



THE RISK ASSESSOR

Testing Methods Used in Psychosexual Risk Assessments

In Volume 1, Issue 1 of the *Risk Assessor* (*What is a Psychosexual Risk Assessment?*), the nine key components required for conducting a competent psychosexual risk assessment were reviewed and discussed. The key components identified included structured clinical interviews, life history questionnaires, sexual history questionnaires, offense specific and sexual history polygraphs, penile Plethysmograph exams (PPG), psychosocial and psychosexual tests, and the use of actuarial empirically validated risk assessment probability tools (Static-99). These independent measures of personality and related behavioral and interpersonal difficulties provide valuable data to mental health clinicians who are preparing psychosexual risk assessments.

Criminal defense attorneys, prosecutors, judges, and probation agents will be able to make more informed decisions regarding the management of sexual offenders, if they have a good working knowledge of the various tests used in a psychosexual risk assessment and the data that is derived from them. The data and information highlights an offender's risk factors and strengths, as well as problematic areas that should be addressed in treatment in order to reduce the risk of sexual re-offense.

It should be noted, that while psychosocial and psychosexual testing is an important component of a psychosexual risk assessment, these tests should not be viewed as the primary criterion for assessment of an individual's risk of re-offense. The mental health professional charged with the important responsibility of completing such an assessment must use extreme caution in utilizing testing information and make clear in his or her report that testing represents only one of many tools that are used.

Personality and Behavioral Tests

Evaluators are generally interested in using well-validated personality tests to obtain an overview of an offender's prominent personality characteristics, behavioral problems, and interpersonal style of relating to others. Additionally, such tests provide meaningful data about an offender's level of self worth, self-esteem, and difficulties in managing anger and aggression. Furthermore, risk factors associated with symptoms indicative of emotional management problems, evidence of mental disorder or personality disorder that should be considered in treatment planning can also be identified.

Listed below are some of the tests used when conducting a psychosexual risk assessment. These tests are

routinely used at our clinic, but should not be considered an exhaustive range of tests available. Competent risk assessments should always identify the tests used. The evaluator should discuss in sufficient detail all risk factors and any non-risk related factors discerned from test results.

16 PF: The Sixteen Factor Personality Inventory is a standardized general personality test providing an overview of sixteen prominent personality characteristics. Additionally, this test includes five global factors scales, which enable the clinician to gain an immediate understanding of the client's enduring personality makeup. The 16 PF highlights behavioral trends that facilitate diagnostic decision making and the development of effective treatment strategies. Several of the scales represent valuable data concerning risk of re-offense, including scales dealing with emotional stability, rule conscientiousness, self-control, effectiveness of behavior controls, acting-out tendencies, and openness to change.

PAI: The Personality Assessment Inventory is a standardized test covering twenty-two non-overlapping scales relevant to a broad-based assessment of mental and emotional disorders. Eleven of these clinical scales provide data related to three classes of emotional and mental disorders including the neurotic cluster, the psychotic cluster, and a cluster associated with behavior disorders or impulse control disorders. The test also provides valuable data concerning the offender's interpersonal style, motivation for treatment and information concerning potential complications in treatment. Scales assessing character pathology including antisocial behaviors and antisocial traits shown to have prominent significance for re-offense risk are also highlighted.

MMPI-2: The Minnesota Multiphasic Personality Inventory is one of the most widely used assessment tools for evaluating psychopathology and prominent symptoms of mental or emotional disorders. The MMPI-2 measures major symptoms of social and personal maladjustment. A combination of high scores on several of the scales and subscales of the test represent prominent risk factors for re-offense. Such scores should be addressed when assessing overall risk level, treatment needs and treatment planning.

MCMI-III: The Millon Clinical Multiaxial Inventory is a useful clinical assessment tool, which aids in the identification of deeper and more pervasive personality characteristics underlying the offender's overt offense conduct. The MCMI-III addresses the relationship between the offender's personality characteristics and clinical symptoms thereby facilitating treatment planning. High scores

Ronald I Weiner, PHD, LLC is a forensic mental health clinic, providing a full array of assessment, treatment, consultation, training & litigation support services to attorneys, courts and government/ social service mental health agencies.

Executive Director's Corner

The Risk Assessor is designed to introduce and provide important information to those key decision makers involved in the adjudication and/or supervision of individuals charged with or convicted of sexual offenses.

The Risk Assessor will serve to supplement my university teaching, and clinical and forensic work over the last thirty five years.

