts to contact Ms. Treti should trigger a reassessment of risk.</td>
<td>If Mr. Treti remains in the community and is placed on probation, any supervision violations, indications of continued alcohol abuse, or efforts to contact Ms. Treti should trigger a reassessment of risk.</td>
</tr>
<tr>
<td><strong>Treatment</strong></td>
<td>What treatment or rehabilitation strategies could be implemented to manage the risks posed by the perpetrator?</td>
<td>Ideally, criminal sanctions imposed on Mr. Treti could require treatment for alcohol abuse, or such treatment might be made a requirement to return to work.</td>
<td>Ideally, criminal sanctions imposed on Mr. Treti could require treatment for alcohol abuse, or such treatment might be made a requirement to return to work.</td>
</tr>
<tr>
<td></td>
<td>Which deficits in psychosocial adjustment are high priorities for intervention?</td>
<td>Mr. Treti’s continued involvement in counseling should be encouraged, especially for his alcohol abuse and problems with anger control.</td>
<td>Mr. Treti’s continued involvement in counseling should be encouraged, especially for his alcohol abuse and problems with anger control.</td>
</tr>
<tr>
<td><strong>Supervision</strong></td>
<td>What supervision or surveillance strategies could be implemented to manage the risks posed by the perpetrator?</td>
<td>Determine if criminal sanctions imposed on Mr. Treti can involve prevention or monitoring for use of alcohol and other drugs.</td>
<td>Determine if criminal sanctions imposed on Mr. Treti can involve prevention or monitoring for use of alcohol and other drugs.</td>
</tr>
<tr>
<td></td>
<td>What restrictions on activities, movement, association, or communication should be made?</td>
<td>Efforts should be made to ensure that Mr. Treti is deterred or prevented from any kind of contact with Ms. Treti (e.g., restraining orders, work requirements).</td>
<td>Efforts should be made to ensure that Mr. Treti is deterred or prevented from any kind of contact with Ms. Treti (e.g., restraining orders, work requirements).</td>
</tr>
</tbody>
</table>

<sup>17</sup> In this instance, despite different risk scenarios, the outcomes are very similar.
### Table 7 (continued)

<table>
<thead>
<tr>
<th>Management Strategy</th>
<th>Questions to Consider</th>
<th>Risk Scenario 1</th>
<th>Risk Scenario 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Victim Safety Planning</strong></td>
<td>What could be done to enhance the security of potential victims?</td>
<td>Make efforts to ensure that Mr. Treti has no access to firearms.</td>
<td>Make efforts to ensure that Mr. Treti has no access to firearms.</td>
</tr>
<tr>
<td></td>
<td>How could the physical security or self-protective skills of potential victims be improved?</td>
<td>Arrange for Ms. Treti to work remotely or relocate to a physical workspace removed from Mr. Treti.</td>
<td>Arrange for Ms. Treti to work remotely or relocate to a physical workspace removed from Mr. Treti.</td>
</tr>
<tr>
<td></td>
<td>What could be done to better coordinate community or institutional supports?</td>
<td>Assist Ms. Treti in relocating to a more secure section of the apartment complex in which she currently resides to diminish Mr. Treti’s access to her.</td>
<td>Assist Ms. Treti in relocating to a more secure section of the apartment complex in which she currently resides to diminish Mr. Treti’s access to her.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Educate Ms. Treti about strategies to prevent Mr. Treti from learning her whereabouts.</td>
<td>Educate Ms. Treti about strategies to prevent Mr. Treti from learning her whereabouts.</td>
</tr>
</tbody>
</table>

| **Other Considerations** | What other events, occurrences, or circumstances might increase or decrease risk? | Consider the appropriateness of Mr. Treti’s continued employment. If he is terminated, or if his security clearance is revoked, carefully consider conditions under which those occur. | Consider the appropriateness of Mr. Treti’s continued employment. If he is terminated, or if his security clearance is revoked, carefully consider conditions under which those occur. |
| | What else might be done to manage risk? | | |

The final step in the Worksheet prompts the assessor to record concluding opinions about the priority the case should receive and the nature (e.g., seriousness and imminence) of any likely violence and potential risk for other types of harm and to recommend future dates when the case should be reviewed (see Table 8).
<table>
<thead>
<tr>
<th>Opinion</th>
<th>Questions to Consider</th>
<th>Coding</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case Prioritization</strong></td>
<td>What level of effort or intervention may be required to prevent further violence?</td>
<td>High</td>
<td>Multiple approaches should be employed to monitor Mr. Treti’s adjustment and functioning as he deals with the stress of his impending divorce, legal problems, and financial problems. Multiple efforts should be employed to ensure Ms. Treti’s safety as well. With the exception of not knowing whether Mr. Treti will maintain his employment, there is no known critical information that is unclear, unavailable, or missing.</td>
</tr>
<tr>
<td></td>
<td>To what extent is this opinion limited due to unclear, unavailable, or missing information?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Serious Physical Harm</strong></td>
<td>What is the risk the IPV may involve serious or life-threatening physical harm?</td>
<td>Moderate/  High</td>
<td>Mr. Treti’s risk for violence depends substantially on his use of alcohol, his access to Ms. Treti, and stressors he is experiencing at this time or may experience in the future. There is no critical information that is unclear, unavailable, or missing.</td>
</tr>
<tr>
<td></td>
<td>To what extent is this opinion limited due to unclear, unavailable, or missing information?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Imminent Violence</strong></td>
<td>What is the risk the IPV may occur in the near future (e.g., in the coming hours, days, or weeks)?</td>
<td>Moderate/ High</td>
<td>Mr. Treti’s risk for violence depends substantially on his use of alcohol, his access to Ms. Treti, and stressors he is experiencing at this time or may experience in the future. Preventive steps include ensuring that a legal order bars Mr. Treti from contact with his wife and access to weapons. Steps should be taken to ensure that Mr. Treti does not have access to his wife in the workplace or at home and to ensure that Ms. Treti has an effective safety plan in place.</td>
</tr>
<tr>
<td></td>
<td>What preventive steps were or should be taken immediately?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other Risks Indicated</strong></td>
<td>Is there evidence that the person poses other risks, such as sexual violence, suicide, or self-harm?</td>
<td>Other Risk: Potential for Mr. Treti to engage in self-harm/suicide, or to harm his stepson</td>
<td>No comment</td>
</tr>
<tr>
<td></td>
<td>Should the person be evaluated for other risks?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>Case Review Date</strong></td>
<td>When should the case be re-evaluated?</td>
<td>Two months from the date of this assessment</td>
<td>No comment</td>
</tr>
</tbody>
</table>
Case Epilogue
Just days after meeting with the psychologist, and while the results of his assessment were still pending, Mr. Treti learned his wife’s new cell phone number and “drunk dialed” her at about 2:00 AM. He told her “I really want to work this out,” and did not make any direct threats. Ms. Treti followed through in requesting an order of protection against her husband, which was granted.

When the assessment results were returned to his employer, a letter of reprimand was placed in Mr. Treti’s file and he was mandated—as a condition of employment—to take a 14-day leave of absence to complete a residential alcohol treatment program, and to follow up with weekly counseling sessions. He was advised that any further infractions would result in termination of employment and re-examination or revocation of his security clearance. Mr. Treti agreed to the conditions, completed his rehabilitation program, and continued to attend his outpatient counseling sessions. While he told his counselor that losing his family made him sad and that the divorce process was stressful, he has not attempted to contact his wife and seems to have maintained his sobriety as he awaits notice that the divorce is finalized.
Tool Review: WAVR-21 V3

The Workplace Assessment of Violence Risk-21, Version 3 (WAVR-21 V3) is a 21-item, structured professional judgment (SPJ) tool for assessing risk for violence in the workplace and higher education institutions (i.e., technical schools, colleges, universities). It also provides guidance for managing and responding to identified risks. Hard copy, software, and app versions of the WAVR-21 V3 are available for purchase and use.

Authorship and Publication


To learn more about the WAVR-21 V3, its development, and training opportunities, visit www.wavr21.com.

Appropriate Subject Demographics

The WAVR-21 V3 does not specify the age range or characteristics of an appropriate subject for assessment; however, the tool is considered appropriate for use with both male and female subjects aged 18 and older in educational and employment settings.

Description

On the WAVR-21 website, the authors of the WAVR-21 V3 describe it as a tool that guides and structures judgments about the risk for targeted violence, or “…situations in which an individual intentionally commits an act of violence against a pre-selected target, whether people or places” (White & Meloy, 2007). The WAVR-21 V3 can also be used in any workplace or post-secondary educational setting where violence concerns exist, even if a specific target has not been identified (Kienlen, Undated).
The WAVR-21 V3 items are grouped into four conceptual categories. These categories do not comprise “scales” within the tool, nor are the items labeled or clustered that way on the WAVR-21 V3 Worksheet:

- **Violence Factors:** history of, motivation for, planning/preparation, implied or stated intent, preoccupation with, or means of carrying out violence;
- **Psychological Factors:** entitlement, substance abuse, mood problems, social isolation, suicidal ideation, anger problems, impaired/irrational/suspicious thinking, lack of conscience;
- **Situational Factors:** extreme work or school attachment; and
- **Protective factors:** stabilizers and buffers against violence.

Figure 6 provides a list of WAVR-21 V3 items.

**Figure 6**

**WAVR-21 V3 Items**

- Motives for Violence
- Homicidal Ideas, Violent Preoccupations or Identifications
- Threatening Communications or Expressed Intent
- Weapons Skill and/or Access
- Pre-Attack Planning and Preparation
- Stalking or Menacing Behavior
- Current Job or Academic Problems
- Extreme Job or Academic Attachment
- Loss, Personal Stressors, and Negative Coping
- Entitlement and Other Negative Traits
- Lack of Conscience and Irresponsibility
- Anger Problems
- Suicidality and/or Depressive Mood
- Irrationally Suspicious or Bizarre Beliefs
- Substance Abuse and/or Dependence
- Increasing Isolation
- History of Violence, Criminality, and/or Conflict
- Domestic/Intimate Partner Violence (IPV)
- Situational and Organizational Contributors to Violence
- Stabilizers and Buffers Against Violence
- Organizational Impact of Real or Perceived Threats
As with most SPJ tools, WAVR-21 V3 items are not scored. Instead, each of the 21 items is rated as Absent, Present, or Prominent. Items are weighted differently in different cases, and the meaning and significance of any item can vary based on context. According to its authors, “The proper use of the WAVR-21 V3 is to help... weigh and integrate the evidence” to better understand “the subject, his or her behavior, intentions and motives, and to what extent the evidence suggests a risk of harm - to whom, of what nature and severity, and in what time frame” (White & Meloy, 2016, p. 15).

Four key documents are included with the WAVR-21 V3:

- WAVR-21 V3 Intake and Documentation Questionnaire,
- WAVR-21 V3 Worksheet, and
- WAVR-21 V3 Grid.

Each document is described below.

The *Manual for the Workplace Assessment of Violence Risk, Third Edition* (White & Meloy, 2016) provides some background on the SPJ tool, including:

- A review of literature regarding workplace and campus violence;
- The history, development, and correct use of the WAVR-21 V3;
- Examples of the forms needed to use the tool (i.e., Intake and Document Questionnaire, Worksheet, and Grid); and
- Sample case studies showing the potential uses of the tool.

The Intake and Documentation Questionnaire is a guide for gathering and organizing important data during a violence risk assessment (VRA). This includes:

- The subject’s demographics,
- The circumstances that led to the assessment, and
- Other relevant information on the subject and their situation.

Once this information is gathered, the subject’s risk for violence can be evaluated using the WAVR-21 V3 Worksheet or WAVR-21 V3 Grid, both of which contain:

- The WAVR-21 V3 items;
- Language to help integrate data and item ratings;
- Language to guide judgments about the likely nature, frequency, severity, and target of potential violence; and
- Actions or events that may decrease/increase the risk for violence.

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18 Although in-text citations are included throughout the WAVR-21 V3 manual, the full references are not provided. They can, however, be found at [www.wavr21.com](http://www.wavr21.com).
Previous versions of the Manual included a WAVR-21 Short Form, but this is no longer the case. This does not mean that the form is no longer helpful. Additional WAVR-21 V3 forms can be purchased separately, if desired.

**User/Assessor Qualifications**

Use of the WAVR-21 V3 is not limited to clinicians or mental health professionals. The tool can also be used by security professionals, law enforcement professionals, and multidisciplinary TA teams. The authors suggest that, before using the tool, users undergo training, and they warn that “...all users should remain mindful of working within their level of expertise and having more experienced team members or professionals available to them as consultants” (White & Meloy, 2016, p. 9). The authors offer a variety of online and in-person training opportunities, most of which last around eight hours.

**Empirical Evidence Base**

Compared to the other tools described in this section, research into WAVR-21’s reliability and validity is limited. However, we include a description of the tool’s current edition (WAVR-21 V3) and its uses because of the importance of VRA in the workplace, the absence of other validated tools for use in similar settings, and the tool’s grounding in theory and research on workplace violence.

**Reliability**

There are only two published studies on the reliability of WAVR-21. Meloy, White, and Hart, (2013) examined the inter-rater reliability (IRR) of the original WAVR-21. The 11 participants from a range of disciplines varied significantly in how consistently they coded some WAVR-21 items (e.g., isolation, substance abuse, paranoia, and psychotic symptoms), raising some questions about how well some of the 21 items have been defined and applied. Because participants’ ratings on the cases varied significantly from rater to rater, at least some of the WAVR-21 items appear to need refinement. In contrast, participants’ overall risk judgments (e.g., judgments on subjects’ risk for violence or the seriousness of a predicted violent act) were more promising.

Scalora et al. (2020) reported similar findings in their study with three graduate student raters. All three participants were somewhat familiar with VRA and were trained in use of the WAVR-21 V3 and the two other tools being investigated. Participants rated 40 cases using the three VRA tools. When using the WAVR-21 V3, the participants showed substantial agreement when placing the cases in three broad risk categories (low, moderate, and high), producing good Intraclass Correlation Coefficients (ICC).

