RISK FACTORS

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BACKGROUND

2014 Master's degree in Clinical/Community Mental Health

Western Illinois University

- *Internship at Iowa Medical and Classification Center (IMCC)*

2021 PhD in Clinical Psychology

Fielding Graduate University

- *Internship at the Federal Medical Center-Rochester*

Clinical experience-Mental health treatment/assessment

Prison settings (Moose Lake, Lino Lakes, Stillwater)

Community mental health

Private practice

Sex offense specific treatment and evaluations

MN-DOC Risk Assessment/Community Notification Unit

Minnesota Sex Offender Treatment Program (SOTP)-Lino Lakes

Alpha Emergence Behavioral Health

Vantage Point Psychological Consultants

AGENDA

- What is the “referral question”
- Defining what are risk factors?
- Specific approaches to assessing risk factors
    - Actuarial
    - Structured Professional Judgement
- Similarities and differences in the approach used to assess risk factors
- Protective factors to consider
- Drawing conclusions, offering recommendations, and other unknown factors to consider

WHAT IS THE REFERRAL QUESTION?

The instruments and measures used in a risk assessment are guided by the question that needs to be answered

- General criminality, physical violence, domestic violence, contact sexual violence, non-contact sexual violence

Minnesota Statute § 243.166, Subd. 1b: Any person charged with and convicted of specific offenses (e.g., Criminal Sexual Conduct), or in some instances when charged with an offense (i.e., False Imprisonment/Kidnapping) that arose from the same set of circumstances as a conviction for another offense, the individual is required to register as a predatory offender.

Why does this matter?

- Is the evaluator assessing risk of sexual recidivism?

  MnSOST-4, STATIC99-R, Sexual Violent Risk-20 (SVR-20)

- Is the evaluator assessing risk of future violence specific to a particular type of offense (i.e., False Imprisonment)?

  MnSTARR 3.0, Historical, Clinical, Risk-20 (HCR-20)

Commonly conceptualized referral question:

- What is the public risk posed by the incarcerated person who will be released from confinement? (ECRC Risk Levels)
- What community notification risk level should be assigned based on the assessment of identified risk factors? (ECRC Risk Levels)
- Who should know about this individual and how broad should that notification be? (ECRC Risk Levels)
- What is this individual's risk after being in the community for a period of time and having complied with the conditions of his release? (DRA Reassessments)

WHAT IS AN EVALUATOR ASSESSING?

Risk: The probability that a known and sanctioned [sexual offender/predatory offender] will reoffend within some time

- Risk is inherent in the individual and results from the presence and dynamic interaction of individual characteristics that increase (risk factors) or decrease (protective factors) the likelihood of the outcome behavior (sexual offense) some time in the future
  - *Characteristics, behaviors, attitudes, or experiences that increase the likelihood an individual would reoffend sexually/violently*
- There is no one risk factor that is strongly related to recidivism, and a range of risk factors should be considered

Risk factors include both static (unchanging) and dynamic (changeable) aspects of an individual

- *Example: Criminal history (static) vs. distorted attitudes about sex/attitudes supportive of violence*

MULTI-DIMENSIONAL CONCEPTUAL FRAMEWORK

Two Dimensions (Doren, 2004)

- Sexual deviance
- Psychopathy/general criminality

Three Factors (Doren & Thornton, 2002)

