

## Violence Risk Assessment Practices in Spain

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Although practitioners are faced routinely with the task of assessing the risk of violence, the use of structured methods is neither mandatory nor widespread among mental health, correctional, and law enforcement professionals in Spain. That said, the dichotomous construct of *dangerousness* that had once been widely accepted by both practitioners and the judiciary has largely been replaced during the 21st century by the continuous construct of *risk* (Andrés-Pueyo & Redondo-Illescas, 2007). This shift can be attributed mainly to the recognition that unstructured judgments of dangerousness produce poor levels of both predictive validity as well as interrater reliability (Andrés-Pueyo & Arbach-Lucioni, 2014). The aim of this chapter is to review the history of this conceptual shift, including a discussion of risk assessment tools developed in Spain, as well as the identification of future directions for research and practice in the country.

### History of Violence Risk Assessment in Spain

The rate of incarceration in Spain is higher than in most other European countries at 160 per 100,000 residents (Aebi & Delgrande, 2008). And with a current prison population of approximately 70,000 (Instituto Nacional de Estadística, 2013), almost half of which has a diagnosable mental illness (Ministerio del Interior de España, Dirección General de Instituciones Penitenciarias, 2007), forensic mental health services are of growing importance. Violence risk assessment is a key area of the field, as Article 6 of the Spanish Criminal Code (Spain, 1995) establishes criminal dangerousness as

the main reason for security measures in offenders with mental illness. In addition, imminent risk to self and others is one of the core criteria for civil commitment.

The implementation of structured instruments in the violence risk assessment process has become widespread during the past 30 years in correctional, psychiatric, and legal contexts of developed countries in Europe and North America (Heilbrun, 2009; Otto & Douglas, 2010). These instruments are used to guide professionals when making decisions that have significant implications for civil liberties as well as public safety (e.g., involuntary hospitalization, therapeutic resource allocation, discharge from forensic psychiatric units, release from correctional facilities) (Singh, Grann, & Fazel, 2011). Although, the implementation of such instruments has been comparatively slower in Spanish-speaking countries, Spain is an exception that has kept pace with developments abroad (Andrés-Pueyo & Echeburúa, 2010; Andrés-Pueyo & Redondo-Illescas, 2007; Arbach-Lucioni, 2013).

Unlike other Spanish-speaking countries, Spain has had a unique cultural milieu during the past several decades that has resulted in favor of the paradigm shift from the diagnosis of dangerousness to the assessment of violence risk using structured instruments. As a result of the social impact of highly publicized cases of violence by the media, there is growing public concern in Spain regarding increased rates of recidivism, which has resulted in a call for preventive measures from the federal government. This concern has resulted in increased interest in new evidence-based techniques to predict the likelihood of recidivism in offenders serving their sentences incarcerated or in the community. During the past decade, an increasing number of professionals have adopted the theoretical and technical principles of the structured professional judgment (SPJ) approach to violence risk assessment to address this concern.

The introduction of the Psychopathy Checklist—Revised (Hare, 1991) and the Psychopathy Checklist—Screening Version (Hart, Cox, & Hare, 1995) scales was perhaps the most relevant precursor to the introduction of violence risk assessment tools in professional settings in Spain. Their introduction occurred during the late 20th century, driven by the teams of Dr. Rafael Torrubia from the Universitat Autònoma de Barcelona and Drs. Javier Moltó and Roser Poy from the Universitat Jaume I, and their use spread mainly to prisons and forensic psychiatry units (e.g., Cuquerella et al., 2003; Moltó, Poy, & Torrubia, 2000). The use of these scales was not common in nonforensic settings because the groups responsible for conducting psychopathy assessments were mainly correctional and forensic psychologists and psychiatrists. As a result, the acceptance of violence risk assessment tools has also gained greater acceptance by forensic rather than nonforensic practitioners. Of note, the General Council of Psychological Societies in Spain and the Spanish Society of Legal and Forensic Psychology wrote to the Spanish Ministry of Justice claiming competence in violence risk assessment—a role

that had been allocated previously by the Ministry exclusively to forensic psychiatrists (Santolaya Ochando & Arce Fernández, 2011).