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19 Additional technical details about the reliability and validity of the WAVR-21 V3 can be found in the Risk Assessment Tools Evaluation Directory (RATED) at: [www.rma.scot](http://www.rma.scot)
Validity
Qualitative reviews of the WAVR-21 are mostly positive, but research into the validity of the WAVR-21 is very limited. In the graduate student study described above, Scalora et al. (2020) also examined the predictive/postdictive validity of the WAVR-21 V3, the HCR-20 V3 (Douglas et al., 2013), and the Cawood Assessment Grid (CAG; Cawood et al., 2020). The WAVR-21 V3’s ability to distinguish between various levels of violence risk was acceptable (Receiver Operating Characteristic [ROC] Area Under the Curve [AUC] = .74) In this study, the mean summary risk rating scores were significantly correlated with acts of physical violence ($r = .35, p < .001$). The summary risk ratings for all three tools were strongly correlated, which suggests concurrent validity. However, participants rated all cases using each tool, so ratings on one tool could easily have affected ratings on another (Cawood et al., 2020).

Case Example
We designed the following fictional case to demonstrate application of the WAVR-21 V3 tool. In this case, an otherwise high-performing employee was recommended for assessment because of a recent pattern of stalking. The examining psychologist used the WAVR-21 V3 to structure the assessment.

In this case, an otherwise high-performing employee was recommended for assessment because of a recent pattern of stalking. The examining psychologist used the WAVR-21 V3 to structure the assessment.

Background
Jack Austin, a 35-year-old investment trust executive, was referred by his employer to a psychologist to evaluate his risk of targeted violence. The referral was made because of what the employer described as, “a six-month pattern of stalking behavior of increasing concern in and outside of the workplace.” Mr. Austin had allegedly engaged in these behaviors after a female coworker, Patty Pearson, ended their two-year long romantic relationship.

Ms. Pearson repeatedly asked that Mr. Austin not contact her. Yet, in the six months since she ended their relationship, Mr. Austin made multiple attempts to reach out to her, both in and outside of the workplace. Behaviors Mr. Austin engaged in that caused Ms. Pearson concern included:

- Leaving several phone, email, and text messages expressing interest in rekindling their relationship;
- Showing up unannounced at places where he knew she could be located (e.g., her gym and her son’s soccer games);
- Leaving notes on Ms. Pearson’s desk, car, and the door of her residence professing his love for her; and
- Sending flowers and other gifts to Ms. Pearson’s home and office.

Ms. Pearson consistently discouraged these behaviors and said that she never returned the messages. She changed her cell phone and home phone numbers, as well as her personal email address. She discarded flowers and gifts that Mr. Austin sent or left for her.
After three months, Ms. Pearson went to Human Resources (HR) and expressed concern for her safety in the workplace. HR then met with and told Mr. Austin to have no further contact with Ms. Pearson. Mr. Austin’s behavior continued unabated. A referral was finally made after Ms. Pearson reported that over the weekend, her teenage son had seen Mr. Austin in the backyard of their home at 8:00 PM. When Ms. Pearson confronted him, Mr. Austin apologized, said that he came by to see her because he missed her, and promised he would leave her alone.

Ms. Pearson also shared that she suspected Mr. Austin had entered her residence without her knowledge or permission on one or more occasions because some things in her home appeared moved or rearranged. When asked how this might have happened, Ms. Pearson explained that Mr. Austin could have made a copy of his key to her house before returning it to her when she ended their relationship.

After this incident, Mr. Austin was placed on administrative leave and had to undergo an assessment that addressed the risk of harm he posed to Ms. Pearson and others in the workplace. HR personnel described Mr. Austin as a high-performing employee who had been with the company since its start and whose performance had never posed any concerns until this matter. The examining psychologist employed the WAVR-21 V3 to structure the assessment of Mr. Austin.

**WAVR-21 V3 Application**

The WAVR-21 V3 is a valuable SPJ tool in this case because there is a concern about violence—including violence in the workplace—even though there is not a specific threat. Below are the results. Note the ratings for each of the 21 items. Each item is rated as absent, present, or prominent. Any change in the rating of each item since the last assessment is also shown. Because this is the first WAVR-21 V3 assessment of Mr. Austin, all items are rated as “no change.”

**Motives for Violence**

*(Rating: ABSENT, no change)*

Mr. Austin reported no thoughts about harming Ms. Pearson, and no motivation to do so. When asked if he might turn to violence if his employment were negatively affected by the assessment, Mr. Austin replied that he did not think that would happen. He added that if his employment were affected, he would seek a solution through legal channels.

Mr. Austin reported no history of violent or aggressive behavior, and he described violence as only acceptable as a “last resort,” offering “self-defense” as an example. Mr. Austin added that, even though his attempts at reconciliation had been unsuccessful, he would never think of harming Ms. Pearson. He cited the many aspects of his life that would be at risk if he did so, including his career and personal relationships.

Ms. Pearson affirmed that Mr. Austin had never threatened to harm her or engaged in any physically aggressive or intimidating behavior during or after their relationship. She also said that she was unaware of any history of violence on Mr. Austin’s part. She acknowledged that he had meaningful relationships with his children, parents, siblings, and friends. Ms. Pearson did express concerns for
her and her son’s safety, given Mr. Austin’s failure to respond to the “no-contact” messages she had sent him, and his failure to comply with their employer’s direction that he have no contact with her.

**Homicidal Fantasies, Violent Preoccupations or Identifications**  
(Rating: ABSENT, no change)

Mr. Austin reported no fantasies of homicide or other violence. There was also no evidence of such from Ms. Pearson’s reports. Nothing Mr. Austin relayed reflected preoccupation with violence, nor did any information provided by Ms. Pearson.

**Threatening Communications or Expressed Intent**  
(Rating: ABSENT, no change)

Ms. Pearson confirmed Mr. Austin’s report that he had never communicated any threats to harm her, either direct, implied, or conditional.

**Weapons Skill and/or Access**  
(Rating: ABSENT, no change)

Ms. Pearson confirmed Mr. Austin’s report that he had no interest in, experience with, or access to weapons beyond those readily available to everyone.

**Pre-Attack Planning and Preparation**  
(Rating: ABSENT, no change)

There was no evidence that Mr. Austin was planning or preparing for an attack. Mr. Austin denied entering Ms. Pearson’s home without her knowledge since ending their relationship. He attributed his recent presence in her backyard to “bad judgment” due to him missing her and wanting to know how she was doing.

**Stalking or Menacing Behavior**  
(Rating: PROMINENT, no change)

In the six months before the assessment, Mr. Austin engaged in a variety of stalking behaviors that included repeated unwanted contact and efforts to monitor and contact Ms. Pearson. He denied, however, having a key to her residence or entering without her knowledge since their relationship ended.

**Current Job Problems**  
(Rating: PRESENT, no change)

HR personnel described Mr. Austin as a high-performing vice president who had been with the company since its start. His performance had never posed any concerns until this matter.

**Extreme Job Attachment**  
(Rating: PRESENT, no change)

Mr. Austin described himself as incredibly invested in and dedicated to his job, which earned him an annual salary of around $700,000. He clearly derived much of his identity from his work, twice
referring to “the company he helped build.” Mr. Austin understood that he could lose his job and expressed concerns about the financial implications this could have for him and his children. He also said that he would likely take legal action against his employer if he were fired because of this incident.

**Loss, Personal Stressors, and Negative Coping**  
*(Rating: PRESENT, no change)*

Other than the dissolution of his relationship with Ms. Pearson, Mr. Austin reported no recent personal, legal, or financial stressors. He did acknowledge being concerned about the possibility of losing his job and the difficulty of finding another position that provided comparable compensation, however.

Mr. Austin described himself as someone who generally copes well with stressors and provided examples such as how he responded to his divorce five years ago and the death of his older brother to cancer three years prior. Mr. Austin said he considered the end of his relationship with Ms. Pearson one of the most challenging things he had faced as an adult. His ongoing difficulties around this issue reflect some negative coping on his part.

**Entitlement and Other Negative Traits**  
*(Rating: PRESENT, no change)*

Mr. Austin’s repeated efforts to contact Ms. Pearson and rekindle their relationship despite her repeated requests that he stop doing so reflect poor judgment and a sense of entitlement.

**Lack of Conscience and Irresponsibility**  
*(Rating: ABSENT, no change)*

Except for the events that led to his assessment, accounts offered by Mr. Austin and confirmed by Ms. Pearson reflect no history of irresponsible behavior in personal, family, or vocational contexts. There are also no indications in Mr. Austin’s employment record of such problems in the workplace. Mr. Austin does not seem to lack conscience or remorse, but his repeated attempts to contact Ms. Pearson when she does not want him to reflect a failure to appreciate, consider, and respond to her concerns.

**Anger Problems**  
*(Rating: ABSENT, no change)*

Mr. Austin’s report that he has never had difficulty managing his anger was confirmed by Ms. Pearson, and there are no indications in Mr. Austin’s employment record of such problems in the workplace.

**Suicidality and/or Depressive Mood**  
*(Rating: PRESENT, no change)*

Mr. Austin described himself as “depressed” since his relationship with Ms. Pearson ended and cited symptoms such as dysphoria, diminished appetite, lethargy, sleep difficulties, and impaired

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**Dysphoria:** A psychological state of discomfort, unease, unhappiness, or dissatisfaction that may accompany mental health conditions such as depression.
concentration. Mr. Austin described himself as a “physical fitness freak” and acknowledged that
his regular athletic routine had suffered in the previous months, which he partially attributed to his
mood. He indicated, however, that he continued to maintain contact with his children and other
family members.

Mr. Austin described undergoing a brief trial (nine weeks) on a moderate dose of anti-depressants
prescribed by his primary care physician, which he stopped taking because he observed no positive
effects. Mr. Austin also described his six sessions with an Employee Assistance Program (EAP)
counselor as somewhat helpful. Mr. Austin reported that the focus of these sessions was his failed
relationship with Ms. Pearson and that he only stopped attending because they were capped at
six. A review of EAP records confirmed this. Mr. Austin expressed an interest in re-involvement in
counseling.

*Irrationally Suspicious or Bizarre Beliefs*
(Rating: ABSENT, no change)

Although he described her as his “soulmate,” Mr. Austin demonstrated no suspicious or bizarre
beliefs regarding his relationship with Ms. Pearson. He described being placed on administrative
leave and having to undergo assessment as “overkill,” but did not express any other concern about
his employer’s response to the issue. Finally, reports by Ms. Pearson and EAP records provided no
evidence that Mr. Austin had held any suspicious or irrational beliefs recently or in the past.

*Substance Abuse and/or Dependence*
(Rating: ABSENT, no change)

Ms. Pearson confirmed Mr. Austin’s report that he did not use alcohol or drugs. This was due to his
focus on healthy living and highly athletic lifestyle, which included participation in individual and
team sports.

*Increasing Isolation*
(Rating: ABSENT, no change)

Mr. Austin’s report that he remained involved in work and with family members and friends, and
accounts from his employer that he continued to meet work responsibilities, reflected no isolation.

*History of Violence, Criminality, and/or Conflict*
(Rating: ABSENT, no change)

Mr. Austin reported no history of violent or criminal behavior, a background investigation completed
at the time he was hired revealed no such history, and Ms. Pearson reported no knowledge of such.

*Domestic/Intimate Partner Violence*
(Rating: ABSENT, no change)

Except for the conduct that led to the assessment—all of which he acknowledged—Mr. Austin
reported no history of controlling, harassing, manipulative, or violent behavior in any romantic
relationship. Ms. Pearson confirmed Mr. Austin’s report that he had never threatened to harm her
or engaged in any physically aggressive or intimidating behavior during their relationship. She also
reported that she was unaware of Mr. Austin ever having engaged in violent behavior.
Situational and Organizational Contributors to Violence
(Rating: ABSENT, no change)

No situational or organizational contributors to potential violence were identified.

Stabilizers and Buffers Against Violence
(Rating: PRESENT, no change)

Stabilizers and buffers against violence include Mr. Austin’s successful career, his social identity as a father and successful employee, and a well-developed support system (including family members and friends). In addition, he has a lifetime history of respecting rules and boundaries, enjoys his freedoms, and has coped well with personal loss in the past. He has also sought and appropriately utilized mental health counseling (e.g., EAP) on his own.

Organizational Impact of Real or Perceived Threats
(Rating: ABSENT, no change)

Known disruptions in the workplace included Ms. Pearson’s report that she was working less efficiently given her concern that Mr. Austin would make continued efforts to have contact with her, and re-locating—at her request—her assigned office and parking space.

Ms. Pearson and Mr. Austin both indicated that fellow employees were aware of their past relationship. However, neither believed that fellow employees were aware of the recent incidents that led to the assessment. HR staff reported that the interactions between Mr. Austin and Ms. Pearson had a minimal impact on the workplace and other employees.

Opinions and Recommendations

Level of Concern: The referral asked for an assessment of Mr. Austin’s risk for serious violence targeted at Ms. Pearson and/or others in the workplace. Accordingly, the primary level of concern is focused specifically on that “serious violence” outcome.

Low Level of Concern — Likely Low Risk

What is the likelihood that the subject will act violently towards any members of the organization if no efforts are made to manage the risk?

At this time, Mr. Austin is at low risk for engaging in serious violent behavior directed towards Ms. Pearson, others in the workplace, and others in the community, regardless of whether efforts are made to manage the risk. There is, therefore, a low level of concern given that there is a low risk of serious violence.

What is the probable nature, frequency, and severity of any future violence?

If they occurred, violent behaviors would most likely be non-lethal and limited in scope given Mr. Austin’s lack of any violence history, threats or stated intent, and ready access to weapons; his pathologic attachment to his employer or his job; and the identity Mr. Austin has independent of his employment.
Who are the likely targets of any possible violence?

Ms. Pearson is the most likely target of any violence that might be engaged in and, if negative actions are taken against Mr. Austin’s employment, those he sees as responsible for that action and possibly others in the workplace.

What steps could be taken to manage the subject’s risk for violence?

Mr. Austin described previous counseling around this issue as helpful and expressed an interest in continuing, which should be facilitated. If Mr. Austin’s employment is terminated, the risk for violence could be mitigated by a severance plan that includes incentives for appropriate behavior—particularly allowing Mr. Austin continued access to counseling services.