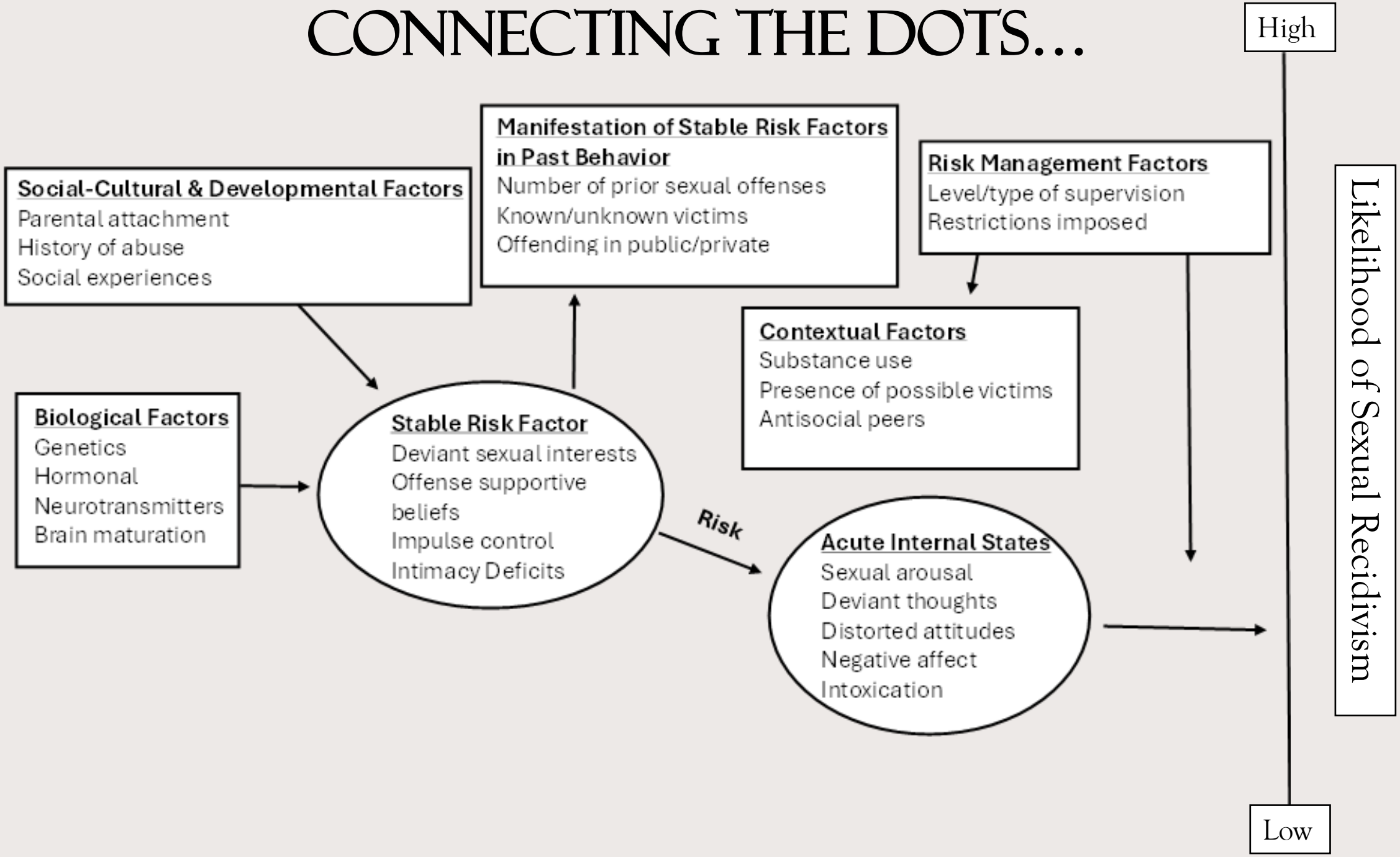
- General criminality
- Sexual deviance
- Detachment (poor interpersonal competence)

Five Factor Model (Beech & Ward, 2004)

- Psychosocial adjustment
- Sexual self-regulation
- Interpersonal functioning
- Self-management (impulsivity/hostility)
- Contextual factor (e.g., substance use)

	Static99R	MnSOST-4	Stable-2007	SVR-20
	Age at Release from Index Offense	Age at Release to the Community		
Detachment/Interpersonal	Cohabitation with Partner	Marital Status	Capacity for relational stability	Relationship problems
General Criminality	• Prior non-sexual violence • Prior sentencing dates	• Total violent offenses • Felony offenses		Nonsexual offending
		Release Violator	Cooperation on supervision	Negative attitudes towards supervision
Sexual Deviation	Prior sexual offenses	Total predatory offenses		• Chronic sexual offending • Escalation of sexual offending
	• Any noncontact offenses • Any unrelated victims • Any stranger victims • Any male victims	• Stranger victim • Public location • Multiple age groups • Male victim	• Emotional identification with children • Sexual preoccupation • Sex as coping	• Sexual deviation • Diverse sexual offending • Sexual health problems

CONNECTING THE DOTS…



STATIC VS. DYNAMIC RISK

Static Risk Factors

- Non-changeable life events that relate to risk for sexual recidivism
- Factors may include history of sexual offenses, having offended against a male child, or stranger victim

Example: Bob is a 23-years-old, single male. He was convicted of sexually harmful behaviors towards a female stranger. He violated conditions of his supervision, has prior legal involvement as a juvenile. Bob was evaluated as having Above Average Risk of future sexual recidivism.

