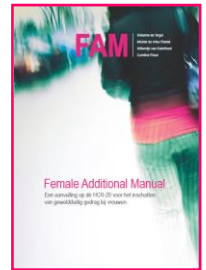


Factsheet FAM



Female Additional Manual

Additional manual to the HCR-20 / HCR-20^{V3} for violence risk assessment in women

Developed in the Van der Hoeven Kliniek by Vivienne de Vogel, Michiel de Vries Robbé, Willemijn van Kalmthout and Caroline Place

The need for a gender-sensitive tool

- While women still represent a minority in the forensic psychiatric and prison population, worldwide the number of women committing violent offenses has increased steadily over the past two decades
- Comparable prevalence rates men and women for inpatient violence, intimate partner violence and violence towards own children
- Violence by women compared to violence by men: less visible; more relational / reactive; less sexual; different expression and motives
- Overlap in risk factors, but also specific risk factors for women:
 - Factors to which women are exposed more often (e.g., sexual victimization)
 - Factors for which the sensitivity is greater in women (e.g., disruption in relationships)
- Risk assessment instruments are predominantly developed and studied within male populations
- No specific risk assessment instrument for women (exception: EARL-21G for girls 6-12 years)
- Equivocal results with the HCR-20 for women regarding predictive validity
- Wish of mental health professionals for more specific guidelines for risk assessment and management in women

Goal of the FAM

The goal of the FAM is to provide a clinically relevant and useful additional tool for accurate, gender-sensitive assessment of violence risk, which offers concrete guidelines for risk management in women

How was the FAM developed?

- Started in 2007 with the HCR-20 as basis
- Literature review
- Clinical expertise:
 - Extra risk factors mentioned in a previous study in the Van der Hoeven Kliniek
 - Interviews mental health professionals in the Van der Hoeven Kliniek
 - Experiences with coding procedure other tools (SAPROF, START)
- Pilot study in 2010 into the interrater reliability and gender sensitivity of the factors

What is the FAM?

- An addition to the HCR-20 / HCR-20^{V3} (or Dutch HKT-30 / HKT-R):
 - Additional guidelines for women for five Historical HCR-20 items (H6-H10) or two Historical HCR-20^{V3} items (H7-H8)
 - Specific risk factors (HCR-20: 5 Historical, 2 Clinical and 2 Risk management items; HCR-20^{V3}: 4 Historical, 2 Clinical and 2 Risk management items)
- New coding aspects:
 - Marking critical items
 - Marking the final judgment on a five-point scale instead of a three-point scale
 - Coding three extra risk ratings in addition to Violence to others: Self-destructive behavior; Victimization; Non-violent criminal behavior
- Dutch version 2011; English 2012; Finnish and French translations and English and Dutch FAM fully adapted to HCR-20^{V3} 2014; Spanish, Italian, Danish, Swedish expected in 2015

Research with the FAM

- Current studies: prospective in the Van der Hoeven Kliniek; retrospective national (2012-2014)
- Research results:
 - Good interrater reliability
 - Moderate to good predictive validity for incidents of violence to others during treatment and incidents of self-destructive behavior during treatment
 - Gender-specific: women had significantly higher scores on seven of the nine new items

See for more information and recent research results: www.violencebywomen.com