Domestic Violence Risk Assessment:
Informing Safety Planning & Risk Management

Domestic Homicide Brief 2

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Acknowledgements

The Domestic Violence Risk Assessment: Informing Safety Planning & Risk Management Domestic Homicide Brief is the second in the series developed by the Canadian Domestic Homicide Prevention Initiative with Vulnerable Populations (CDHPIVP). The Brief highlights domestic violence (DV) risk assessment and how risk assessment informs risk management with offenders and safety planning with victims/survivors. The Brief provides a general overview of DV risk assessment including the purpose of conducting risk assessments, tools, best practices, how risk assessment informs risk management and safety planning, and risk assessment with populations that experience increased vulnerability to domestic homicide (i.e., children exposed to domestic violence; rural, remote, and Northern communities; immigrant and refugee populations; and Indigenous peoples) that are also the focus of the CDHPIVP research.

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Domestic Violence Risk Assessment: Informing Safety Planning & Risk Management

Why Do Risk Assessment?

The primary purpose of conducting domestic violence risk assessment is to prevent violence; that is, to identify and mitigate risks posed by the perpetrator. Thus, risk assessment helps to prioritize cases for intervention (i.e., who is most likely to reoffend, and who requires the most resources?). Risk assessment can also help identify monitoring and supervision strategies (i.e., how can we manage this case effectively in the community?), safety plans for victims (i.e., what security and support measures are necessary?) and management and rehabilitative options for offenders (i.e., what monitoring and psychosocial interventions are appropriate?). A secondary purpose of domestic violence risk assessment is to improve the accountability, transparency and consistency of decision-making.

The Nature and Kind of Risk Assessment Tools

Professionals in the domestic violence field have been conducting risk assessments for decades often basing their assessments on experience and intuition. This informal approach, referred to as unstructured clinical decision making, can capture the unique factors associated with an individual case leading to case-specific tailoring of violence prevention strategies. However, it has been criticized as being highly subjective and lacking reliability, validity, and accountability.

Unstructured clinical decision making may also miss important factors found in research that inform appropriate and effective interventions. Furthermore, this approach allows for personal preferences, biases, and specific specialized trainings of the professional to influence intervention and prevention strategies rather than relying on empirically studied risk factors and strategies widely accepted and used in the field.

There are two structured approaches to risk assessment utilized in the domestic violence field: 1) actuarial assessment and 2) structured professional judgment approach.

Actuarial Tools

The actuarial approach to risk assessment involves using a tool that contains risk factors selected through empirical research to obtain a score that indicates a perpetrator’s risk of reoffending. An actuarial tool is distinguished from other assessment methods by how the...
items are selected, combined, and interpreted, rather than which items are used or whether they are measured at one point (i.e., static) or used to measure change (i.e., dynamic). It allows an assessor to see how an individual perpetrator’s risk compares with that of other known perpetrators. It also provides an estimate of the probability of reoffending (according to a specified outcome and time frame) based on follow-up research with a large number of individuals.2

**Structured Professional Judgment (SPJ)**
The structured professional judgment approach to risk assessment involves assessing risk according to guidelines that reflect theoretical, professional, and evidence-based knowledge about domestic violence. The guidelines include the minimum number of risk factors that must be considered for each case; recommendations for gathering information that will be needed for the assessment (e.g., using multiple sources and methods); proposed strategies for communicating opinions about risk; and suggestions for implementing risk management plans.1

The structured professional judgment approach to risk assessment differs from the actuarial approach by allowing some professional discretion in the determination of risk. Any risk assessment needs to be considered through the lens of the unique vulnerabilities of each victim. This can only be determined by having the victim, or a victim’s advocate inform the process. Subsequently, she needs to be advised of relevant information from risk management plans.