Dynamic Risk Factors

- Factors that can change over time and are informed by research that relates to lower or higher rates of recidivism
- Factors may include personality characteristics, skill deficits, impulsivity, sexual preference for children

Example: Since Bob's release from prison, he participated in sex offense treatment, learned about factors related to his prior legal involvement and sexual offense history, has applied those skills in living a more prosocial life, found stable employment, and has been compliant with his community supervision over the past five years. Bob's dynamic risks were assessed after completing treatment and included a Low density of treatment needs and estimated risk that was in the Average risk category.

SEXUAL OFFENSE RECIDIVISM

META-ANALYSES

- Hanson and Morton-Bourgon (2004, 2005): meta-analysis updated from prior research and expanded to factors that could be addressed in risk assessment and factors that were controversial in earlier reviews (denial, victim injury).
- Mann et al., (2010): identified various empirically supported risk factors including general self-regulation problems, impulsivity, recklessness, employment instability, poor problem-solving, *offense supportive attitudes***, *compliance with supervision***

Key: **strongest single predictors

Predictor	Sexual	Violent-Nonsexual	Violent	Any
Sexual Deviance	.30 (±.04)	-.05 (±.17)	.19 (± .08)	.04 (± .04)
Antisocial Orientation	.23 (± .04)	.51 (± .07)	.54 (±.05)	.52 (± .04)
Sexual Attitudes	.16 (± .12)	.17 (± .22)	.14 (±.11)	.24 (± .10)
Intimacy Deficits	.15 (± .11)	.12 (± .21)	.12 (± .12)	.10 (± .10)
Adverse Childhood Environment	.09 (±.08)	-.02 (± .17)	.14 (± .08)	.11 (±.07)
General Psychological Problems	.02 (±.10)	.21 (± .14)	.00 (± .10)	-.04 (± .11)

APPROACHES TO RISK ASSESSMENT

Unstructured Clinical Judgement

The evaluator relies on personal experience, intuition, and subjective impressions rather than standardized, evidence-based tools to assess risk or make decisions (Hockenhull, McGuire, et al., 2013)

- Relies on individual expertise which can vary and result in low inter-rater reliability
- Research has shown this approach is inferior to actuarial or structured professional judgement methods for predicting outcomes

Actuarial Approach

Formal method using an equation or formula to arrive at a probability or expected value, or outcome (Grove & Meehl, 1996; Heilbrun et al., 2021)

- Risk factors are derived from empirical research that includes single datasets and large meta-analysis
- Uses predictor variables quantified through classification (e.g., gender) or rated with a high degree of reliability (e.g., criminal offense history)
- Majority of items are historical factors

Structured Professional Judgement

Specified risk (and protective) factors which are derived from a broad review of the literature rather than from analysis of a specific dataset

- Factors are operationalized so their applicability can be coded reliably (no, possible, yes)
- Completed through rating all specified factors after interviewing examinee and reviewing records
- Uses both static (unchanging) and dynamic (changing) risk factors

RISK ASSESSMENT: SIMILARITIES/DIFFERENCES

Commonalities

- Variables have been selected given the relationship to the outcome (actuarial tools draw on single dataset/meta-analyses; SPJ include broad empirical support in literature)
- Specify the variables to be considered
- Require those variable be well-operationalized so they can be coded and rated reliably

Differences

- Actuarial combine risk factors into a score; SPJ do not combine risk factors numerically in a predetermined fashion
- SPJ tools allow professionals to make summary risk estimates that indicate low, moderate, or high risk for violence/sexual offense
- SPJ can consider idiosyncratic, case-specific factors that are not included in actuarial instruments

RISK ASSESSMENT: PROS & CONS

ACTUARIALS

STRENGTHS

- Removal of human judgment biases from the decision-making process
- The individual is appraised using the same criteria regardless of who conducts the evaluation
- Research has found this approach is more accurate than clinical judgment with increased accuracy for predictions of violent or criminal behavior