What circumstance might exacerbate the subject’s risk for violence?

Mr. Austin’s risk for directing violent or aggressive behavior towards Ms. Pearson and others in the workplace could increase if negative actions are taken against his employment, particularly if he is terminated. In that case, the most likely targets would be Ms. Pearson and any employees Mr. Austin believed were responsible for the actions against him. However, this increased risk is mitigated by several factors, including:

- Lack of a violence history or stated intent to engage in violent behavior,
- Well-developed support system,
- Identity in and investment as a father, and
- Stated intention to litigate any negative outcomes, rather than act out otherwise.

Recommendations to management, additional comments or issues:

If Mr. Austin remains in the workplace, the employer should make it clear that any continued unwanted behavior he directs towards Ms. Pearson, either in or out of the workplace, could result in his immediate termination. The employer should also consider encouraging or requiring Mr. Austin’s participation in counseling that focuses on these issues, which he expressed an interest in receiving (see risk mitigation opinions above).

Case Epilogue

After receiving a report summarizing the assessment, the employer decided to terminate Mr. Austin’s employment. They offered him a severance package, which Mr. Austin refused. Mr. Austin filed a lawsuit against his employer, alleging wrongful discharge, although it was ultimately unsuccessful. Mr. Austin had no further contact with Ms. Pearson after his employment was terminated. This case was resolved without escalation of violence. However, in many cases termination does not solve the threat. In fact, in some cases termination may exacerbate the threat and makes the situation worse.

After receiving a report summarizing the assessment, the employer decided to terminate Mr. Austin’s employment.
**Tool Review: TRAP-18**

The Terrorism Radicalization Assessment Protocol (TRAP-18) is an 18-item, structured professional judgment (SPJ) tool designed to guide professional assessments of “subjects who may be at risk for lone actor terrorism, regardless of ideology or beliefs” (Meloy, 2017, p.7). The TRAP-18 Manual describes *terrorism* as intended and purposeful “acts of targeted violence,” usually driven by religious or political ideology, with a specific “audience” in mind (p. 4).

The TRAP-18 is intended to guide assessors’ collection and consideration of relevant data and structure their judgments about:

- The risk that a subject may engage in an act or acts of lone actor terrorism,
- The tactics the subject is likely to employ,
- Intended and likely targets,
- Steps that may be taken to prevent the subject from acting successfully, and
- Actions or events that may increase or decrease the likelihood of the subject engaging in acts of terrorism.

**Authorship and Publication**

Reid Meloy authored the TRAP-18, and Multi-Health Systems (MHS) published the tool in 2017.

To learn more about the TRAP-18, its development, and training opportunities, visit [https://gfrinc.com/trap-18-manual/](https://gfrinc.com/trap-18-manual/).

**Appropriate Subject Demographics**

The TRAP-18 Manual does not specify the age range of its subjects. However, the publisher’s website lists the TRAP-18 as appropriate for use with both male and female subjects aged 18 and older ([www.storefront.mhs.com](http://www.storefront.mhs.com)).

**Description**

Reid Meloy developed the TRAP-18 because he believed tools designed to structure and inform judgments regarding risk for more general types of violence were limited in cases of potential lone actor terrorism. He noted that general violence risk assessment (VRA) tools tend to emphasize a subject’s history of violent behavior, and they tend not to distinguish between *emotional/reactive/impulsive violence* and *instrumental violence*, including acts of terrorism (Meloy, 2017).
Meloy (2017) selected the TRAP-18 items/variables based on his review of research and theory examining lone actor terrorists, and his experience assessing foreign and domestic lone actor terrorists. These items fall into two broad categories, which we describe in detail below:

- **Proximal Warning Behaviors** Associated with Risk for Targeted Violence, and
- **Distal Characteristics** of Lone Actor Terrorists.

An assessor using the TRAP-18 codes Proximal Warning Behaviors before Distal Characteristics because Proximal Warning Behaviors occur closer to the time of targeted violence. Table 9 lists TRAP-18 items from the first category: Proximal Warning Behaviors Associated with Risk for Targeted Violence.

**Table 9**

*TRAP-18 Items: Proximal Warning Signs Associated with Risk for Targeted Violence*

<table>
<thead>
<tr>
<th>Proximal Warning Behavior</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pathway</strong></td>
<td>Research, planning, preparation for, or implementation of an attack</td>
</tr>
<tr>
<td><strong>Fixation</strong></td>
<td>Increasingly problematic preoccupation with a person or a cause, accompanied by a deterioration in one’s social or occupational functioning</td>
</tr>
<tr>
<td><strong>Identification</strong></td>
<td>A desire to be a “pseudocommando” and/or presence of a “warrior mentality”; association with weapons or other military or law enforcement paraphernalia; identification with previous attackers or assassins; developing an identity as someone devoted to advancing a particular cause or belief system</td>
</tr>
<tr>
<td><strong>Novel Aggression</strong></td>
<td>An act of violence that is carried out to test the subject’s ability to carry out targeted violence, which may appear unrelated to the intended target of violence</td>
</tr>
<tr>
<td><strong>Energy Burst</strong></td>
<td>An increase in the frequency or variety of any activities related to the target, typically in the weeks, days, or hours before the attack</td>
</tr>
<tr>
<td><strong>Leakage</strong></td>
<td>Direct or social media communication to a third party of an intent to harm the target</td>
</tr>
<tr>
<td><strong>Last Resort</strong></td>
<td>Indications of a “violent action imperative” or “time imperative” that may reflect desperation or distress and the subject’s belief that they must act immediately</td>
</tr>
<tr>
<td><strong>Directly Communicated Threat</strong></td>
<td>The communication of a direct threat through any means to the target or authorities</td>
</tr>
</tbody>
</table>
Table 10 lists TRAP-18 items from the second category: Distal Characteristics of Lone Actor Terrorists.

<table>
<thead>
<tr>
<th>Distal Characteristic</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Grievance and Moral Outrage</td>
<td>The blending of the subject’s life experience and relevant historical, religious, or political events; a personal grievance that can include loss of relationships or employment, feelings of anger and humiliation, and the blaming of others; moral outrage typically accompanied by identification with a group that has suffered, with or without the subject having experienced such suffering</td>
</tr>
<tr>
<td>Framed by an Ideology</td>
<td>Holding religious, political, or other beliefs that justify the subject’s intent to act violently</td>
</tr>
<tr>
<td>Failure to Affiliat with an Extremist or Other Group</td>
<td>Rejecting, or having been rejected by, a radical, extremist, or other group with which the subject initially wished to affiliate</td>
</tr>
<tr>
<td>Dependence on the Virtual Community</td>
<td>Having used virtual communication (e.g., social media, chat rooms, emails, listservs) to gain reinforcement of beliefs or facilitate attack preparation and capacity</td>
</tr>
<tr>
<td>Thwarting of Occupational Goals</td>
<td>Having experienced a major setback or failure in one’s educational or vocational history</td>
</tr>
<tr>
<td>Changes in Thinking and Emotion</td>
<td>An increase in the stridency and rigidity of one’s beliefs, abandonment of critical thinking, attempts to proselytize others, and a disdain for and rejection of those who do not share the same perspective</td>
</tr>
<tr>
<td>Failure of Sexually Intimate Pair Bonding</td>
<td>A history of failing to establish a sexually intimate relationship, which may be accompanied by use of prostitutes or pornography, sexualization of violence or weapons, or beliefs that carrying out violence will bring some sort of sexual reward</td>
</tr>
<tr>
<td>Mental Disorder</td>
<td>Present or past major mental disorder(s) that may relate, in part, to the subject’s ideology</td>
</tr>
<tr>
<td>Creativity and Innovation</td>
<td>Creative and innovative thinking about how to carry out targeted violence</td>
</tr>
<tr>
<td>Criminal Violence</td>
<td>History of using violence for instrumental purposes</td>
</tr>
</tbody>
</table>
As with most SPJ tools, the TRAP-18 items are not scored, and there are no “norms” or normative reference data for the TRAP-18. Instead, each of the items is rated Absent, Present, or Unknown. Items may be weighted differently, and the meaning and significance of items can vary based on context. When coding the TRAP-18, assessors should rely on an interview with the subject, interviews with persons who are knowledgeable about the subject, and a review of relevant and available collateral records.

The TRAP-18 Manual provides contextual descriptions of and discussions about:

- The nature of terroristic and targeted violence;
- Focused threat assessment and management;
- Development, use, and administration of the tool; and
- Case summaries that describe and operationalize the TRAP-18 items.

Although the Manual does not include a discussion of the research examining the TRAP-18’s utility, findings from research studies with the tool can be accessed on the author’s website, www.DrReidMeloy.com. The Manual does not include a sample TRAP-18 Code Sheet. Code Sheets must be purchased separately from MHS at www.mhs.com. The TRAP-18 Manual and Code Sheet are currently available in English, French, Swedish, German, and Norwegian.

The nine-page TRAP-18 Code Sheet provides space and a structure for the assessor to record factors affecting the subject’s risk for targeted violence and risk management responses, using the following process:

1. Summarize relevant data and rating for each TRAP-18 item as Absent, Present, or Unknown.
2. Consider which risk factors are most relevant and whether any case-specific risk factors exist that are not addressed by the TRAP-18.
3. Consider items that could provide insight into the type(s) of targeted violence that may occur, its likelihood, and the role the subject is most likely to fill (i.e., actor, facilitator, or supporter).
4. Identify actions to manage or decrease the risk and list factors/circumstances that may aggravate or mitigate the subject’s risk for targeted violence.

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20 The TRAP-18 Manual does not address whether it is appropriate to use the tool if the subject of the risk assessment cannot be interviewed. The tool’s author, however, indicated the TRAP-18 can be used without the benefit of interviewing the subject of the evaluation (Reid Meloy, personal communication, August 15, 2021). Of course, because of the important information likely to be gleaned from an interview, it will be important for the assessor to acknowledge those cases in which the subject of the evaluation was not interviewed.

User/Assessor Qualifications

The TRAP-18 is intended for use by any threat assessment professional knowledgeable about lone actor terrorism and the use of SPJ tools. It is important to note that one TRAP-18 item, Mental Disorder, requires the assessor to make judgments about whether the subject has any history of psychopathology.22

As with any tool, potential users of the TRAP-18 should carefully reflect on the scope of their expertise, training, and professional competence. Only those who are knowledgeable about the causes of and risk factors for the type of violence of concern; are skilled in its assessment; and possess sufficient training, knowledge, or proficiency with the TRAP-18 should undertake such assessments. The required knowledge and skills are best attained through training, supervised experience, and continuous individual study.

Empirical Evidence Base

A few studies have been conducted on the reliability and validity of the TRAP-18.23 Following, are key findings from research on the validity and reliability of the tool.

Reliability

Only a few studies have examined the reliability of the TRAP-18, many of which were completed by the tool’s author. Guldimann and Meloy (2020) noted that “there is a clear authorship bias when the developers do research with their own tool,” (p. 126). However, these existing studies have reported good to excellent rates of inter-rater reliability (IRR), with average intraclass correlation coefficients (ICCs) in the .75 to .90 range (Challacombe & Lucas, 2018; Guldimann & Meloy, 2020; Meloy et al., 2015). While the TRAP-18 is still relatively new, there are more published studies supporting it than there are for most other tools designed specifically to assess risk for violent extremism.

Validity

Only a few studies so far have examined the validity of the TRAP-18, many of which were completed by the tool’s author. All the validation studies have been retrospective, which means they were based on cases where the outcome was known. While this approach is not uncommon in early validation studies, ideally, predictive validity studies are prospective—meaning the assessment is completed and the subjects are then tracked through the follow-up period to determine whether they engaged in subsequent violence. In the existing studies on the TRAP-18, using groups of known terrorists, researchers have reported many TRAP-18 items are frequently present in these cases (Meloy et al., 2015; Meloy et al., 2019; Meloy & Gill, 2016).

In one sample that compared terrorist attackers to potential terrorists who did not mount an attack, nearly all the proximal warning behaviors were found in the majority of attackers (only two were found in the majority of non-attackers), and every attacker exhibited at least one proximal behavior.

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22 We recommend assessors consult with a mental health professional (e.g., psychologist, psychiatrist, licensed clinical social worker) before making judgments related to the mental health of subjects.

23 Additional technical details about the reliability and validity of the TRAP-18 can be found in the Risk Assessment Tools Evaluation Directory (RATED) at: www.rma.scot.
Nearly all the distal characteristics were also found in the majority of attackers, but that was also true among the non-attackers, so those characteristics did not distinguish well between the groups (Meloy et al., 2019).

Challacombe and Lucas (2018) employed a retrospective approach to examine the ability of the TRAP-18 to distinguish terrorists who carried out violent acts from those who carried out non-violent acts. When used in actual assessments, the TRAP-18 is not “scored,” but for research purposes the authors tallied the number of factors present to create what they call an overall “TRAP-18 score,” with a range between 0 and 18. This “TRAP-18 Score” correctly classified 76% of the 58 perpetrators actions as violent or nonviolent.

**Case Example**

We designed the following fictional case to demonstrate application of the TRAP-18 tool. In this case, a Navy Reserve Officers’ Training Corps (ROTC) instructor was investigated after increasing preoccupation with and discussion of matters related to the United States’ involvement in the Middle East and describing terrorist acts as “efforts of conscience.” The assessor used the TRAP-18 to structure the assessment.

**Background**

Lieutenant Commander (LCDR) Amir Abdala, an unmarried, 31-year-old man, has been serving as an instructor at Lewisport University’s Navy ROTC program for two years. Over the past nine months, ROTC students and fellow faculty members have become increasingly concerned about statements LCDR Abdala has made in ROTC classes, meetings, and trainings. More specifically, LCDR Abdala repeatedly and adamantly shared his perspective that the wars in Afghanistan and Iraq were a “war on Islam.” He described U.S. soldiers in the Middle East as doing “ungodly things,” and he expressed satisfaction and a sense of “justice” regarding U.S. military losses in the region (e.g., the departure of troops from and recent return to Taliban rule).