### Commonly Used Tools in Domestic Violence Risk Assessment

<table>
<thead>
<tr>
<th>**Ontario Domestic Assault Risk Assessment Guide (ODARA)**2,3</th>
<th>**Domestic Violence Risk Appraisal Guide (DVRAG)**2,3</th>
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<tbody>
<tr>
<td><strong>ODARA</strong>&lt;br&gt;Ontario Domestic Assault Risk Assessment Guide&lt;br&gt;ODARA 101&lt;br&gt;The Electronic Training Program</td>
<td><strong>Risk Assessment for Domestically Violent Men</strong>&lt;br&gt;Tools for Criminal Justice, Offender Intervention, and Victim Services</td>
</tr>
<tr>
<td>• Developed for first responders, primarily law enforcement but also victim services&lt;br&gt;• Assesses risk of re-assault against an intimate partner; higher scores are also related to more frequent and severe violence&lt;br&gt;• Assessment comprised of 13 risk factors identified through follow-up research of case files from the Ontario Provincial Police and municipal police records&lt;br&gt;• Can be completed using police and criminal records or victim interview&lt;br&gt;• Used in Nova Scotia, New Brunswick, Ontario, Saskatchewan, Alberta, and Northwest Territories, as well as several US states and other countries; available in French and German</td>
<td>• Developed for forensic clinicians and criminal justice or whenever more in-depth information is available&lt;br&gt;• Assesses risk for recidivism among male offenders&lt;br&gt;• Tool uses the same items as the ODARA and incorporates the perpetrator’s score on the Psychopathy Checklist – Revised (PCL-R)4&lt;br&gt;• Should be completed when the ODARA score is at least 2 and a reliable PCL-R score is available; appropriate for detailed clinical or correctional data of the perpetrator</td>
</tr>
</tbody>
</table>
Spousal Assault Risk Assessment Guide – Version 3 (SARA-V3)\textsuperscript{1,5}

- Developed for criminal justice and mental health professionals
- Assesses risk of future violence and lethality and helps in determining risk scenarios, risk formulation, and management plans
- Earlier versions of the SARA are comprised of 20 items that focus on the perpetrator’s criminal history, psychosocial adjustment, and spousal assault history and information on the current offence.
- Information gathered from a variety of sources including interviews with the perpetrator and victim, standardized measures of psychological and emotional abuse, and other records (e.g., police reports)
- Translated into 10 languages and used in 15 countries

Brief Spousal Assault Form for the Assessment of Risk, Second Edition (B-SAFER)\textsuperscript{6,7}

- Condensed version of the SARA
- Developed for criminal justice and mental health professionals
- Assesses risk of future violence and lethality and includes recommendations for risk management strategies
- Considers 10 perpetrator risk factors and 5 victim vulnerability factors
- Includes an interview guide that focus on perpetrator’s spousal violence history and psychological and social adjustment problems
- Information gathered from a variety of sources including interviews with the perpetrator and victim, standardized measures of psychological and emotional abuse, and other records (e.g., police reports)
- Translated into 8 languages and used in numerous countries

Summary of Domestic Violence Risk Factors\textsuperscript{8}

- Developed for frontline professionals, police, child protection workers and anti-violence workers
- Assesses likelihood of future violence
- Intended to assist frontline professionals in conducting quick evidence-based risk assessments during investigations
- Contains 19 risk factors
- Not as in-depth as the B-SAFER, SARA, or ODARA
- Used in British Columbia
Domestic Violence Screening Inventory Revised (DVSI-R)\textsuperscript{1,6,9,10}

- Developed for criminal justice professionals
- Assesses risk of recidivism among male and female perpetrators on probation
- Comprised of 11 items that focus on the perpetrator’s criminal history including domestic violence, employment status, treatment history, relationship status, and information on the current offence
- Includes two summary risk ratings based on the assessor’s professional judgment that addresses the imminent risk to the victim of the current offence and the imminent risk to another person known to the perpetrator
- Developed and used in the U.S.