WEAKNESSES

- Rely heavily on static, historical risk factors that are not adjusted for context or population differences
- Absence in identifying interventions or developing management plans

STRUCTURED PROFESSIONAL JUDGEMENT

STRENGTHS

- Consideration of the relevance of each risk factor to the individual case, not merely its presence
- Includes dynamic risk factors that change over time and can be targeted in treatment.
- Research has continued to support a moderate-to-strong ability to differentiate between recidivists and non-recidivists

WEAKNESSES

- Ambiguity around how some may identify the relevance of a factor
- Time consuming in documenting and justifying how a factor is present/relevant

WHAT IS CONTRIBUTING TO DESISTANCE?

(HANSON ET AL., 2018)

Desistance in sexual offending: Risk for a new sexual offense that is no different than the risk of a spontaneous sexual offense among individuals with no prior sexual offense history but have a history of nonsexual crime (less than 2% for sexual recidivism after 5 years)

- Up to half of adult males who have been convicted of a sexual offense and assessed as having both high static and dynamic risk do not sexually reoffend, even when followed up for more than 20 years
- Those who do sexually reoffend are most likely within the first five years following release

Factors affecting sexual recidivism (Thornton, 2016)

Acute factors: Change rapidly and are only predictive in the short time (e.g., sexual preoccupation, victim access, hostility, substance use)

Long-term vulnerabilities: Enduring traits that are slow to change and reoccur through a person's life (i.e., sexual interests, distorted attitudes, relational style, self-management)

Dynamic protective factors: Regulation of LTV or replacement with stable healthier ways of functioning

PROTECTIVE FACTORS

- Factors that decrease the likelihood of a negative outcome from happening
- Any characteristic of a person, their environment, or situation which reduces risk of future offending
  - *Static factors (intelligence, childhood attachment)*
  - *Dynamic factors (coping skills, social network)*
- Reduce re-offense risk irrespective of risk factors
- Exist on a continuum with risk factors

...Continuum of Risk and Protective Factors...

Risk Factor

a) Single, never married, never cohabitated with partner, hostility towards women

b) Unemployment, lack of stable employment in the community

c) High sex drive, using sex as coping

d) Antisocial attitudes, noncompliance on supervision

Protective Factor:

a) Married, presence of intimate relationship

b) Stable work history

c) Sexual self-regulation

d) Positive attitudes towards authority, cooperation on supervision

RESEARCH ON PROTECTIVE FACTORS

NOLEN ET AL. (2023)

- 210 adult males convicted of a sexual offense against a child in New Zealand
- Average Static-99R scores
- Average follow-up of 12.24

SAPROF-SO scores inversely predicted sexual recidivism (AUC = .81)

CARR ET AL. (2025)

- 170 men convicted of at least one sexual offense, civilly committed under SVP
- Static-99R score in the above average or well-above average
- SAPROF-SO Total: Higher scores associated with participants success on supervised release

Best predicters for success on supervised release:

- *Self-control (sexual offense AUC = .77)*
- *Coping (AUC = .73)*
- *Prosocial sexual identity (AUC = .64)*

Adaptive sexuality (sexual self-regulation, prosocial sexual interests, prosocial sexual identity, intimate relationships): Discriminated between men who revoked for sexual offending and/or behaviors aligned with prior sexual offense

DRAWING CONCLUSIONS, OFFERING RECOMMENDATIONS, AND OTHER UNKNOWN FACTORS TO CONSIDER

- Static-99R does not address all relevant risk factors for sexual offenders.
  - *Prudent evaluator will always consider other external factors (dynamic/changeable) risk factors that may increase risk in either direction.*
- What are the results from the MnSOST-4, Static99-R?
- How has the evaluee/incarcerated person adjusted to incarceration?
  - *Involvement in positive programming, disciplinary infraction?*
- Depending on the type of evaluation, review of special concerns/mitigation circumstances should be considered

Example: Mr. Risk

MnSOST-4: 1.85 (low risk)

Static99-R: 3 (average risk)

SVR-20, V2: High

SAPROF-SO: Adaptive Sexuality Scale (low-moderate protection)

QUESTIONS?

Feel free to contact me with additional questions!

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