
THE DANGER ASSESSMENT

Informing survivors about their risks and choices

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OVERVIEW OF THE DANGER ASSESSMENT (DA)

DANGER ASSESSMENT

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Several risk factors have been associated with increased risk of homicides (murders) of women and men in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Using the calendar, please mark the approximate dates during the past year when you were abused by your partner or ex partner. Write on that date how bad the incident was according to the following scale:

1. Slapping, pushing; no injuries and/or lasting pain
2. Punching, kicking; bruises, cuts, and/or continuing pain
3. "Beating up"; severe contusions, burns, broken bones, miscarriage
4. Threat to use weapon; head injury, internal injury, permanent injury, miscarriage
5. Use of weapon; wounds from weapon

(If any of the descriptions for the higher number apply, use the higher number.)

Mark Yes or No for each of the following.

("He" refers to your husband, partner, ex-husband, ex-partner, or whoever is currently physically hurting you.)

Yes	No		
		1.	Has the physical violence increased in severity or frequency over the past year?
		2.	Does he own a gun?
		3.	Have you left him after living together during the past year?

- Jacquelyn Campbell, 19
- Social workers
- Law enforcement
- Battered women

Campbell, J. C., Webster, D. W., & Glass, N. (2009). The danger assessment validation of a lethality risk assessment instrument for intimate partner femicide. *Journal of interpersonal violence*, 24(4), 653-674

LEVELS OF DANGER

- Variable Danger – (0 – 7)
 - Increased Danger – (9 –13)
 - Severe Danger – (14 –17)
 - Extreme Danger – (> 18)
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USE OF THE DA

- Shelters
 - House of Ruth
- Law Enforcement
 - First responders link to DV hotline
- Court Advocacy
 - Advocates conduct risk assessment and support safety planning

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NEW DEVELOPMENTS

Danger Assessment - Immigrant Women Circle Project
(co-PI: Jacquelyn Campbell and Bushra Sabri)

NEW DEVELOPMENTS



- Nancy Glass, PhD, MPH, RN, FAAN
 - Decisional Conflict
 - Personalized safety plan
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Janice represents a composite of cases seen in our clinics.

is a 45-year-old woman with poorly controlled diabetes, obesity, and hypertension. She fears that her clinician will be angry with her for not checking her blood sugar, and not losing weight. Janice's clinician has worked with her for over a year and is frustrated by their inability to make progress together on her health issues. Janice has never revealed to any of her clinicians that she was sexually abused during childhood nor that she is currently experiencing severe emotional abuse by her husband.

Machtiger, E. L., Cuca, Y. P., Khanna, N., Rose, C. D., & Kimberg, L. S. (2015). From treatment to healing: the promise of trauma-informed primary care. *Women's Health Issues, 25*(3), 193-197.

Addressing IPV in Primary Care

- Health consequences of IPV
 - Poorer physical and mental health
 - Greater health care utilization
- Policy for IPV screening
 - 2013 - United States Preventive Services Task Force (USPSTF) recommended routine screening
 - 2011- IOM Women's Health Care Committee
- Screening in primary care remains suboptimal
 - 2-50% routine/almost always

Factors Influencing Screening Practices: Barriers and Facilitators



- Barriers
 - Time
 - Lack of protocols/feeling unprepared
 - No referral options
 - Fear of offending the patient
- Facilitators
 - Positive attitude towards screening
 - System-level support

SOLUTIONS



- Can MyPlan address barriers and enhance the facilitators?
 - Will providers feel more encouraged and confident about screening?
 - How might the tool be integrated into primary care?
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MYPLAN/MIA

- Examine the feasibility and acceptability of integrating the MyPlan safety decision aid in routine clinic visits with 20 primary care providers (e.g. physicians, nurse practitioners) and community leaders
 - Examine the feasibility and acceptability of integrating the MyPlan safety decision aid in the primary care clinic visit with young Latina women seeking routine care in partner primary care clinics
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QUESTIONS?