Danger Assessment\textsuperscript{6}

- Originally developed for nurses in emergency but is now used in a variety of settings with the most appropriate assessors being victim advocates, social workers or clinicians
- Assesses for risk of lethality (domestic homicide) based on risk factors identified in the literature
- Comprised of two parts: 1) calendar that victim can indicate the severity and frequency of domestic violence instances they experienced within the last 12 months and 2) a 20-item checklist of risk factors related to intimate partner homicide
- Information gathered through collaboration/interviews with the victim
- Developed in the U.S. and used in multiple countries

Note: The DA is a commonly used tool to assess the risk of homicide in domestic violence situations as it bases the assessment on risk factors found in case control research to be associated with lethality or more severe domestic violence
Best Practice in Domestic Violence Risk Assessment

- Those conducting risk assessments should use structured, reliable, validated and defensible risk assessment tools or guidelines. Some examples of existing tools are the Spousal Assault Risk Assessment Guide, Version 3 (SARA-V3), the Ontario Domestic Assault Risk Assessment (ODARA), the Brief Spousal Assault Form for the Evaluation of Risk (B-SAFER), the Domestic Violence Risk Appraisal Guide (DVRAG), the Danger Assessment (DA), and the Domestic Violence Screening Instrument – Revised (DVSI-R).

- Those conducting risk assessments should receive proper education and training about the use of tools or guidelines. Risk evaluators should understand any unique aspects to the evaluation of domestic violence compared with other criminal offenses and be alert to any changing circumstances or contexts that might affect risk.

- If it is not possible to use an established risk assessment method, those conducting risk assessments should at least consider risk factors that are supported in the empirical or professional literatures.

- Risk assessments should not consider ascribed characteristics or information that is otherwise discriminatory, such as race, ethnicity, and socioeconomic status.

- A risk assessment is only as good as the information upon which it is based. Therefore, those conducting risk assessments should follow risk assessment instrument instructions closely and where appropriate use multiple sources of information including interviews with the (alleged) perpetrator, victim(s) and other collateral informants, correctional file information, criminal records, mental health reports, and so forth.

- Although it is important to incorporate the victim’s perspective into a risk assessment, such information is sensitive and should not be disclosed to the perpetrator. The safety of the victim should always be a priority.

- Although most risk assessments will focus on a single, primary victim, it is important to remember that other “at risk” individuals could include children, family members, employers, service providers, or the primary victim’s new intimate partner.

Predictive Validity of Risk Assessment Tools

Predictive validity measures the accuracy of a risk assessment in discriminating at a particular point the effectiveness of a risk assessment tool in identifying potential recidivists. Studies have been conducted to measure the predictive validity of domestic violence risk assessment tools with results indicating that the tools described in this Brief have moderate predictive validity on average. However, it is important to note that domestic violence risk assessment is a relatively new approach to prevention and in some research tools may be administered in settings for which they were not created (e.g., gathering information from case files only and not conducting interviews where indicated) and may use fewer items or different questions than intended. This inconsistency in methodology makes it difficult to accurately measure the predictive validity of risk assessment tools.

While predictive validity is an important factor when choosing which tool to use for assessing risk for domestic violence, other factors should also be considered. For instance, additional costs of training and materials, ease of use, the particular setting the tool is intended for (e.g., criminal justice system; health and social services; community and system based victim support services, counselling and shelters); access to information (e.g., interviews with perpetrators
Risk Management

The CDHPIVP defines risk management as strategies intended to reduce the risk presented by a perpetrator of domestic violence such as close monitoring or supervision, psychosocial interventions to address the violence and/or related issues such as mental health and addictions.

The Importance of Victims’ Perceptions of Risk

Research has looked at domestic violence victims’ perceptions of risk as a predictor for future violence with the thought being that victims know the perpetrator’s behaviour best and has an intuitive sense of their risk. Results have shown that victims’ perceptions of risk can have similar predictive validity for future violence to certain risk assessment tools and that when victims’ perceptions of risk are included in risk assessments, the predictive validity of the assessment substantially improves. Risk assessment tools mentioned above that incorporate information from victims include the Danger Assessment, the SARA, the B-SAFER, and the ODARA, and the Summary of Risk factors from BC. While it seems that a victim’s informal assessment of risk is very important to consider when conducting a risk assessment, it is important to note that not all victims make accurate predictions. For example, women who survived an attempted homicide by their intimate partner were interviewed and asked if they felt that their lives were in danger. Approximately half of these women did not think that their partners would try to kill them. Victims may underestimate their level of risk as a coping strategy or cumulative trauma may have impacted their awareness and/or memory. Therefore, it is important to consider the victim’s appraisal of risk in a risk assessment but to keep in mind that the victim may not always be accurate in her prediction.