In our next issue, *The Risk Assessor* will focus on other assessment tools used in Psychosexual Risk Assessments including the **AASI (Abel Assessment of Sexual Interest)**, the **Clinical Polygraph** and the **Penile Plethysmograph (PPG exam)**. I appreciate your continued interest in our clinic!

Our Clinic offers services in the following areas:

Sex Offender Assessment & Treatment

- Psychosexual Risk Assessments & Treatment Planning
- Treatment Programs for Adults & Juveniles
- Polygraph Services & Phallometric Assessments

Forensic Evaluations

Shoplifting Control Programs

Anger Management Programs

on particular personality disorder scales (sadistic, antisocial, narcissistic) indicate higher level risk factors that need to be carefully considered during treatment planning. High scores on substance abuse or substance dependence scales also represent prominent risk factors for re-offense and should be addressed as an important component in treatment planning.

TSCS:2: The Tennessee Self-Concept Scale is used to assess persons charged with or convicted of a sex offense. The test provides data on how the offender views himself or herself in regard to their physical appearance, moral functioning, personal functioning, family functioning, social functioning, and academic/work functioning. Additionally, the TSCS:2 provides supplemental scoring information regarding the offender's sense of personal identity, sense of satisfaction with his/her life, and whether they find fault with their behavior. Low self-esteem and self-worth can contribute to re-offense risk when combined with emotional management problems.

NAS-PI: The Novaco Anger and Provocation Inventory is an assessment tool that helps the clinician evaluate the role of anger in various psychological and physical conditions and how an individual experiences anger, while the Provocation Inventory identifies the kinds of situations that induce anger in the offender. Unregulated anger and aggression represent prominent risk factors for re-offense and should be addressed in treatment planning.

Psychosexual Tests

FoSOD: Facets of Sex Offender Denial Scale is a tool designed to measure different types and degrees of denial evidenced in those charged with or convicted of sexual offenses against children. The FoSOD measures variables within multiple domains of denial that are likely to interfere with treatment outcomes. With its ability to measure, monitor, and distinguish a variety of forms of denial presented throughout treatment, the FoSOD represents an important development in the treatment of sexual offenders. The FoSOD provides a unique window into the offender's perceived level of accountability for his or her abusive behavior.

MSI II: Multiphasic Sex Inventory II Adult Male Form is designed to measure the sexual characteristics of an adult male who may have committed a sex offense. It can be used during a sexual deviance evaluation and throughout treatment to measure progress. It is also useful in evaluating those alleged to have engaged in sexual misconduct, but who deny any such behavior. The MSI II is also a vital test in the assessment of sexual re-offense risk.

The psychosexual scales assess social sexual inadequacies and emotional neediness, while the behavioral scales assess conduct disorder, sociopathy, aggressive patterns of behavior, family violence, and substance abuse. The MSI II assesses the degree to which the client exhibits paraphilic disorders. It provides important comparative data and allows the offender's scores to be measured against the scores of known child molesters and violent sexual offenders.

MIDSA: The Multidimensional Inventory of Development, Sex, and Aggression enables the clinician to assess the level of an offender's sexualization, aggressiveness, and related attitudes, beliefs, and feelings found to be important in the causation and sustainment of sexually aggressive behavior. The MIDSA provides data regarding three components of sexualization including sexual compulsivity (inability to control sexual urges), sexual preoccupation (thinking, daydreaming, and dreaming about sex frequently), and hypersexuality (frequent sexual activity). The test also assesses the offender's level of anger management and sexual adequacy. Additionally, the MIDSA examines responses indicative of an offender's level of child sexual arousal, child sexual sadism, and child molester cognitive distortions. Masculine adequacy is assessed, along with anxiety in relating to age appropriate women, sexual performance, and erectile dysfunction.

SAI: Sexual Adjustment Inventory is a comprehensive instrument used to assess and identify sexually deviant and paraphilic behavior in adults charged with or convicted of sexual offenses. Valuable data concerning the offender's overall level of sexual adjustment (whether the offender is satisfied with his sexual adjustment or sexually dissatisfied as a result of an impaired or unsatisfying sexual lifestyle or adjustment) can be measured. The SAI examines whether the offender responds to test items similar to pedophiles (e.g., have a sexual preference for prepubescent boys or girls). Data derived from the test can also reveal whether the offender responds to test items similar to known sexual assaulters (have a high interest in aggressive sex and often fantasize about forceful sex against the will of their partner).