LCDR Abdala recommended that the Department of Defense (DoD) allow Muslim Service members the option to be classified as “conscientious objectors” and gain release from their military duties. Finally, he described some terrorist acts as “efforts of conscience” (e.g., the 2003 incident in which Sgt. Hasan Akbar threw grenades into the tent of U.S. soldiers in Kuwait and opened fired on them with an M4 rifle when they came outside).

LCDR Abdala appeared to be “obsessed,” repeatedly raising these issues with other ROTC instructors, then becoming angry with and isolating himself from peers who did not agree with his perspective. Furthermore, LCDR Abdala often wove discussion of these issues into class lectures, even when they were irrelevant to class content. Students who challenged some of his assertions complained that he belittled them and graded unrelated class assignments unfairly.

The Navy Captain commanding the Lewisport University Naval ROTC received an unexpected visit from two Federal Bureau of Investigation (FBI) agents. The agents said they were following up
on some “concerning communications” on LCDR Abdala’s social media accounts and postings in private chatrooms typically populated with militant jihadist extremists exchanging fiery rhetoric. The Captain relayed some of what he had heard recently about Abdala, and the FBI expanded its investigation. They interviewed LCDR Abdala, his fellow faculty members, and several students.

LCDR Abdala was born in Pensacola, Florida in the summer of 1990, to parents who immigrated to the United States from Iraq. Abdala’s parents were more “culturally” Muslim than actively engaged in the religion. Abdala entered a Navy ROTC program at a state university in Florida and was awarded a bachelor’s degree in political science in 2011. He later enrolled in a master’s degree program in international relations at a DC-area university, which he completed at the age of 29. Since that time, LCDR Abdala has served as an instructor in Lewisport University’s ROTC program.

Both of LCDR Abdala’s parents died in 2020, each after battling a chronic illness. By Abdala’s report, his parents’ deaths rekindled his interest in and focus on his Muslim faith, and he became actively involved in a local mosque led by an imam known to be critical of the United States’ involvement in the Middle East. It was around that time that LCDR Abdala began sharing some of the radical perspectives that led to tension between him and his colleagues, students, and some family members.

Review of LCDR Abdala’s internet activities suggests that, over the past 18 months, he has spent increasing amounts of time on radical Islamist websites and forums, including creating posts on discussion boards in which he sympathized with persons suggesting the United States should be attacked for persistently occupying “the lands of Islam.” Most recently, LCDR Abdala’s posts referenced the military’s withdrawal from Afghanistan and the upcoming 20th anniversary of 9/11 and suggested that “action should be taken sooner, rather than later given these historic events.” Although he said the United States should be “punished” and “held accountable” for what he considered to be its many transgressions in the region, he never made any statements indicating he would carry out such activities himself.

LCDR Abdala’s ROTC colleagues reported that he never socialized with them, even though meeting outside of work was common for others in the ROTC program. Colleagues described LCDR Abdala as increasingly distant given the tensions that resulted from their political and ideological disagreements, and they noted that he often left campus during the workday to attend religious services.

Students described LCDR Abdala as “wearing his Islamic ideology on his sleeve,” forcing discussion of the subject matter into lectures he taught regardless of course content, and constantly bringing up matters of religion during his lectures to instigate arguments. Students reported that, during one class, he justified the actions of “suicide bombers” whom he described as being rewarded for their acts in Paradise, and he discussed the superiority of Sharia law to American law. LCDR Abdala was also described as particularly hard on Muslim students who were critical of some of his claims.

LCDR Abdala agreed to be interviewed as part of the investigation. He discussed his increased commitment to his religion because of his parents’ deaths. He explained that this religious focus and his associated political beliefs alienated him from his colleagues, students, and some family members. Although he acknowledged he was becoming disillusioned with his military service because of his increasing focus on religion, he denied having any thoughts, plans, or intent to take any kind of inappropriate action against the United States. He indicated his intent to end his military service when his current commitment was completed.
After approximately 90 minutes, LCDR Abdala ended the meeting when he was asked to talk about what he had posted on various internet sites. At that point he stated that he was being “set up and persecuted” because of his religious beliefs and would have no further contact with authorities unless his attorney was present.

**TRAP-18 Application**

The TRAP-18 is a valuable SPJ tool in this case because there are specific concerns, based on LCDR Abdala’s statements and internet posts, about his potential for engaging in violence that might be motivated by extremist ideology. Risk factors for violent extremism may be different from those for general violence, so the VRA should focus on the factors most applicable to the behavior of concern in this case. Below is an analysis of how the TRAP-18 items might be rated and used to formulate an opinion about risk for extremist violence in this case.

**Proximal Warning Behaviors Associated with Risk for Targeted Violence**

**Pathway**  
*RATING: UNKNOWN*

LCDR Abdala made no statements to students or colleagues indicating that he was planning or preparing for any attacks, and he specifically denied such intent or plans when interviewed. In his internet postings, LCDR Abdala did sympathize with persons who wrote that the United States should be attacked given its activities in the “lands of Islam.” He also said that the United States should be “punished” and “held accountable” for what he considered to be its many transgressions, but he never indicated he would carry out such activities.

According to the TRAP-18 Manual, the “Pathway” indicator is not coded as “Present” if only grievances or ideation are present (early stages). Based on the information available there is, so far, no evidence of behaviors associated with researching, planning, or preparing an attack (late stages).

**Fixation**  
*RATING: PRESENT*

LCDR Abdala’s relationships with colleagues, students, and family members have suffered as he has become increasingly preoccupied with his belief that the United States has persecuted Muslims and should be held accountable.

**Identification**  
*RATING: PRESENT*

Although he enlisted in the Navy, Abdala does not embrace the “combat” aspects of his military commitments. He has, however, come to consider himself as someone committed to advancing his religion and associated political beliefs.

**Novel Aggression**  
*RATING: ABSENT*

LCDR Abdala is not known to have carried out any acts of targeted violence.
Energy Burst  
*(Rating: ABSENT)*

There is no indication that LCDR Abdala has recently experienced what might be described as an “energy burst.”

Leakage  
*(Rating: ABSENT)*

There is no evidence that LCDR Abdala is planning an attack of any kind.

Last Resort  
*(Rating: PRESENT)*

LCDR Abdala recently made internet posts referencing the military’s withdrawal from Afghanistan and the 20th anniversary of 9/11 and suggesting that “action should be taken sooner rather than later given these historic events.”

Directly Communicated Threat  
*(Rating: ABSENT)*

LCDR Abdala is not known to have made any specific threats.

*Distal Characteristics of Lone Actor Terrorists*

Personal Grievance and Moral Outrage  
*(Rating: PRESENT)*

LCDR Abdala has expressed moral outrage associated with his beliefs that thousands of Muslims have been harmed by the U.S. military in Iraq and Afghanistan. Furthermore, he described the current assessment as a “set up and persecution.”

Framed by an Ideology  
*(Rating: PRESENT)*

LCDR Abdala has voiced beliefs in support of violent actions against the United States.

Failure to Affiliate with an Extremist or Other Group  
*(Rating: ABSENT)*

LCDR Abdala is not known to have rejected, or to have been rejected by, a radical or extremist group.

Dependence on the Virtual Community  
*(Rating: PRESENT)*

LCDR Abdala has actively used virtual communities to share and reinforce his beliefs and to offer words of encouragement to others who advocate for such attacks.
Thwarting of Occupational Goals  
*(Rating: ABSENT)*

To date, LCDR Abdala has not experienced any major educational or occupational setbacks. However, he has reported his intent to leave the military when his current commitment is completed. He also expressed concern that the outcome of the current investigation could negatively affect his promotion opportunities.

Changes in Thinking and Emotion  
*(Rating: PRESENT)*

Over the past nine months, LCDR Abdala has become increasingly strident and rigid in some of his religious and political beliefs, has attempted to proselytize to others, and has alienated and isolated himself from those who disagree with him.

Failure of Sexually Intimate Pair Bonding  
*(Rating: UNKNOWN)*

Other than knowing that LCDR Abdala is unmarried and that his colleagues were unaware of any long-term romantic or sexually intimate relationships in his past, information regarding LCDR Abdala’s experience in sexual/romantic relationships is not available.

Mental Disorder  
*(Rating: ABSENT)*

There is no evidence that LCDR Abdala has a history of mental disorder.

Creativity and Innovation  
*(Rating: ABSENT)*

There is no evidence that LCDR Abdala has developed plans to carry out acts of targeted violence.

Criminal Violence  
*(Rating: ABSENT)*

There is no record of LCDR Abdala using violence for instrumental purposes in the past. In addition, he has a lifetime history of respecting rules and boundaries, enjoys his freedoms, and has coped well with personal loss in the past. He has also sought and appropriately utilized mental health counseling (e.g., EAP) on his own.

Opinions and Recommendations

*Are there any Proximal Warning Behaviors?*
Yes.

*Are there any Distal Characteristics?*
Yes.

*What is the priority of this case?*
This case is high priority and requires active monitoring and active risk management.
What TRAP indicators are most relevant?
The most relevant indicators are LCDR Abdala’s fixation on ideological matters, his moral outrage, his apparent sense of time urgency, and the lack of any relationships that would discourage him from acting on his beliefs.

Are there case-relevant risk factors not addressed in the TRAP?
Yes. LCDR Abdala does not seem to have any meaningful friendships or family relationships at this time; therefore, the satisfactory relationships that might typically serve to reduce the likelihood that someone would act out are not present.

If no efforts are made to monitor or risk manage this subject, what is the likelihood of violence in your opinion (low, moderate, high, imminent)?
The likelihood is moderate.

If targeted violence did occur, what would be the likely tactics (weapons, location, time, approach behavior) and targets (individual, group, location)?
- Locations could include the university, the ROTC building and classrooms, and nearby recruiting stations or military installations.
- Targets could include other ROTC instructors and students or active military members serving at nearby recruiting stations or military installations.
- Approach behavior could include LCDR Abdala’s presence at any of the locations listed or attempts to contact persons working at those locations.
- While it is possible that LCDR Abdala might identify a target far from his current location to gain greater attention and make a bolder statement (e.g., landmarks in DC such as the Pentagon or the White House), there are no indications that such a tactic would be likely.

What is the likely audience for this act of lone actor terrorism?
The likely audience is other like-minded people.

Have all possible risk scenarios, even the most implausible, been considered?
Yes.

What steps can be taken to manage the individual’s risk of lone actor terrorism, considering all relevant biological, psychological, and social (including operational) mitigating factors?
To be determined.

What specific protective factors or buffers against violence do you see in this case?
None.

What immediate circumstances might exacerbate the individual’s risk of lone actor terrorism?
A national or international event that reinforces LCDR Abdala’s beliefs that the U.S. Government (USG) or military are persecuting Muslims could exacerbate his risk.

When all data are considered, do you think the subject is most likely to be an actor (perpetrates the violence), a facilitator (tactically helps perpetrate the violence), or a supporter (radicalized but no violence risk) of terrorism?
LCDR Abdala has expressed support for violent tactics, and it is possible he could facilitate or perpetrate targeted violence.
What are your further recommendations and additional comments or issues concerning this case?
To be determined.

How can you best communicate your findings to those who have a need to know?
Findings can be communicated via an oral briefing accompanied by a paper highlighting the most important data and primary concerns.

Case Epilogue
After LCDR Abdala walked out of the interview, the FBI remained concerned, particularly because of his sympathies for violent action and beliefs about the need to “punish” the United States while he was an active-duty officer in the U.S. Navy. He was not under continuous surveillance, but they tried—without intrusion—to monitor his activity, online and offline. Two days later, they got an alert that LCDR Abdala had submitted a background check to purchase a semi-automatic rifle and a .45 caliber semi-automatic pistol. This further increased the agents’ concern; as a result, they escalated Abdala’s risk priority and marked his case for re-evaluation using the TRAP-18.
Tool Review: B-SAFER

The Brief Spousal Assault Form for the Evaluation of Risk (B-SAFER) is a 15-item structured professional judgment (SPJ) tool for use with subjects who are suspected or known to have committed intimate partner violence (IPV), which its authors define as “...the actual, attempted, or threatened physical harm of a current or former intimate partner” (Kropp, Hart, & Belfrage., 2010, p. 1). B-SAFER is designed to help criminal justice and court professionals collect and consider relevant data, structure their judgments about risk for IPV, and facilitate risk management planning.

Authorship and Publication

Randall Kropp, Stephen Hart, and Henrik Belfrage authored the B-SAFER, and Protect International Risk and Safety Services published the tool. The first version of the tool came out in 2005, followed by the current version in 2010. The B-SAFER is available in 12 languages. Currently, only hard copy versions of the tool are available for purchase and use.

To learn more about the B-SAFER, its development, and training opportunities, visit www.protect-international.com.

Appropriate Subject Demographics

The B-SAFER is intended for use with adults aged 18 and older who are suspected of or known to have engaged in IPV. The B-SAFER may be of some value when assessing adolescents (especially those between 15 and 18) who have a known or suspected history of violence in dating relationships (Kropp et al., 2010). It can be used with male and female subjects, regardless of sexual orientation.

Description

The B-SAFER was developed at the request of law enforcement agencies that wanted a shorter and simpler version of the Spousal Assault Risk Assessment (SARA; Kropp & Hart, 2015). The B-SAFER is intended for use by professionals (e.g., law enforcement officers, probation officers, victim counselors, court personnel) working with IPV perpetrators and victims. Although concerns have been raised about whether law enforcement officers can routinely access information necessary to score many of the B-SAFER items (Svalin et al., 2018), this may be of less concern with assessments conducted by or for Government Counter-Insider Threat (C-InT) Hubs.
The authors developed the B-SAFER using a four-step process. They began by reviewing the scientific literature devoted to IPV risk assessment. Next, they examined existing data from the SARA to identify possible redundancy among its 20 risk items/factors to revise and reduce the number of items. After this, the authors tested the utility of the B-SAFER using a sample of law enforcement officers in Europe. Finally, after developing drafts of the B-SAFER User Manual and B-SAFER Worksheet, the authors tested the utility of the tool using samples from various law enforcement agencies in Sweden and Canada.