“Risk assessment should be considered successful when we can demonstrate reduced rates of violence in connections with risk assessment procedures.”

Risk Management

and/or victims; police reports, child protection information and other systems involved with the family); what assessors want to assess (e.g., reoffending vs. lethality) and how the tool can assist in making decisions regarding effective risk management and safety planning should also be considered.

Risk assessment is not an end in itself but rather an ongoing process that informs risk management and safety planning. However, current research focuses on the predictive validity of tools and not how risk assessment can prevent violence by providing information that leads to appropriate and effective risk management and safety planning strategies. There is a need for research to examine how the risk assessment process can prevent future domestic violence.
### Examples of Domestic Violence Risk Factors and Related Risk Management Strategies

(adapted from: Douglas & Kropp, 2002, p.628)

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Strategy</th>
</tr>
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<tbody>
<tr>
<td>Past violent behaviour</td>
<td>Incarceration</td>
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<td></td>
<td>Intensive supervision</td>
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<td></td>
<td>Corrections-based violence treatment (e.g., Partner Assault Response program)</td>
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<td></td>
<td>Parenting program that addresses violence</td>
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<td></td>
<td>Weapons restrictions</td>
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<tr>
<td>Past violations of conditional release</td>
<td>Incarceration</td>
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<tr>
<td></td>
<td>Intensive supervision</td>
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<tr>
<td></td>
<td>Correctional relapse prevention program (e.g., Partner Assault Response program)</td>
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<tr>
<td>Relationship problems</td>
<td>Problem-solving skills</td>
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<td></td>
<td>Individual financial counselling</td>
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<td></td>
<td>Legal advice/family court</td>
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<td></td>
<td>Restraining order</td>
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<td>Employment problems</td>
<td>Vocational counselling and skills training</td>
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<td></td>
<td>Financial counselling</td>
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<tr>
<td></td>
<td>Drug/alcohol treatment</td>
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<tr>
<td>Victim of and/or witness to family violence as a child</td>
<td>Individual therapy</td>
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<tr>
<td></td>
<td>Post-traumatic stress treatment where indicated</td>
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<td></td>
<td>Spousal assault group program</td>
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<td></td>
<td>Family treatment</td>
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<tr>
<td>Substance abuse/dependence</td>
<td>Parenting skills</td>
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<tr>
<td></td>
<td>Drug/alcohol treatment</td>
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<tr>
<td></td>
<td>Concurrent disorders treatment where indicated</td>
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<tr>
<td></td>
<td>Court-ordered abstinence</td>
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<tr>
<td></td>
<td>Urine screening</td>
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<tr>
<td>Suicidal or homicidal ideation</td>
<td>Crisis counselling</td>
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<td></td>
<td>Hospitalization</td>
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<td></td>
<td>Psychotropic medication</td>
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<tr>
<td></td>
<td>Cognitive-behavioural therapy</td>
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<td></td>
<td>Weapons restrictions</td>
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<tr>
<td></td>
<td>Individual treatment</td>
</tr>
<tr>
<td></td>
<td>Drug/alcohol restrictions</td>
</tr>
<tr>
<td>Recent psychotic and/or manic symptoms</td>
<td>Hospitalization</td>
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<tr>
<td></td>
<td>Psychotropic medication</td>
</tr>
<tr>
<td></td>
<td>Cognitive therapy</td>
</tr>
<tr>
<td></td>
<td>Drug/alcohol restrictions</td>
</tr>
<tr>
<td>Personality disorder</td>
<td>Intensive supervision</td>
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<td></td>
<td>Specialized therapy for personality disorders</td>
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</table>
Promising Practices in Risk Management Informed by Risk Assessment

A Second-Responder Program – Risk Management with Perpetrators of Domestic Violence

Second-responder programs have been used with victims of domestic violence since the late 1980’s. The program provides short-term interventions to victims immediately following a police-reported incident of domestic violence. The short-term interventions involve follow-up by community based anti violence program staff, other social workers or police where victims are informed of their level of risk for subsequent victimization; assist in developing an immediate safety plan; are provided with information on services, legal options, and court orders; and are given referrals and access to therapeutic support.

