# Proposal for a Community Based Perpetrator, Primary Caregiver and Child Victim Sexual Risk Assessment Tool – The Sexual Allegation Form Evaluating Risk (SAFER)

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Child sexual abuse (CSA) is a pervasive and underreported issue (Stoltenborgh *et al.* 2015). It can impact on every area of a child's development including short and long term emotional, cognitive, behavioural, physical, social and sexual difficulties (NSPCC, 2015). Given the disparity between the prevalence of CSA, underreported incidents and low rate of successful conviction (Lepper, 2012) more effective methods of assessment are required.

CSA is often brought to the attention of protective agencies via allegations, behavioural indicators (e.g. sexualised behaviour) or professional involvement for other concerns (e.g. neglect). Here risk assessments are made based on clinical / professional judgement. Although actuarial tools assessing sexual risk exist the majority are designed, used and validated on convicted perpetrators within institutions and are based on factors relating to recidivism. There is growing evidence that a large majority of sex offences are committed by individuals without prior convictions (Duwe, 2012; MOJ, 2011). Such issues invalidate existing tools when applied to first time offenders in the community. A risk assessment tool was therefore proposed to assess risk in the community from perpetrators of sexual abuse where credible allegations have been made. The tool was intended to be an empirically based framework for use alongside professional judgement. Risk of CSA is not merely generated from a perpetrator but through cumulative dynamics

between key individuals and the surrounding context, often mediated by protective factors. Unlike individual focused tools the Sexual Allegation Form Evaluating Risk (SAFER) was constructed to collectively assess risks and strengths across perpetrator, child victim (CV) and primary caregiver (PC) here termed the "primary triad".

The development of SAFER began with literature reviews on theories of sexual offending and assessment tools and frameworks for evaluating risk and protective factors. The tool was then constructed and tested via a three stage process.

*Theoretical base*

Beech and Ward's (2004) aetiological model of risk (onto which key theories of sexual offending can be mapped) was identified as a strong theoretical foundation. This model was restructured to reflect Bronfenbrenner's (1979) ecological framework which proposes a series of subsystems interacting around an individual for development and growth. It was suggested that risk (and strengths) could be similarly seen as an emergent property from within an individual, beginning with development factors, emanating out into static, then stable dynamic and then acute dynamic factors. This emergent level of risk / vulnerability was applied to each individual in the primary triad and the SAFER tool sought to define and assess the combined risk or "overlap" of all three individuals' dynamic factors. It is plausible that strength items could also be placed into static, stable and acute categories however the research base was limited and so these items were considered individually.

*Item Selection*

Items were selected from a combination of existing actuarial tools, meta-analysis, population specific research and current frameworks.

*Perpetrator Items:* Static items were selected from validated actuarial tools. Dynamic items were drawn from meta-analysis and studies with less validation but more fitting to the population (e.g. Duwe, 2012). Strength items were mainly from the SAPROF tool (De Vogel *et al.* 2009).

*PC Items:* Many risk items were from a framework by Calder *et al.* (2001). Limited research was identified for strengths however one key document (Keeble, 1993) outlined considerations for working with non-abusing partners. Literature reviews provided support for items and suggested others.

*CV Items:* Risk items were identified from the literature review and the FACS tool (Friendship & Thornton, 2002) For strengths items studies included Marriott *et al.* 2014 and Domhardt *et al.* 2014 and items from the AIM2 tool (Griffin *et al.* 2008).

Items were collapsed into static, stable and acute domains.

**Table 1:** Primary triad SAFER domains

| PERPETRATOR | PRIMARY CARER | CHILD VICTIM |
|---|---|---|
| **RISKS** | | |
| *STATIC* | | |
| Age | - | Age |
| - | - | Gender |
| Previous allegations | - | - |
| Previous convictions | Previous victimization | Previous abuse |
| *STABLE DYNAMIC* | | |
| Emotional functioning | Emotional functioning | Emotional functioning |
| Sexual preoccupation | Capacity around incident | Capacity around incident |
| Cognitive distortions | Cognitive distortions | - |
| Intimacy deficits | Relationship to perpetrator | Relationship to perpetrator |
| - | Relationship with child | - |
| Self-management | Potential to engage | - |
| Social functioning | Social network | Social network |
| *ACUTE DYNAMIC* | | |
| Escalators of risk | Home dynamics | Vulnerably |
| **STRENGTHS** | | |
| Goal directed | Independence | Learning |
| Intimacy related | Responsivity to child | - |
| Inner resources | Inner resources | Inner resources |
| Treatment based | - | - |
| Potential to engage | Cooperation | - |
| Social network | Social network | Social network |

*Scoring the tool*

In risk assessment standards have been suggested that an item needs at least three separate studies which when meta-analysed show association to lower rates of recidivism for it to be considered “robust” (De Vogel et al., 2009; Mann et al. 2010). Scores were allocated to reflect the amount and strength of evidence base for each item. Items with “robust” empirical support could obtain scores of 0 or 6 for absent / present and 0 / 4 / 6 for items that required a graded response (e.g. not present / suspected / present). Items with fewer research studies scored 0 / 4 or 0 / 2 / 4 for graded items. Items based on theory alone scored 0 / 2 or 0 / 1 / 2. An example within the Perpetrator stable dynamic domain is provided in Table 2.

**Table 2:** Scoring example for perpetrator item

| *STABLE DYNAMIC* | |
|---|---|
| EMOTIONAL FUNCTIONING | |
| 1. Self-regulation difficulties (ability to self-monitor / inhibit impulsive decisions) | 0 / 4 / 6 |

As this was the first trial cut off scores were not assigned, instead percentages were calculated to present total risk and strength profiles.

*Testing*

The tool was evaluated through a three stage process using practitioners from a specialist intervention and assessment service.

1) Scoring a hypothetical case

2) Scoring a historical case

3) Case study - scored with results compared to clinical assessment report and a fact finding hearing

**Results**

Results of inter-rater agreement indicated the highest levels of agreement across risk items and items within the PC domains. Agreement overall did not exceed 60% however the tool was able to capture the general levels of risk and strength for comparison. Qualitative feedback was also positive.

Although in its infancy the SAFER tool has demonstrated potential for being able to assist professionals in thinking about the cumulative, interacting risks and strengths in incidents of CSA. Further development would include modification of the scoring system, further research into items (particularly strengths) and a wider scale pilot.

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