The first version of the B-SAFER was published in 2005 and consisted of 10 items distributed across two categories: IPV and Psychosocial Adjustment. The revised version of the B-SAFER, published in 2010, added a third category consisting of 5 items: Victim Vulnerability Factors. All 15 B-SAFER items are similar or identical to items included in the SARA-V3. Like the SARA, the B-SAFER also uses an “Other Considerations” area to document relevant case-specific factors that are not otherwise covered by the 15 items (see Table 11).

Table 11

<table>
<thead>
<tr>
<th>Category</th>
<th>Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPV</td>
<td>• Violent Acts</td>
</tr>
<tr>
<td></td>
<td>• Violent Threats or Thoughts</td>
</tr>
<tr>
<td></td>
<td>• Escalation</td>
</tr>
<tr>
<td></td>
<td>• Violation of Court Orders</td>
</tr>
<tr>
<td></td>
<td>• Violent Attitudes</td>
</tr>
<tr>
<td></td>
<td>• Other Considerations</td>
</tr>
<tr>
<td>Psychosocial Adjustment</td>
<td>• General Criminality</td>
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<tr>
<td></td>
<td>• Intimate Partner Relationship Problems</td>
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<tr>
<td></td>
<td>• Employment Problems</td>
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<tr>
<td></td>
<td>• Substance Use Problems</td>
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<tr>
<td></td>
<td>• Mental Health Problems</td>
</tr>
<tr>
<td></td>
<td>• Other Considerations</td>
</tr>
<tr>
<td>Victim Vulnerability Factors</td>
<td>• Inconsistent Attitudes or Behavior</td>
</tr>
<tr>
<td></td>
<td>• Extreme Fear of Perpetrator</td>
</tr>
<tr>
<td></td>
<td>• Inadequate Support or Resources</td>
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<td></td>
<td>• Unsafe Living Situation</td>
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<td></td>
<td>• Health Problems</td>
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<td></td>
<td>• Other Considerations</td>
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</table>

Like most SPJ tools, the B-SAFER items are not scored or assigned numeric values. Instead, they are categorically coded/rated. The presence or absence of each B-SAFER item is rated at two periods of time: “Currently” (i.e., the 4 weeks prior to the assessment) and “In the past” (i.e., at any time in the person’s life prior to the four weeks preceding the assessment). For both periods, each B-SAFER item is coded as present (“Y”), absent (“N”), or partially or possibly present (“?”).
To complete the B-SAFER, the assessor must identify the subjects of the risk assessment, including the perpetrator(s) and the likely target(s), then gather relevant case information using multiple data sources. Interviews with any intended targets, potential perpetrators, and third parties who know the perpetrator or target are important data sources for the B-SAFER. Relevant records (e.g., criminal records, documented prior assaults or threats, results of any psychological evaluations of the perpetrator) also provide critical data for review.

The B-SAFER Manual includes a sample B-SAFER Worksheet. These forms must be purchased from the publisher. The B-SAFER authors describe the use of this eight-page Worksheet as being optional, but the form ensures a comprehensive assessment of IPV risk by facilitating data collection, case formulation, and risk management planning. The Worksheet structures the documentation of:

- Data sources,
- Background information on the perpetrator(s) and victim(s), and
- Ratings of the B-SAFER’s 15 risk items.

The Worksheet also facilitates case management by structuring the assessor’s:

- Assessment of the risk for IPV,
- Formulation of likely violence scenarios, and
- Development of case management strategies.

In addition, the Manual provides 15 pages of questions the assessor might pose to a victim or potential victim, all of which are tied to the 15 B-SAFER items. No parallel list of questions is offered, however, for use with the perpetrator or suspected perpetrator.

**User/Assessor Qualifications**

The B-SAFER was designed for use by law enforcement and other professionals in the justice system who need to consider risk of IPV. Qualified users should understand the dynamics of IPV (via coursework, study of relevant literature, and work-related experience) and have expertise in assessing perpetrators and victims of IPV (via training, supervised experience, or work-related experience with perpetrators and victims of IPV). Although the B-SAFER authors do not prescribe a specific course of study and experience required to become a qualified user, they recommend that assessors:

- Review the B-SAFER Manual,
- Remain current on the professional literature devoted to IPV and risk assessment,
- Complete practice cases based on file reviews, and
- Complete IPV cases under supervision and in consultation with experienced colleagues.
While two B-SAFER items address a perpetrator’s potential substance abuse or mental disorders, use of the tool is not limited to mental health professionals. Only users with professional expertise in assessing mental disorders and substance abuse should make diagnostic judgments. B-SAFER users without the knowledge and skills necessary to form opinions on these matters should:

- Consult with a qualified clinician (e.g., licensed psychologist, psychiatrist, or social worker) who possesses the proper expertise,
- Rely on documented results from evaluations conducted by qualified clinicians within the past six months to inform ratings on behavioral health/disorder-related risk factors, and
- Offer only provisional opinions around these items and communicate the need to have these ratings confirmed by a qualified clinician.

**Empirical Evidence Base**

Compared to the other tools described in this section, empirical studies examining the B-SAFER’s reliability and validity are limited.\(^2\) However, a description of the tool’s use is included here because it is one of the few SPJ tools with any empirical support available for law enforcement professionals’ use in IPV cases.

**Reliability**

Limited data are available regarding the B-SAFER’s inter-rater reliability (IRR). Results from the few studies conducted so far have been encouraging and suggest that when sufficient case information is available, good levels of agreement between different raters are possible (de Ruiter et al., 2008, cited in Siere et al., 2017; Kropp & Hart, 2015; Serie et al., 2017; Svalin et al., 2017; Thijssen & Ruiter, 2011).

**Validity**

There is a limited body of research reflecting the validity of the B-SAFER. Prior studies—primarily with male perpetrators—have shown that police officers’ B-SAFER-guided risk judgments significantly predict IPV offenses (Storey et al., 2014). The original version of the tool was able to distinguish IPV offenders from non-offenders (Au et al., 2008) and predict future IPV with about 70% accuracy (Loinaz, 2014). Results from other predictive validity studies of the current version, however, have not been as encouraging—at least in low-risk samples (Gerbrandij et al., 2018).

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\(^2\) Additional technical details about the reliability and validity of the B-SAFER can be found in the Risk Assessment Tools Evaluation Directory (RATED) at: [www.rma.scot](http://www.rma.scot).
Case Example

We designed the following fictional case to demonstrate application of the B-SAFER tool. In this case, an employee was recommended for assessment because of a recent incident in which he threatened to harm his spouse and himself. The police officers who arrived at the scene of the incident contacted the on-call Domestic Violence Investigator, Detective Waller, to ask for an opinion on Mr. Treti’s risk. When Det. Waller arrived, she used the B-SAFER to structure the assessment.25

Background

David Treti is a married, 42-year-old White male employed by a small defense contracting firm. He holds a bachelor’s degree in computer science and works as a data scientist. Mr. Treti has been married to his wife Sonia Treti for four years and has a 15-year-old stepson from this marriage.

As required by company and Department of Defense (DoD) policy, Mr. Treti reported to his supervisor and to the Facility Security Officer (FSO) that he had recently been arrested and charged with making terroristic threats, trespassing, and resisting arrest without violence, because of interactions he had with his wife, who is employed by the same defense contractor. In response to Mr. Treti’s report, the company placed him on administrative leave and requested the police records from the incident. Those records included results of Det. Waller’s B-SAFER screening.

Det. Waller relied on the following available information in her assessment:

- Copies of Ms. Treti’s phone message log,
- Transcripts of voicemail messages Mr. Treti left for his wife in the days prior to his arrest,
- Statements that Mr. Treti, Ms. Treti, and her 15-year-old son made to the police,
- Mr. Treti’s employment file, and
- A copy of Mr. Treti’s arrest history (indicating no prior arrests).

She also interviewed Mr. Treti, Ms. Treti, and Ms. Treti’s son.

Information from the arrest report and interviews suggest that, on Thursday, September 1st, Ms. Treti informed her husband that she intended to divorce him. That same day, she moved with her son into an apartment she had rented in anticipation of her separation. During the ensuing three-day holiday weekend, Mr. Treti repeatedly called his wife on her mobile phone and asked her to reconsider her decision to divorce. He became increasingly angry as Ms. Treti maintained her intention to divorce and refused to meet to discuss matters.

After a day of repeated calls from her husband, Ms. Treti stopped answering her phone. In response, she received 48 voicemail and text messages from her husband over the course of three days. The voicemail messages suggest that Mr. Treti was intoxicated at times. He made implied and direct threats to kill his wife and himself if she did not meet with him and agree to reconcile.

25 This case was also used in our review of the Spousal Assault Risk Assessment Guide, Version 3 (SARA-V3); here, we are applying the B-SAFER, an SPJ tool designed for use by law enforcement professionals, to demonstrate how different SPJ tools may be used to assess a case given the context and assessor’s professional background.
Ms. Treti was reluctant to contact police, fearing it might negatively affect her and her husband’s employment. She only did so on Labor Day evening when her husband somehow obtained her new address and showed up unannounced at her apartment. Officers dispatched to the scene described Mr. Treti as appearing “intoxicated,” and said he had been banging on the apartment door, demanding entrance. After officers reviewed the voicemail and text messages, they charged Mr. Treti with making terroristic threats, trespassing, and resisting arrest without violence. After he was arrested and jailed, Mr. Treti was granted bail, on the condition that he have no contact of any type with his wife and stepson.

**B-SAFER Application**

The B-SAFER is particularly useful for law enforcement and correctional officials tasked with assessing and managing IPV risk in threat assessment (TA) cases. Below are the results from Detective Waller’s screening, after discussions with the Treti family.

**Perpetrator Risk Factors: IPV**

**Violent Acts**

(*Current: Y, Past: Y*)

According to Ms. Treti and her son, Mr. Treti had physically assaulted her between 5 and 10 times in the preceding 18 months. These assaults involved pushing Ms. Treti to the ground, grabbing her, and once slapping her. Ms. Treti said that she never needed nor sought medical care for her injuries. She hadn’t reported these incidents to the police, given concerns that it could affect her husband’s security clearance and employment.

Although he did not deny them, Mr. Treti minimized the incidents of physical assault that his wife and stepson described. He acknowledged pushing his wife to the ground “once or twice...but while drinking” and indicated that during their arguments, she would often try to prevent him from leaving a room and he would slap or grab her in response.

**Violent Threats or Thoughts**

(*Current: Y, Past: Y*)

Mr. Treti acknowledged responsibility for the voicemail and text messages that included threats to kill himself and his wife. However, he described the events precipitating his arrest as a “one time thing” that resulted from him being “blindsided” by his wife leaving him and announcing her intention to divorce.

By the time he was interviewed for the assessment, Mr. Treti had resigned himself to the pending divorce. He said he was “probably better off without her” and repeatedly asserted that he intended to get his “fair share” of the marital assets, since he earned considerably more than his wife during their marriage.

**Escalation**

(*Current: Y, Past: Y*)

Mr. Treti’s pattern of IPV has increased during the preceding 18 months and clearly escalated in the days after his wife separated from him and announced her intention to divorce. Prior to the incident that led to his arrest, Mr. Treti had never threatened or attempted to kill himself or his wife.
Violation of Court Orders  
(*Current: Y, Past: N*)

In the weeks since he was arrested and bonded out of jail, Mr. Treti has once failed to comply with his court-imposed conditions of release. Before Ms. Treti changed her cell phone number, Mr. Treti twice sent her text messages imploring her to reconsider her decision to divorce and stating that he would “punish her financially” if she insisted on divorcing. Mr. Treti remained in the community after these communications were brought to the attention of law enforcement officials. There is no evidence of other supervision violations.

Violent Attitudes  
(*Current: Y, Past: Y*)

Mr. Treti does not appear to embrace attitudes that generally condone criminal activities or support violence. However, he minimized the seriousness and significance of his prior assaults of Ms. Treti and the threats he made immediately prior to his arrest. He even deflected responsibility by pointing to his wife's behavior during altercations as the cause of his assaultive behavior. Minimizing, deflecting, or denying personal responsibility for IPV behavior is included in the criteria for the B-SAFER’s Violent Attitudes item.

Other Considerations
Not applicable.

*Perpetrator Risk Factors: Psychosocial Adjustment*

**General Criminality**  
(*Current: N, Past: N*)

Mr. Treti has no history of contact with the criminal justice system prior to his recent arrest. His history of antisocial behavior is limited to his emotional and physical abuse of his wife and his failure to meet his financial obligations (e.g., a pending foreclosure, recent repossession of a boat and motorcycle, unpaid taxes) because of excessive spending.

**Intimate Relationship Problems**  
(*Current: Y, Past: Y*)

Mr. Treti has struggled with intimate and non-intimate relationships. Ms. Treti described him as emotionally distant for much of their relationship and unwilling to acknowledge or address problems in their marriage.

She also indicated that he had few people he could rely on for support, had been alienated from family members for a long time, and had more recently become alienated from coworkers as well. Although Mr. Treti’s description reflected a lack of meaningful relationships and a poorly developed support system, he largely portrayed this as the product of his personal choice.
Employment Problems
(CURRENT: Y, PAST: N)

Mr. Treti reported no problems with his work performance. For the six years he has been with his current employer, he has consistently received ratings of “performs as expected” or “performs above expectations.” Nonetheless, Mr. Treti understood that his employment status was now precarious. He expressed concerns that he could lose his job because of this incident and holds his wife responsible.

Substance Use Problems
(CURRENT: Y, PAST: Y)

Accounts offered by Ms. Treti and her son suggest that Mr. Treti has an alcohol use disorder. Their reports suggest he has a longstanding pattern of regular and heavy alcohol use, which increased in severity in the preceding 18 months (i.e., up to 5 or 6 ounces of liquor per night, up to 5 evenings per week). Ms. Treti indicated that her husband had sometimes missed work (i.e., calling in sick) because of his alcohol use as well.

Although Mr. Treti acknowledged using alcohol, he described more moderate use (i.e., 2 to 3 drinks, 2 or 3 nights per week) and denied experiencing any interpersonal, legal, or vocational problems as a result. Mr. Treti said that he has never missed work because of his alcohol use, but he acknowledged being intoxicated during some of his problematic interactions with his wife.