Recently, researchers and service providers have implemented a second-responder program, based on a risk, needs, and responsivity (RNR) framework, with perpetrators of domestic violence who have been assessed as either moderate to high-risk for reoffending. Specifically, the program offers immediate interventions to perpetrators who have been released on bail and awaiting trial. The interventions are aimed at the needs most closely related to the perpetrator’s offending or risk of offending as identified by research (e.g., recent separation; loss of employment; substance use; depression). While awaiting trial, perpetrators would see a counsellor who would provide them with links to community resources (e.g., housing and legal advice), referrals to addictions and mental health services, practical support (e.g., accompanying them to a shelter or food bank), and short-term cognitive-behavioural therapy addressing their use of abuse.

An evaluation of the program revealed that perpetrators who participated in the second-responder program were significantly less likely to be arrested for another offense two years after the interventions compared to perpetrators who did not participate in the program. Specifically, the rates of re-arrest and arrest for domestic-violence-related offenses were twice as high for perpetrators who did not participate in the program compared to perpetrators who did participate.17

Domestic Violence Interagency Case Assessment Teams (ICAT) in British Columbia

An ICAT is a team comprised of local agencies who respond to high risk domestic violence (e.g., police, community victim services, child welfare, health, shelters, social services, Indigenous communities or organizations, etc). The team responds to referrals of potentially high risk cases in order to manage the risk and increase safety. Information regarding the family is gathered by all service providers who know either the victim, the perpetrator, or both. The information is appropriately shared to identify risk and vulnerability factors and to assess the level of risk to inform a risk management strategy.

To assess the level of risk of the domestic violence case, the team conducts a risk assessment using a BC Summary of Domestic Violence Risk Factors (19 Risk Factors). The risk review decision is communicated by standardized mechanism to courts and risk management plans are recorded by relevant agencies using agreed upon records management guidelines. The team also identifies other vulnerabilities for the family and others, and manages the case until it is no longer considered highest risk.

At that time, the case continues to be monitored and the victim and perpetrator continue to be supported by individual agencies without sharing information with the ICAT.18
Safety Planning

The CDHPIVP defines safety planning as finding strategies to protect the victim and those around the victim. Examples of these strategies include a change in residence, an alarm for a higher priority police response, letting others around her know of the risks, a different work arrangement and/or readily accessible items needed to leave home in an emergency including contact information about local domestic violence resources.

Safety planning goes above and beyond providing generic strategies to protect the victim and her children. “Safety planning is based on the principles of empowerment and autonomy and takes into account the context of the victim’s situation.”

Watch for our upcoming Brief on Safety Planning that is coming soon.

As described above, there are multiple domestic violence risk assessment tools that have been developed to assess the risk for re-offence, severe violence, and lethality; however, many of these tools are not representative of perpetrators and/or victims from diverse cultures and backgrounds. Using these generic tools to generalize to all perpetrators and victims of domestic violence is often inappropriate and ineffective and doesn’t capture the unique risks associated with specific diverse populations. Furthermore, most of the research on predictive validity of domestic violence risk assessment tools has been conducted in North America and applied to the majority culture or population. Taking a “one size fits all” approach can lead to inadequate risk management strategies and safety plans and can also bring up issues with the courts in obtaining convictions or determining sentencing and probation conditions.

Concern has been raised about the application of risk assessment tools and psychological assessment instruments to specific populations when they were developed on mixed populations. In a 2015 case, it was successfully argued that this concern was sufficient to place a moratorium on the use of some assessments (not specialized domestic violence assessments) for offenders of Indigenous heritage in Correctional Services Canada. However, this decision was not supported in 2016. In the meantime, new research was produced showing that actuarial risk assessments and risk change scores show predictive validity for both Indigenous and non-Indigenous offenders.

