



The European Journal of Psychology Applied to Legal Context

www.elsevier.es/ejpal



Predictive efficacy of violence risk assessment instruments in Latin-America

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ARTICLE INFO

Article history:

Received 31 March 2014

Received in revised form 8 November 2014

Accepted 13 November 2014

Available online 19 June 2015

Keywords:

Violence

Risk assessment

Risk scale

Predictive validity

Offender population

ABSTRACT

In Latin America, violence risk assessment used to be based in the non-structured clinical approach. An Argentinian cohort study that included violence risk assessment tools changed the tradition. The objective of this study is to inform of the observed predictive efficacy of these tools in the follow-up until March 2012. One hundred and fifty three consecutive pre-released convicted males were recruited from September 2001 through September 2004 in La Plata, Argentina. The pre-release assessment measures included the Hare Psychopathy Checklist-Revised, Assessing Risk for Violence V2, Structured Professional Judgment, and Violence Risk Appraisal Guide. The mean follow-up time was 1,290 days. Ninety-nine (64.7%) subjects had at least one general relapse, and 91 (59.5%) had at least one violent relapse. The incidence rate of violent recidivism was 16.8 per 100 person-years. While some indicators of predictive validity had no clinical significance, the time-dependent indicators did have clinical significance.

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Eficacia predictora de los instrumentos de evaluación del riesgo de violencia en Latinoamérica

RESUMEN

En Latinoamérica, la evaluación del riesgo de violencia se basaba en la aproximación clínica no estructurada. A comienzos del presente siglo un estudio de cohorte argentino cambió la tendencia. El propósito de este estudio es informar sobre la eficacia predictiva de esos instrumentos en el seguimiento hasta marzo de 2012 de la cohorte de penados liberados. Se reclutó a 153 varones penados, candidatos a ser liberados consecutivamente bajo condiciones entre septiembre de 2001 y septiembre de 2004. Las medidas basales estaban constituidas por el Hare Psychopathy Checklist-Revised, Assessing Risk for Violence V2, Violence Risk Appraisal Guide y el juicio profesional estructurado. El período promedio de seguimiento fue de 1.290 días. Noventa y nueve (64.7%) sujetos tuvieron, por lo menos, una recidiva general y 91 (59.5%) tuvieron, por lo menos, una recidiva violenta. La tasa de incidencia de recidiva violenta fue de 16.8 por 100 persona-años. Algunos indicadores de validez predictiva no alcanzaron significación clínica, pero sí los estimadores tiempo-dependientes.

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In Latin America, violence risk assessment (VRA) during the 20th century was based on a non-structured clinical approach (Singh, Condemarín, & Folino, 2013). But in the last 10 years of the 20th century, the academic and forensic fields restructured

the theoretical conceptualization of the subject in Argentina. Risk assessment predictive quality and its value as a tool to inform prevention plans were highlighted (Folino, 1994, 1996, 2004; Folino & Escobar-Córdoba, 2004). Finally, around 2000 a joint effort between the Master Course in Forensic Psychiatry of the National University of La Plata (UNLP) and the Supreme Court of Justice of the Province of Buenos Aires established a program to acquire empirical evidence on VRA (Folino, Marengo, Marchiano, & Ascazibar, 2004).

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The objectives of the Pilot Program for Assessment of Risk in Released Males in the Prosecutor General Bureau of the Supreme Court of Justice of the Province of Buenos Aires were to create a procedure for systematic assessment of the risk of violent recidivism in forensic patients and in the inmates who were applying to any form of anticipated release, and to contribute to the creation of intervention programs that would help to decrease the recidivism rate. It was also a goal of the program to provide the judicial system with an assessment procedure that would be transparent, that the parties involved would be able to supervise it, and that would allow for follow-up assessments.

Due to the prevailing paradigm, there were notorious shortfalls in knowledge, including the base rate for criminal recidivism in populations released from prison. Determining this rate was one of the first aims of the Program. Thus, a cohort of males released in 1991 was formed and the official criminal registries for the subsequent 10 years were obtained. The result was that 34% had had at least one new conviction and 52% had at least one new charge (Folino & Marchiano, 2002).

In addition, a protocol for pre-release assessment was designed. Nine internationally-used instruments, or parts of them, were translated: the Hare Psychopathy Checklist–Revised (PCL-R; Hare, 1991, 2003), the Assessing Risk for Violence V 2 (HCR-20; Webster, Douglas, Eaves, & Hart, 1997; Folino, 2003), the Violence Risk Appraisal Guide (VRAG; Quinsey, Harris, Rice, & Cormier, 1999; Quinsey & Lalumière, 1995), the Lifestyle Criminality Screening Form – Revised (LSCF-R; Walters, 2003a, 2003b), the Iterative Classification Tree (ICT; Monahan et al., 2000; Steadman et al., 2000), the Rapid Risk Assessment for Sexual Offense Recidivism (RRASOR; Hanson, 1997), the Sexual Offender Risk Appraisal Guide (SORAG; Quinsey, Harris, Rice, & Cormier, 2006), the Child and Adolescent Taxon Scale (CATS; Quinsey et al., 1999), and the Cormier–Lang Scale (Cormier et al., 1999).