Mr. Treti said he was intoxicated at the time he threatened to kill his wife and himself, but he dismissed this as a “one time incident” in response to his wife’s stated intention to divorce. Mr. Treti does not intend to stop using alcohol. However, he indicated that he would monitor and moderate his use to avoid intoxication. Both Ms. Treti and Mr. Treti reported he had no history using or abusing drugs or any other illicit substances.

Mental Health Problems
(CURRENT: N, PAST: N)

Interviews with Mr. Treti, Ms. Treti, and Ms. Treti’s son indicate that Mr. Treti has no history of major mental disorder. Because Detective Waller cannot diagnose mental disorders, this item is provisionally rated “N.” The presence or absence of diagnosable mental health problems would need to be confirmed by a qualified clinician.

Other Considerations
Not applicable.

Victim Vulnerability Factors

Inconsistent Attitudes or Behavior
(CURRENT: N, PAST: Y)

Ms. Treti was resolute in indicating her intent to divorce and minimize any future contact with her husband. She was previously reluctant to separate from him because of her religious beliefs and because she hoped that he would make changes in his behavior. However, she says she has now concluded that her marital relationship is “unfixable and not healthy.”
Ms. Treti indicated that she had never contacted law enforcement officials in response to past abuse given her concerns that it might affect her husband’s employment. She described herself as “a survivor of domestic violence” who would no longer allow herself and her son to be abused.

Ms. Treti wishes to pursue any legal protections that would keep her husband from having contact with her. She has recently changed her cell phone number and email addresses and intends to relocate to a gated section of her current apartment complex.

Extreme Fear of Perpetrator
(Current: Y, Past: N)

Ms. Treti expressed considerable concern about the risk of harm that her husband posed to her and her son. She observed that, within the past 18 months, he began physically abusing her, his alcohol use had increased, and he had threatened to kill her and himself.

Ms. Treti is fearful that Mr. Treti may become angrier and continue to abuse alcohol as the divorce process moves forward, and she is concerned that he might blame her for any financial problems he experienced, particularly if he loses his job.

Inadequate Support or Resources
(Current: ?, Past: ?)

Although Ms. Treti said she does not have much of a local support system, she has two sisters and two long-time friends who are strongly supportive and with whom she maintains regular contact. She said that she has already discussed with all four of them her intention to divorce, and all offered their encouragement and support. Ms. Treti had yet to inform her parents of her intentions because they might encourage her to remain married due to their religious convictions.

Ms. Treti reported that, at the suggestion of her attorney, she contacted a local domestic violence shelter in the weeks before separating from her husband. She initiated counseling there and was aware of other resources that were available to her.

Unsafe Living Situation
(Current: Y, Past: Y)

Mr. Treti knows the apartment complex in which Ms. Treti currently resides. However, she plans to move to a guarded and gated section of the same complex, which should decrease her husband’s access and provide her with some increased security.

Health Problems
(Current: Y, Past: Y)

Ms. Treti estimated that she has been depressed for the preceding two years, which she attributed to her marital difficulties and concerns about her weight. She recently enrolled in counseling at a local domestic violence shelter where therapy sessions have focused on her depression and issues surrounding the domestic violence she has endured.

Other Considerations
Not applicable.
Opinions and Recommendations
After collecting and analyzing all relevant and available data and reviewing the ratings from the B-SAFER, Detective Waller considered a range of interventions (see Table 12) that might mitigate the IPV risk, including monitoring, treatment, supervision, and/or victim safety planning.

Table 12
B-SAFER Case Planning

<table>
<thead>
<tr>
<th>Management Strategy</th>
<th>Questions to Consider</th>
<th>Resulting Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitoring/</td>
<td>What are the most appropriate ways to monitor changes in risk?</td>
<td>If Mr. Treti is placed on probation, regular monitoring should be done by his probation officer. Furthermore, others who know Mr. Treti could be brought in as ‘sensors’ to keep in communication with Mr. Treti and to be in a position to notice any changes or warning signs and report those moving forward.</td>
</tr>
<tr>
<td>Surveillance</td>
<td></td>
<td>If Mr. Treti remains in the workplace, his supervisors can also monitor his functioning and adjustment. Ms. Treti should be provided with a way to report any unwanted contact with Mr. Treti.</td>
</tr>
<tr>
<td>Control/Supervision</td>
<td>What restrictions on activity, movement, association, or communication are most appropriate?</td>
<td>Mr. Treti should be barred from having any contact with Ms. Treti (e.g., via order of the court or conditions of employment). If Mr. Treti remains employed, Ms. Treti should be provided work accommodations to ensure that Mr. Treti will not have access to her in the workplace (e.g., allowing her to work remotely or having her work in a secure area that Mr. Treti cannot access).</td>
</tr>
<tr>
<td>Assessment/Treatment</td>
<td>What assessment, treatment, or rehabilitation strategies are most appropriate?</td>
<td>Mr. Treti should receive substance abuse treatment and be enrolled in an evidence-based anger management program. Ms. Treti should receive psychotherapy.</td>
</tr>
<tr>
<td>Victim Safety Planning</td>
<td>What steps could enhance the physical security or self-protective skills of the victim/complainant?</td>
<td>Ideally, Ms. Treti should relocate to a residence that is more secure and unknown to Mr. Treti. Ms. Treti should also be educated and counseled about strategies she can employ to better protect herself.</td>
</tr>
</tbody>
</table>
Based on her assessment, Detective Waller formulated final opinions about Mr. Treti’s overall risk for violence and the level of priority the case should receive. Table 13 provides an overview of Detective Waller’s final opinions regarding Mr. Treti’s case.

**Table 13**  
*B-SAFER Final Opinions*

<table>
<thead>
<tr>
<th>Opinions</th>
<th>Questions to Consider</th>
<th>Coding</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case Prioritization</strong></td>
<td>What is the level of concern that the person will commit spousal violence in the future if no intervention is taken?</td>
<td>High/Moderate</td>
<td>Mr. Treti’s risk for violence depends substantially on his use of alcohol, his access to Ms. Treti, and stressors he is experiencing at this time or may experience in the future.</td>
</tr>
<tr>
<td><strong>Life-Threatening Violence</strong></td>
<td>What is the level of concern that any future spousal violence will involve life-threatening physical harm if no intervention is taken?</td>
<td>High/Moderate</td>
<td>There is a risk for life-threatening violence, given the recent threats Mr. Treti made, combined with his alcohol abuse. This risk may increase if he loses his employment.</td>
</tr>
<tr>
<td><strong>Imminent Violence</strong></td>
<td>What is the level of concern that the person is an imminent risk to commit spousal violence if no intervention is taken?</td>
<td>High/Moderate</td>
<td>There is an imminent risk for violence, given the recent threats Mr. Treti made, combined with his alcohol abuse. This risk may increase if he loses his employment.</td>
</tr>
<tr>
<td><strong>Likely Victims</strong></td>
<td>Who are the likely victims of any future spousal violence?</td>
<td>Not applicable (no coding needed for this component)</td>
<td>Ms. Treti would be the primary victim, but her son could also be a possible victim.</td>
</tr>
</tbody>
</table>
Case Epilogue
After reviewing the police report, including Detective Waller’s B-SAFER assessment, the FSO consulted with the C-InT Hub, and they referred Mr. Treti to a local forensic psychologist to assess his violence risk. Just days after meeting with the psychologist, and while the results of his assessment were still pending, Mr. Treti discovered his wife’s new cell phone number and “drunk dialed” her at about 2:00 am telling her “I really want to work this out,” but he did not make any direct threats. Ms. Treti followed through in requesting an order of protection against her husband, which was granted.

When the assessment results were returned to his employer, a letter of reprimand was placed in Mr. Treti’s file, and he was mandated—as a condition of employment—to take a 14-day leave of absence to complete a residential alcohol treatment program and to follow-up with weekly counseling sessions. He was advised that any further infractions would result in termination of employment and likely revocation of his security clearance. Mr. Treti agreed to the conditions, completed his rehabilitation program, and continued to attend his outpatient counseling sessions. While he told his counselor that losing his family made him sad and that the divorce process was stressful, he has not attempted to contact his wife, and seems to have maintained his sobriety as he awaits notice that the divorce is finalized.
Conclusion

In violence risk and threat assessment, the key is to find the best fit between tool, task, subject, and user. To find the right fit, assessors must ask:

- What are the behaviors that require assessment?
- What tool(s) might appropriately address those behaviors?

The concerning behaviors specific to a case inform the selection of structured professional judgment (SPJ) tools. Ultimately, which tools are selected will depend on how heavily the assessor weighs the importance of each factor in a case and how much benefit would be gained by combining or adding tools. More than one tool can be used, but simply using more tools does not always produce a better assessment.
Scenarios with SPJ Tools

We conclude this Guide with two scenarios that highlight why certain behaviors matter, how those behaviors might lead to the selection of a particular SPJ tool, and how Counter-Insider Threat (C-InT) professionals might approach the questions listed above.

As we previously stated, this Guide is not a comprehensive exploration of violence risk and threat assessment, the SPJ approach, or the full range of evidence-based SPJ tools available for use. Instead, we hope this Guide has provided a foundation for you to continue to learn more about the SPJ approach on your own. In the following scenarios, we refer to tools from our earlier reviews, as well as tools not reviewed in this Guide. These tools address certain gaps and behaviors that may not be covered by those we’ve reviewed, and we encourage you to view them as an opportunity for further reading and research.

Scenario 1: The Suspicious Security Officer

Pat is a 25-year-old male employee in a U.S. Government (USG) organization. Pat was hired with an active Top Secret (TS)/Sensitive Compartmented Information (SCI) security clearance following an honorable discharge from the Army after four years of enlisted service. Pat was trained as a military police officer, and he is currently employed in the organization’s security department. Recently someone in the office filed a complaint about Pat with their supervisor. The complaint was passed on to Human Resources (HR) because it alleged that Pat was “making odd comments of a sexual nature” to both men and women in the office. The complainant also alleged that Pat stares at people and occasionally places his fingers in the shape of a gun and “fires” at office mates.

Colleagues describe Pat as a “loner” with few friends. Local police recently visited Pat after a neighbor reported he was “acting strange” and firing a pistol at a target in his backyard early in the morning before going to work. HR brought Pat into the Employee Assistance Program (EAP) office where he reported distress and concerns that certain coworkers were conspiring against him. Pat tried to reverse the conversation by telling the HR representative that he scheduled an appointment with the EAP counselor to talk about his concerns. The EAP counselor recommended that Pat receive a psychiatric assessment for medication to help control thoughts of persecution, but Pat reiterated his persecutory complaints about his coworkers—escalating his tone—and told the EAP counselor he was “not crazy” and did not need medication.

Commentary

This case raises several questions. There certainly seems to be a high index of suspicion for the presence of a mental disorder—although Pat seems to have little insight about that. His behavior is not just odd, it also crosses the organization’s lines for sexual harassment. Beyond that, he is known to have one or more guns, is trained to use them, and has been firing at least one inappropriately within the city limits. In addition, he has made “finger gun” gestures that some have found to be unsettling, and he feels his coworkers are currently conspiring against him.

The Historical Clinical Risk Management-20, Version 3 (HCR-20V3) might be helpful for an assessment of Pat’s general violence risk. The Short-Term Assessment of Risk and Treatability (START), however, has a strong focus on the clinical/mental health components of risk and focuses more on short-term forecasts of behavior. It also brings in components of treatability and structures planning for risk mitigation.
Given the potential for workplace-related grievances, depending on results from the preliminary assessment, a more specialized tool like the Workplace Assessment of Violence Risk-21, Version 3 (WAVR-21 V3) may supplement threat assessment efforts. These tools consider a range of cognitive and behavioral factors, including some related to mental illness, which may be pertinent to this scenario.

**Scenario 2: A Coworker’s Escalating Extremism**

An employee expresses serious concerns about a coworker’s social media activity. The two employees are connected on a particular social media platform, and the employee of concern, Stanley, has been posting content referencing “death to the enemies of the faith” and martyrdom and praising an “American jihadist” who was arrested for a past mass shooting. Stanley recently converted to Islam and has started referring to himself as “Fahad.” He also intends to change his legal name soon. While Stanley does not make any direct threats in his social media content, the employee reporting the behavior is concerned that Stanley is becoming more extreme in his ideas and beliefs since his recent religious conversion.

Additional information comes to light. The reporting employee says Stanley has admitted to spending time on various Jihadist websites, discussion boards, and chat rooms. Stanley admits to actively seeking and consuming information about various well-known and lesser-known Jihadist groups. Stanley’s rhetoric in online postings, and even in conversations with coworkers, is becoming substantially more anti-American and more supportive of violence.

The reporting employee recently learned that Stanley posted a video online declaring he had joined “a movement waging war on America.” Stanley also posts and brags openly that he has obtained weapons (i.e., a semi-automatic rifle, ammunition).

**Commentary**

While the subject has a constitutional right to hold whatever religious beliefs he wishes, the statements supporting violent activity and the unusual degree of interest in prior acts of mass violence are potential causes for concern. This is especially the case if the employee works in a national security position or works closely with members of America’s national security enterprise. The revelations of recent conversations and public declarations also suggest the person of concern has the means and capacity for lethal violence and shares an ideology or engagement with a violent extremist organization.

The assessment in this case may need to extend beyond a broad risk of general violence or a specific risk of grievance-driven workplace violence. It is unclear at this point whether a workplace-related grievance exists, but if so, an SPI tool focused on workplace-related violence risk (e.g., WAVR-21 V3 or Cawood Assessment Grid [CAG]) may be useful. The presence of extremist ideation, commitments, and rhetoric, however, suggest that a tool focused on risk-related issues in violent extremism (e.g., Terrorism Radicalization Assessment Protocol-18 [TRAP-18]) might help the assessment.
Summary

This Guide started with an overview of violence risk and threat assessment and the distinctions between them, a discussion of the proper qualifications for violence risk assessment (VRA) professionals, and an emphasis on why risk assessment and management work best as integrated functions. In subsequent sections, we described how the VRA field has evolved and how the SPJ approach has emerged as a best practice model. We also provided detailed reviews and case analyses for six SPJ tools that might be useful in C-InT practice. Finally, we discussed how qualified threat assessors might select the best tool for a given case based on the scope and purpose of the assessment, user qualifications, and the quality and characteristics of the tool itself. We concluded this Guide with scenarios in which a C-InT professional might encounter the potential for violence risk.