There has been no comparable research in domestic violence risk assessment, although in one study no difference was found between the predictive accuracy of the ODARA for Indigenous versus non-Indigenous offenders.

There has been limited research in the development and use of culturally competent risk assessment tools and it has been recommended that empirically validated risk assessment tools for diverse populations be developed.
Risk Assessment Tools Developed for Vulnerable Populations

The Danger Assessment (DA) has been adapted and revised to identify risk for severe and lethal domestic violence with immigrant women (DA-I), women in same-sex intimate relationships (DA-R), and Indigenous women (Walking the Path Together DA).24,25,26 The DA-I incorporates additional risk factors that have been identified in research as being unique to immigrant women experiencing domestic violence. Research indicates that the DA-I predicted the reoccurrence and severity of domestic violence experienced by immigrant women better than the original DA and the victim’s own prediction of risk.24 The DA-R is comprised of eight factors from the original DA and 10 news factors related to the unique risks for women experiencing abuse in same-sex relationships. A study on the predictive validity of the DA-R indicated that the tool can accurately predict the risk of re-assault in abusive female same-sex intimate relationships.25 As part of the Walking the Path Together Project the DA was modified to address the unique social location of Indigenous women living on reserve. The Walking the Path Together Danger Assessment is designed in a circle which represents the unending cycle of life and contains standard teachings for all Indigenous cultures. Specifically, the calendar portion of the DA takes the form of a circle divided into four sections with each section representing one of the four seasons in the year. Also the questions in the tool are embedded within a circle format that serves as a ‘grounding’ tool for victims to hold while they consider the question being asked. The questions in the DA were also revised to reflect the unique situations of life on reserve. For example, questions around substance abuse were modified to include the problem of prescription substance abuse on reserve and victims are asked to recall any forms of cultural/customs abuse they experienced such as being prevented from participating in traditional Indigenous ceremonies. Finally, a caregiver questionnaire was added to assess the risk posed to the children and the children’s caregiver who is not the primary victim of the violence.26

The PATRIARCH assessment tool uses the structured professional judgement approach to assess the risk for “honour-based violence”. The tool is comprised of 15 factors (10 risk factors and five victim vulnerability factors) identified in the literature and in consultation with experts in the field. The tool has a section for ‘other considerations’ that is filled out by the assessor and a summary risk rating of low, medium, or high risk that is rated in two steps: before and after intervention.27 Currently there is a paucity of research and understanding in assessing risk for children exposed to domestic violence. One study used data from the Ontario Domestic Violence Death Review Committee to examine the effectiveness of three commonly used domestic violence risk assessment tools (i.e., the Danger Assessment (DA); the Ontario Domestic Assault Risk Assessment (ODARA); and the Spousal Assault Risk Assessment (SARA)) in differentiating domestic homicides with child victims and domestic homicides with adult victims only but children present in the home.28 Results revealed that the tools did not differentiate between cases with child victims and cases with adult victims and that risk factors for child homicide in the context of domestic violence are similar to those for intimate partner homicide. In a study using data from fathers with a police record of domestic violence, the ODARA score was higher among men who also assaulted their children.29

There is only one known tool that was developed with the intention of assessing risk for children exposed to domestic violence called the Barnardo’s Domestic Violence Risk Identification Matrix (DVRIM) developed in the UK. The DVRIM uses risk factors associated with child and adult victims of domestic violence as identified in the literature and from child death reviews to assess for domestic violence, risk/vulnerability factors, and protective measures to determine if the children and mother are in need of support or an immediate protection plan.30
Endnotes


18Nicolaidis et al. (2003). Could we have known? A qualitative analysis of data from women who survived an attempted homicide by an intimate partner. Journal of General Internal Medicine, 18(10), 788-94.


22Ewert v. Canada, 2015 FC 1093 (CanLII), <http://canlii.ca/t/g949>, retrieved on 2016-08-29

23Canada v. Ewert, 2016 FCA 203 (CanLII), <http://canlii.ca/t/gss4v>, retrieved on 2016-08-29