A concurrent cohort study was designed to evaluate the predictive validity and reliability of the pre-release assessment protocol based on “Out” follow-up, from the moment of release on. Other components of validity of the translated instruments were tested as well (Castillo, 2007; Folino, Almirón, & Ricci, 2007; Folino, Astorga, Sifuentes, Ranze, & Tenaglia, 2003; Folino, Castillo et al., 2004; Folino, Escobar-Córdoba, & Castillo, 2006; Folino & Hare, 2005; Folino et al., 2005; Folino & Mendicoa, 2006).

The Argentinian studies were accompanied by other studies that were frontline in Latin America regarding the subject. In many of them the academic diffusion from the National University of La Plata was of main importance (Folino & Raverta, 2006), including studies with the PCL-R and the HCR-20 in:

- Brazil (De Borja Telles, Day, Folino, & Taborda, 2009; De Borja Telles, Folino, & Taborda, 2009, 2012; Teitelbaum, 2010).
- Chile (León-Mayer, 2012; León-Mayer, Asún Salazar, & Folino, 2010; León-Mayer, Cortés Olavarría, & Folino, 2014; León-Mayer, Neuman, Hare, & Folino, 2013).
- Colombia (Folino & Escobar-Córdoba, 2004; González, Escobar-Córdoba, & Castellano-Castañeda, 2007; Ruiz, 2006; Tejada & Escobar-Córdoba, 2005).
- Ecuador (Ochoa-Rosales, 2007).

Both the “Out” Argentinian cohort study and the “In” Brazilian cohort study – a follow up study of forensic mental health inpatients conducted at the Rogério Cardoso Forensic Hospital in Porto Alegre – supported the reliability and predictive validity of the VRAG, the Hare PCL-R, and the HCR-20 for forensic populations (De Borja Telles et al., 2009a, 2012; Folino, 2006), but not for convicted populations. The “Out” follow up for the Argentinian convicted and released cohort did not produce significant results until the follow-up of January 2007 (Folino, 2009). Thus, it is important to prolong

follow-up periods to investigate if there is variation in the rate of violent recidivism and if there is an increase in the predictive efficacy of the pre-release assessment measurements.

The purpose of the present study was to determine the violent and general recidivism rates of a cohort of released convicted male from time of release between September 2001 and September 2004 through March 2012 and to analyze the predictive validity of four VRA instruments included in the pre-release assessment.

Method

Participants

The cohort of the study comprised all males ($n = 178$) who were consecutive candidates for release during the recruitment period (September 2001 – September 2004) in the Penal Execution Court No. 1 of the Judicial Department of La Plata, Argentina. Of the 178 males evaluated, 25 (14%) were forensic patients and 153 (86%) were convicted. The cohort of the present study comprises the 153 released convicted males; mean age at release was 29.4 years (age range, 20–75 years, $SD 8.7$).

The Penal Execution Court No. 1 was the only court during the recruitment period in the Judicial Department of La Plata, which has a population of 1 million inhabitants. The mean age of the present cohort was statistically similar to that of the cohort of convicts in the Province of Buenos Aires in 1991 ($n = 3,324$, $t = 1.032$, $gl 95$, $p = .305$, 95% CI = $-0.84, 2.66$) (Folino & Marchiano, 2002).

The index crimes were crimes against property (85%), threats, assaults, homicides, and attempted homicides (11%), sexual offenses (2%), and other crimes (2%).

Pre-release Assessment and Instruments

Assessment was conducted before release of all convicted males with the following instruments: HCR-20 (Webster et al., 1997), PCL-R (Hare, 2003), VRAG (Quinsey et al., 1999), and the Structured Professional Judgment (SPJ; Douglas & Ogloff, 2003). The SPJ was based on professional review following the guidelines of the HCR-20, and conclusions were expressed as low, moderate, or high recidivism risk. The results were transformed in an ordinal variable with a minimum of 1 and a maximum of 3 for statistical purposes. Recent meta-analyses and systematic reviews have informed that these instruments have a moderate predictive efficacy and values under the ROC curve between .66 and .74 (Singh, Grann, & Fazel, 2011; Yang, Wong, & Coid, 2010).

As recommended (Blomhoff, Seim, & Friis, 1990; Douglas & Ogloff, 2003; Monahan & Steadman, 1994), multiple methods were used to obtain the necessary information (judicial files, clinical and criminal records, psychiatric and social assessment interviews, and psychological and psychiatric forensic reports).

The first translated and commented Spanish version of the HCR-20 was used (Folino, 2003; Webster et al., 1997). Local studies informed of alpha coefficients of .76 for Section H, .55 for Section C, and .88 for Section R; the agreement between evaluators as measured by the intraclass correlation coefficient was .94 for H, .75 for C, and .97 for R (Folino et al., 2004a).

The authorized Argentinian research version of the PCL-R was used. Two independent studies had provided evidence for its reliability. The first study reported alpha coefficients of .86 for total scores, .83 for Factor 1, and .86 for Factor 2; an intraclass correlation coefficient of .89 for Factor 1 and .92 for factor 2; and .92 for Total Score. The comparison of two categorical diagnoses of three simultaneous evaluators with adjusted kappas was .90 (Folino et al., 2003). In the second study, the results were even higher: alpha coefficient of .99 for Total Score, .98 for Factor 1, and .99 for Factor 2; the singular measure of the intraclass correlation coefficient was higher (Folino & Castillo, 2006).

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