Comprehensive violence risk and threat assessment should be conducted by professionals with the appropriate credentials, expertise, training, and experience. However, all C-InT professionals should have a basic understanding of existing violence risk and threat assessment standards and the tools and technologies that are available and routinely employed in assessments.
Appendix A: Understanding Reliability and Validity in SPJ Tools

In Section 3: Selecting and Integrating SPJ Tools we briefly introduced the concepts of reliability and validity as they pertain to structured professional judgment (SPJ) tools. The purpose of that discussion was to provide sufficient information to help you navigate the SPJ tool reviews and understand the terminology and statistics represented there. This appendix is designed to provide interested readers with a deeper and more detailed understanding than the earlier discussion.

Reliability

Reliability is a way to express a tool’s precision and consistency. Formally, reliability measures the extent to which a test’s output or score represents the true result, free from random or measurement error. For example, with an intelligence test, reliability would describe how well the intelligence quotient (IQ) score reflects the individual’s true intelligence. If the IQ is reliable, it should register as higher or lower based solely on the person’s intellectual ability, not because some random non-intelligence factors are affecting it.
A tool’s reliability also determines the limits of its validity. A tool can be reliable (consistent) without being valid (measuring what it purports to measure), but it cannot be valid without first being reliable. For example, imagine you are creating a measure of intelligence. You create the following four items for your tool:

1. I enjoy gardening.
2. Gardening is among my favorite activities.
3. If I am feeling down, doing a little gardening usually makes me feel better.
4. I prefer gardening to watching TV.

All four of these items are likely to be consistent and cluster together. If you looked at the associations between pairs of items, the correlations would probably be high. It would have positive indicators for being reliable. However, is this set of items really measuring intelligence? Would you expect high correlations between scores on this tool and IQ scores? Probably not. If it is not measuring what it is supposed to be measuring, then even if the tool is reliable, it is not valid.

When evaluating SPJ tools, the two most common forms of reliability to consider are internal consistency and inter-rater reliability (IRR).

**Internal Consistency**

*Internal consistency* measures how well each of the items (or factors) on a test relates to the other items. For example, imagine we had a violence risk assessment (VRA) tool with three items/factors:

1. History of violence
2. Impulsivity
3. Strong associations with antisocial peers

Factors 1, 2, and 3 were each chosen for our hypothetical risk tool because each is empirically related to violence. If each factor is related to the same outcome, you might also expect those three factors to be related to each other.

To gauge the internal consistency of these three items in measuring violence risk, you might measure the correlations between them. By definition, “correlation” between two items means that as the value of one item goes up or down the value of the other item tends to go up or down in the same way. So, you might look at the correlations between any combination of two items. If you average the correlations among the resulting pairings, this provides one index of the internal consistency of your risk tool.

While you might expect your item pairs to be somewhat consistent with one another, they will probably not be perfectly consistent. Just as the construct of intelligence has multiple facets (e.g., mathematical ability, vocabulary, puzzle solving), the construct of violence risk has multiple facets. When constructs are complex (like violence risk), one might not expect the internal consistency to be as high as when the construct is simple (like vertical jumping ability).
What to Look For

One of the most common measures of internal consistency reliability is **Cronbach’s Alpha (or Coefficient Alpha)**, which is often represented with an α symbol. Coefficient alpha scores range from -1.0 to +1.0, with a higher absolute number representing greater consistency, and a score of 0 representing no consistency.

SPJ tools for violence risk often have α coefficients ranging from the high .70s to mid-upper .80s. Because violence risk is a complex construct, the coefficients do not often get as high as the mid-upper .90s. That does not reflect an inherent weakness in the tools. The more modest alpha coefficients happen because violence risk has many different components.

Inter-Rater Reliability

IRR measures the extent of agreement between two or more different raters when they are assessing the same case based on the same information. This kind of reliability is not typically examined for self-report inventories (i.e., test-takers answer the items for themselves). Rather, it is used when tool items are rated or scored by a designated assessor, as they are with SPJ tools. IRR is an important factor to consider when selecting an SPJ tool.

The measurement of violence risk loses its meaning if all item ratings and risk judgments are highly subjective or vastly different for different assessors. It calls into question whether a given rating represents the “true” presence, absence, or extent of risk of any specific factor. To achieve consistency, each item or factor must be carefully defined in specific, objective terms. If there are “levels” of rating, then each level (e.g., low, moderate, high) must also be carefully defined in a way that distinguishes it from the other levels.

For example, consider the item, “History of serious violence.” If the item name is all the assessor has to work from, then its presence—and the extent of that presence—is largely subjective and open to interpretation. That is one reason why it is not possible to properly use an SPJ tool just by referring to the item names alone. An assessor working in a maximum-security prison may have a very different concept of “serious violence” than someone working in a corporate Employee Assistance Program (EAP). In addition, assessors would need to consider the following:

- What period is covered under “history”?
- If the examinee is being evaluated because of a recent incident of violence, does that incident count as “history”?
- What kind of evidence is needed to “count” an incident (e.g., self-report, arrest, conviction, collateral report)?

If different assessors make different assumptions about these kinds of issues, this creates **unsystematic measurement error**, meaning rating differences may happen because of ambiguity in the measurement, not because of real differences in whether they think the factor is present. To get a reliable tool, we want to minimize random or measurement error. If the term “serious violence”
is defined in very specific behavioral terms, and the period and sourcing (evidence) standard are all specified, then two different assessors—even from very different backgrounds—will be more likely to agree on a judgment about whether that factor is present in a case.

The IRR of an SPJ tool is typically determined by starting with a sample of cases, each of which has a given set of case materials (e.g., records, interviews, etc.). Then, two or more assessors independently review the data (not discussing it among themselves), rate each item, and render a Summary Risk Rating. The level of agreement or disagreement among the different raters is then assessed, which produces a measure of IRR.

**What to Look For**

Intraclass correlation coefficients (ICCs) and Cohen’s Kappa are the statistics most often reported to gauge consistency between different raters of SPJ tools. Values less than 0.5 are considered “Poor,” values between 0.5 and 0.75 are “Fair/Moderate,” those between 0.75 and 0.90 are “Good,” and those greater than 0.90 are “Excellent” (Koo & Li, 2016). ICCs in the .80s are often reported in evidence-based SPJ tools.

**Validity**

Validity represents the extent to which a tool measures what it says it measures. SPJ tools are designed to assess violence risk, so their validity is determined by:

- How well the factors/items cover the major components of violence risk, and
- How strongly the test results are linked to actual violent behavior, other measures of violence risk, or violence-related constructs.

The types of validity pertinent to the content of a tool usually fall into one or more of three categories:

1. **Face Validity**
2. **Content Validity**
3. **Construct validity**

Each type of validity is described below.

**Face Validity**

*Face validity* suggests the content of the tool—that is, the factors and items—generally appear or seem to be related to violence risk. Looking at the content at face value, does it seem to measure risk or violence potential? A history of violence and anger control problems, for example, would have high face validity for violence risk, whereas someone’s favorite ice cream would not.

Face validity is typically not a major selection factor for SPJ tools because the items are generally chosen because of their known statistical associations with potential violence, rather than whether they simply appear to be related to violence risk. Nevertheless, most items included in SPJ tools
would seem logically related to violence potential, especially to users who are familiar with the scientific and professional risk assessment literature.

**Content Validity**

*Content validity* focuses on the subject matter addressed by the tool. Items from SPJ tools mainly assess risk and protective factors. The main concerns for content validity are whether the items included are associated with violence risk, and whether that coverage includes the full range of risk-related factors. If an SPJ tool, for example, claimed to measure violence risk, but only included “clinical” items (e.g., impulsivity, command hallucinations, violence-associated delusions) the content of that tool would be related to violence risk, but would only address one facet of risk. It would not cover all major relevant domains, like social and contextual factors.

If the tool were designed only to measure clinical factors in violence risk, it might have reasonable content validity. But, because violence risk itself is a broader concept, having content related to only one facet would diminish the tool’s overall content validity.

**Construct Validity**

*Construct validity* often has some overlap with face validity and content validity but focuses mostly on whether the tool truly measures the central construct it purports to measure. For SPJ tools, the central construct is violence risk. Therefore, the key construct validity question for SPJ tools is whether the tool’s results or outputs truly reflect or represent the core concepts of risk.

**What to Look For**

Construct, content, and face validity all apply to the scope and purpose of the assessment as well. Some SPJ tools are designed for more general VRA (e.g., HCR-20V3), while other tools are designed for more specific purposes (e.g., SARA-V3) or types of violence (e.g., TRAP-18).

Users should ensure that the main factors and domains pertinent to their assessments are covered in the SPJ tools, and that the tools do not also include items without well-established empirical or clinical/professional associations with the risk being assessed. Users should also survey items on the SPJ tool to confirm that they include dynamic factors, not just static (historical or demographic) ones, because dynamic factors will be critical in risk management planning.

**Criterion-Related Validity**

There is a fourth type of validity, called *criterion-related validity*, that addresses whether test results are linked to actual violent behavior, other measures of violence risk, or other violence-related constructs. Criterion-related validity is probably the most important type of validity for assessing SPJ tools. It links the tool’s output with one or more external

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**Content Validity**: The measure of how well a tool’s items represent the entire domain the tool seeks to measure.

**Construct Validity**: The measure of how well a tool measures the construct (e.g., elements, ideas, behaviors) it claims to measure.

**Criterion-Related Validity**: The measure of how well the scores/results from a tool relate to a specified outcome (e.g., violence in the community) or another tool (e.g., different risk assessment tool).
criteria. The tool results and external criterion can both be measured at the same time (concurrent validity), or the tool’s measure could precede the criterion measure (predictive validity).

Two types of concurrent criterion-related validity studies warrant a mention here. The first kind of study compares results of the SPJ tool being evaluated to other VRA tools or violence-related concepts (e.g., psychopathy). If results from the tool being evaluated are similar to results from other well-validated tools, the validity of the evaluated tool is supported as well.

In the second type of concurrent validity, researchers select a sample of individuals who are already known to be violent or non-violent and apply the SPJ tool to them. This kind of study is sometimes called “postdictive.” Raters receive case information from both subgroups and must use the SPJ tool to assess the case. In some cases, the raters may know whether the case examines the violent or non-violent person because their history of violence is part of the SPJ assessment.

On the other hand, the subjects’ violent versus non-violent status may be withheld from the records so that knowledge does not bias raters’ assessment ratings. In postdictive studies, because the outcome criterion is already known when the SPJ tool is applied, they are not predictive, but they can provide some information on the SPJ tool’s ability to distinguish between violent and non-violent cases.

True predictive validity studies are the most rigorous tests of criterion-related validity for SPJ tools. In a predictive validity study, SPJ tools are applied to a sample of subjects at one given point in time (called the baseline). The sample is then followed for a set period (e.g., 3 months, 6 months, 1 year). At the end of the study period, data—such as criminal justice and behavioral health records, subject and collateral interviews—are collected to assess whether each person in the sample engaged in violent behavior during the follow-up period. Results are then analyzed to see how well the baseline measures “predicted” the violent outcomes on follow-up.

One of the most popular approaches for evaluating the predictive validity of SPJ tools is Receiver Operating Characteristic (ROC) analysis. It measures how well the tool performs in distinguishing between those with and without a violent outcome.

Researchers will examine the predictive utility of the tool itself, as well as the Summary Risk Rating (professional judgment of risk). Although SPJ tools typically do not use “scores” (or even numbers) in applied settings, Absent/Present can be converted to 0/1 and Low/Moderate/High can be converted 0/1/2 for traditional statistical analyses. Though ROC was discussed briefly in Section 3: Selecting and Integrating SPJ Tools, we will provide a bit more detail here.

Some measures of predictive validity vary according to how frequently violent outcomes occur. If, for example, violence rarely occurred in the sample (e.g., 10%), it is more difficult for the tool to demonstrate high predictive accuracy than if half the sample was violent and the other half was not. That proportion of the overall sample who had a violent outcome is referred to as the “base rate.” One advantage of ROC analysis is that it is not as sensitive to fluctuations among samples with different base rates of violence. It can also assess predictive accuracy across the entire range of cutoff scores. Because SPJ tools do not use specified cutoff scores, the ROC approach fits well with the model.

Results from ROC analyses are reported as the Area Under the Curve (AUC). The AUC number essentially represents the likelihood that a person randomly drawn from the violent group would have a higher score on the tool than a person randomly drawn from the non-violent group. An AUC
of .65 roughly means there is about a 65% probability that any given subject from the sample who was violent would have a higher score than a subject that was not.

AUCs can range from .50, meaning that the tool can only distinguish between violent and non-violent outcomes at levels no better than chance (i.e., flipping a coin) up to 1.0, meaning the tool distinguishes perfectly between the two groups. Figure 7 (adapted from Zou, O’Malley, & Mauri, 2007) provides a visual depiction of how the AUCs are typically presented. The straight line between the lower left corner and the upper right corner indicates a .50 or chance level of accuracy. The space above that .50 line indicates the tool’s ability improve prediction beyond chance levels. So, the shaded area shows the actual AUC.

**Figure 7**
*Example of an AUC Diagram from ROC analysis*

Typically for SPJ tools, significant AUCs fall between the low .60s and the mid .70s, such that some researchers have concluded that: “After almost five decades of developing risk prediction tools, the evidence increasingly suggests that the ceiling of predictive efficacy may have been reached with the available technology” (Yang, Wong, & Coid, 2010, p. 759).
## Appendix B: Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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</thead>
<tbody>
<tr>
<td>Actuarial Assessment</td>
<td>A statistical assessment that combines a specified set of variables to estimate the likelihood of an outcome in a particular population, over a specific period</td>
</tr>
<tr>
<td>Anamnestic Approach</td>
<td>A risk assessment approach involving the detailed analysis of a subject’s past violent or concerning behavior</td>
</tr>
<tr>
<td>Approacher</td>
<td>An individual who attempts to make physical contact with a target; this term is used to distinguish attackers from those who make threats against a target but never approach</td>
</tr>
<tr>
<td>Area Under the Curve (AUC)</td>
<td>A number from 0 to 1 that represents the likelihood that a person randomly drawn from a violent group will have a higher score than a person randomly drawn from a non-violent group</td>
</tr>
<tr>
<td>Case Formulation</td>
<td>A narrative presentation of a risk assessment case that tells a clear story and explains gathered evidence in plain language; case formulations present a working hypothesis for why a case has developed as it has</td>
</tr>
<tr>
<td>Civil Clinical Sample</td>
<td>A sample comprised of individuals who have a psychiatric diagnosis but are in the community and not involved with the judicial system</td>
</tr>
<tr>
<td>Concurrent Validity</td>
<td>The extent to which a tool relates to other scales that measure the same construct and have already been validated</td>
</tr>
<tr>
<td>Construct Validity</td>
<td>The measure of how well a tool measures the construct (e.g., elements, ideas, behaviors) it claims to measure</td>
</tr>
<tr>
<td>Content Validity</td>
<td>The measure of how well a tool's items represent the entire domain the tool seeks to measure</td>
</tr>
<tr>
<td>Counter-Insider Threat (C-InT) Program</td>
<td>The effort to prevent, detect, and mitigate the threat an insider may pose to their organization’s facilities, personnel, or resources</td>
</tr>
<tr>
<td>C-InT Hub</td>
<td>A team of multidisciplinary professionals who gather and review information about potential insider threat cases in order to develop mitigation strategies</td>
</tr>
<tr>
<td>Criterion-Related Validity</td>
<td>The measure of how well the scores/results from a tool relate to a specified outcome (e.g., violence in the community) or another tool (e.g., different risk assessment tool)</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td><strong>Cronbach’s/Coefficient Alpha (α)</strong></td>
<td>The most common measure of scale reliability/internal consistency, or how closely related a set of items are as a group; as the average inter-item correlation increases, Cronbach’s alpha increases (holding the number of items constant)</td>
</tr>
<tr>
<td><strong>Destabilizers</strong></td>
<td>Factors that disrupt, disturb, or disorganize the decision-making process, making it difficult for perpetrators to accurately perceive and appreciate situational cues, consider alternatives, or weigh potential costs and benefits</td>
</tr>
<tr>
<td><strong>Discretionary Approach</strong></td>
<td>A risk assessment approach that integrates human judgment in the final decision</td>
</tr>
<tr>
<td><strong>Disinhibitors</strong></td>
<td>Factors that decrease the likelihood that perpetrators will inhibit or self-censor thoughts of violence as a potential response in a situation or decrease the perceived potential costs or negative consequences of violence</td>
</tr>
<tr>
<td><strong>Distal Characteristics</strong></td>
<td>Characteristics that represent an underlying or indirect risk for violence</td>
</tr>
<tr>
<td><strong>Dysphoria</strong></td>
<td>A psychological state of discomfort, unease, unhappiness, or dissatisfaction that may accompany mental health conditions such as depression</td>
</tr>
<tr>
<td><strong>Emotional/Reactive/Impulsive Violence</strong></td>
<td>Violence that occurs in response to a real or perceived provocation</td>
</tr>
<tr>
<td><strong>Evidence-Based Tools</strong></td>
<td>Tools built upon the best available empirical research and validated by peer-reviewed scientific studies</td>
</tr>
<tr>
<td><strong>Face Validity</strong></td>
<td>The measure of whether a tool’s items have a logical relationship to what they are measuring</td>
</tr>
<tr>
<td><strong>Forensic Clinical Sample</strong></td>
<td>A sample comprised of individuals who have a psychiatric diagnosis and are involved with the judicial system</td>
</tr>
<tr>
<td><strong>General Violence</strong></td>
<td>Any type of aggression towards any person, without regard to nature/type, seriousness, or potential imminence</td>
</tr>
<tr>
<td><strong>Idiographic Factors</strong></td>
<td>Factors that apply to a specific individual; these apply to a subject’s case alone</td>
</tr>
<tr>
<td><strong>Insider Threat (InT)</strong></td>
<td>The threat an insider may pose to their organization’s facilities, personnel, or resources</td>
</tr>
<tr>
<td><strong>Instrumental Violence</strong></td>
<td>Violence that is carried out to attain a specific goal</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Internal Consistency</td>
<td>The measure of how well each item/factor on a test relates to the others</td>
</tr>
<tr>
<td>Inter-Rater Reliability (IRR)</td>
<td>The measure of agreement, or consistency, between two or more different raters assessing the same case based on the same information</td>
</tr>
<tr>
<td>Intraclass Correlation Coefficients (ICCs) and Cohen’s Kappa</td>
<td>The metrics used to assess consistency among different raters</td>
</tr>
<tr>
<td>Nomothetic Factors</td>
<td>Factors that apply to and differentiate between different groups of people; these are derived from research samples</td>
</tr>
<tr>
<td>Non-Discretionary/Actuarial Approach</td>
<td>A risk assessment approach that uses formulas and/or algorithms to come to a decision</td>
</tr>
<tr>
<td>Postdictive Validity</td>
<td>The measure of how accurately a tool can predict the value of a criterion measure taken previously in time</td>
</tr>
<tr>
<td>Predictive Validity</td>
<td>The measure of how accurately a tool predicts future violent behavior</td>
</tr>
<tr>
<td>Protective Factors</td>
<td>Factors that may decrease a subject’s potential for violence</td>
</tr>
<tr>
<td>Proximal Warning Behaviors</td>
<td>Behaviors that represent an immediate or direct risk for violence</td>
</tr>
<tr>
<td>Psychological Traits</td>
<td>An individual’s characteristic patterns of thoughts, feelings, and behaviors</td>
</tr>
<tr>
<td>Receiver Operating Characteristic (ROC)</td>
<td>A statistical measure of a test’s ability to accurately predict outcomes</td>
</tr>
<tr>
<td>Relevant Factors</td>
<td>Factors that affect a subject’s behavioral control, decision-making about violence, or engagement with risk reduction efforts</td>
</tr>
<tr>
<td>Reliability</td>
<td>The measure of a tool’s precision and consistency</td>
</tr>
<tr>
<td>Risk Factors</td>
<td>Factors that may increase a subject’s potential for violence</td>
</tr>
<tr>
<td>Risk-Need-Responsivity (RNR) Model</td>
<td>A model commonly used with violent offenders that suggests risk management strategies should be tailored to each offender based on their level of risk</td>
</tr>
<tr>
<td>Scenario Plan</td>
<td>A descriptive forecast of possible events that could unfold due to the known risk factors in a case</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td><strong>Scenario Planning</strong></td>
<td>A technique laying out plausible outcomes, or scenarios, for a case to inform more effective risk management planning</td>
</tr>
<tr>
<td><strong>Summary Risk Rating</strong></td>
<td>A measurable rating for the nature and level of concern about violence in a case; the final judgment of a rater about the likelihood of violence in a case</td>
</tr>
<tr>
<td><strong>Targeted Violence</strong></td>
<td>Violence threatened or carried out by an identifiable perpetrator against a specific individual or group</td>
</tr>
<tr>
<td><strong>Terrorism</strong></td>
<td>Intentional and purposeful acts of targeted violence, usually driven by religious or political ideology, with a specific audience in mind</td>
</tr>
<tr>
<td><strong>Threat Assessment (TA)</strong></td>
<td>The systematic, evidence-based assessment of multiple sources of information regarding a subject’s thinking and behavioral patterns to determine whether, and to what extent, that subject is moving toward a specific, targeted attack; the purpose is to inform a threat management plan to disrupt a subject’s forward motion toward a specific, targeted attack</td>
</tr>
<tr>
<td><strong>Unstructured Approach</strong></td>
<td>An unsystematic, non-standardized risk assessment approach that typically produces impressionistic (and often inaccurate) conclusions</td>
</tr>
<tr>
<td><strong>Unsystematic Measurement Error</strong></td>
<td>A difference in ratings due to ambiguous measurement rather than real differences in whether a factor is present</td>
</tr>
<tr>
<td><strong>Validity</strong></td>
<td>How well a tool measures what it says it measures</td>
</tr>
<tr>
<td><strong>Violence Risk Assessment (VRA)</strong></td>
<td>The systematic consideration of static and dynamic risk and protective factors within a subject’s situation and context to assess the likelihood of general violence or a specific type of violence (e.g., sexual violence, intimate partner violence); the purpose is to inform a risk management plan to mitigate a subject’s overall risk for general violence</td>
</tr>
<tr>
<td><strong>Violence Risk Triage</strong></td>
<td>A screening process that compiles, reviews, interprets, and analyzes multiple sets of data to determine whether there is a basis for concern about violence, and whether that concern requires immediate intervention</td>
</tr>
<tr>
<td><strong>Workplace Violence</strong></td>
<td>The act or threat of violence, ranging from verbal abuse to physical assaults and directed toward persons in the workplace or on duty</td>
</tr>
</tbody>
</table>
## Appendix C: Acronyms and Abbreviations

<table>
<thead>
<tr>
<th>Acronym/Abbrev.</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASIS</td>
<td>American Society for Industrial Security</td>
</tr>
<tr>
<td>ATAP</td>
<td>Association of Threat Assessment Professionals</td>
</tr>
<tr>
<td>AUC</td>
<td>Area Under the Curve</td>
</tr>
<tr>
<td>B-SAFER</td>
<td>Brief Spousal Assault Form for the Evaluation of Risk</td>
</tr>
<tr>
<td>B-SAFER-V3</td>
<td>Brief Spousal Assault Form for the Evaluation of Risk, Version 3</td>
</tr>
<tr>
<td>CAG</td>
<td>Cawood Assessment Grid</td>
</tr>
<tr>
<td>C-InT</td>
<td>Counter-Insider Threat</td>
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<tr>
<td>CTM</td>
<td>Certified Threat Manager</td>
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<tr>
<td>DHRA</td>
<td>Defense Human Resources Activity</td>
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<tr>
<td>DoD</td>
<td>Department of Defense</td>
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<tr>
<td>EAP</td>
<td>Employee Assistance Program</td>
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<tr>
<td>ECSP</td>
<td>Exceptional Case Study Project</td>
</tr>
<tr>
<td>EO</td>
<td>Executive Order</td>
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<tr>
<td>FBI</td>
<td>Federal Bureau of Investigation</td>
</tr>
<tr>
<td>FSO</td>
<td>Facility Security Officer</td>
</tr>
<tr>
<td>GPCSL</td>
<td>General Personality and Cognitive Social Learning</td>
</tr>
<tr>
<td>HCR-20</td>
<td>Historical Clinical Risk Management-20</td>
</tr>
<tr>
<td>HCR-20\textsuperscript{v2}</td>
<td>Historical Clinical Risk Management-20, Version 2</td>
</tr>
<tr>
<td>HCR-20\textsuperscript{v3}</td>
<td>Historical Clinical Risk Management-20, Version 3</td>
</tr>
<tr>
<td>HR</td>
<td>Human Resources</td>
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<tr>
<td>Acronym/Abbrev.</td>
<td>Definition</td>
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<tr>
<td>ICC</td>
<td>Intraclass Correlation Coefficients</td>
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<tr>
<td>InT</td>
<td>Insider Threat</td>
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<tr>
<td>IPV</td>
<td>Intimate Partner Violence</td>
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<tr>
<td>IRR</td>
<td>Inter-Rater Reliability</td>
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<td>IRS</td>
<td>Internal Revenue Service</td>
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<tr>
<td>LCDR</td>
<td>Lieutenant Commander</td>
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<tr>
<td>LCSW</td>
<td>Licensed Clinical Social Worker</td>
</tr>
<tr>
<td>MHS</td>
<td>Multi-Health Systems</td>
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<tr>
<td>MMPI-2-RF</td>
<td>Minnesota Multiphasic Personality Inventory-2-Restructured Form</td>
</tr>
<tr>
<td>NAVSEA</td>
<td>Naval Sea Systems Command</td>
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<tr>
<td>NITTF</td>
<td>National Insider Threat Task Force</td>
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<tr>
<td>ODNI</td>
<td>Office of the Director of National Intelligence</td>
</tr>
<tr>
<td>OPA</td>
<td>Office of People Analytics</td>
</tr>
<tr>
<td>OUSD (P&amp;R)</td>
<td>Office of the Under Secretary of Defense (Personnel and Readiness)</td>
</tr>
<tr>
<td>PERSEREC</td>
<td>Defense Personnel and Security Research Center</td>
</tr>
<tr>
<td>RAGE-V</td>
<td>Risk Assessment Guideline Elements for Violence</td>
</tr>
<tr>
<td>RATED</td>
<td>Risk Assessment Tools Evaluation Directory</td>
</tr>
<tr>
<td>RNR</td>
<td>Risk-Needs-Responsivity</td>
</tr>
<tr>
<td>ROC</td>
<td>Receiver Operating Characteristic</td>
</tr>
<tr>
<td>ROTC</td>
<td>Reserve Officers’ Training Corps</td>
</tr>
<tr>
<td>SAM</td>
<td>Stalking Assessment and Management</td>
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<tr>
<td>SARA</td>
<td>Spousal Assault Risk Assessment Guide</td>
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<td>SCI</td>
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<tr>
<td>Acronym/Abbrev.</td>
<td>Definition</td>
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<td>----------------</td>
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<td>Structured Professional Judgment</td>
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Introduction


Section 1: Overview of Violence Risk Assessment and Threat Assessment


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### Section 2: The Evolution of Violence Risk Assessment and the Emergence of Threat Assessment


Section 3: Selecting and Integrating SPJ Tools


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**Section 4: SPJ Tools for Assessing Violence Risk in Adults**

**HCR-20V3**


**START**


**SARA-V3**


**WAVR-21 V3**


**TRAP-18**


**B-SAFER**


**Conclusion**


Appendix A: Understanding Reliability and Validity in SPJ Tools