### Current Perspectives on Violence Risk Assessment in Spain

As the psychometric limitations of unstructured clinical judgments of dangerousness began to be disseminated in Spain during the mid 2000s (Andrés-Pueyo & Redondo-Illescas, 2007; Ballesteros Reyes, Graña-Gómez, & Andreu-Rodríguez, 2006; Esbec-Rodríguez, 2003), Dr. Antonio Andrés-Pueyo and his team from the Group of Advanced Studies on Violence at the University of Barcelona (GEAV-UB) began collaborating with Drs. Stephen Hart and Ronald Roesch of Simon Fraser University. Led by Dr. Christopher Webster, the team at Simon Fraser University helped pioneer the SPJ model of violence risk assessment, and they have actively encouraged the translation and implementation of this work in the Spanish context.

The first collaboration between GEAV-UB and Simon Fraser University was the simultaneous translation and adaptation of three commonly used risk assessment tools: the Historical-Clinical-Risk Management 20 (HCR-20; Webster, Douglas, Eaves, & Hart, 1997), the Spousal Assault Risk Assessment (SARA; Kropp, Hart, Webster, & Eaves, 1999), and the Sexual Violence Risk 20 (SVR-20; Boer, Hart, Kropp, & Webster, 1997). The first was translated as the *HCR-20: Guía para la Valoración del Riesgo de Comportamientos Violentos* (Hilterman & Andrés-Pueyo, 2005a), the second as the *S.A.R.A. Manual para la Valoración del Riesgo de Violencia contra la Pareja* (Andrés-Pueyo & López-Ferré, 2005), and the third as the *SVR-20: Manual de Valoración del Riesgo de Violencia Sexual* (Hilterman & Andrés-Pueyo, 2005b).

This work was followed immediately by an investigation of the predictive validity and interrater reliability of these translations. The results of two studies validating the Spanish versions of these tools were published in December 2007 in the Spanish journal *Papeles del Psicólogo*. Specifically, Arbach-Lucioni and Andrés-Pueyo (2007) examined the utility of the translated HCR-20 prospectively in a sample of civil psychiatric inpatients whereas Redondo-Illescas, Pérez-Ramírez, and Martínez-García (2007) explored the utility of the translated SVR-20 retrospectively in a sample of sex offenders in the community. The results from the validation of the Spanish version of the SARA in a forensic sample were published the following year (Andrés-Pueyo, Lopez-Ferrer, & Alvarez-Lopez, 2008).

The number of Spanish publications concerning violence risk assessment has increased as these tools have become used both in research settings and professional practice. Furthermore, government agencies from different autonomous communities (i.e., regional governments) in Spain have shown an interest in the implementation of risk assessment tools,

thereby raising awareness and acceptance. For example, the Catalan Justice Department, the Spanish Home Office, and the law enforcement organization of the Basque Country have all adapted and developed violence risk assessment tools (e.g., Andrés-Pueyo, Arbach-Lucioni, & Redondo-Illescas, 2010; Echeburúa, Amor, Loinaz, & de Corral, 2010; Echeburúa, Fernández-Montalvo, & de Corral, 2009; Garrido-Antón, 2012). The following sections describe the major milestones in the development of some of these tools, including the Canvi en el Risc (RisCanvi), Risc de Violència vers la Dona-Barcelona (RVD-BCN), Escala Revisada de Predicción del Riesgo de Violencia Grave contra la Pareja—Revisada (EPV-R), and the Valoración Policial del Riesgo (VPR).

### RisCanvi

The RisCanvi, or Catalan Multiscale System for Violence Risk Assessment for Offenders, is a risk assessment tool developed by the GEAV-UB that was introduced into the Catalan correctional system in 2009 (Andrés-Pueyo et al., 2010). The instrument was developed in response to the progressive toughening of Spain's penal law, the increasing number of prisoners in the region, and the release of previously violent offenders into the community that resulted in a call among both the general public and justice administrators for a change in the way offenders were assessed, classified, and managed. Consequently, the Catalan Justice Department convened a group of experts and decision makers in 2008 to implement evidence-based measures to reduce violent recidivism, self-harm, intrainstitutional incidents, and technical violations in the Catalan correctional system.

There are two versions of the RisCanvi: a brief screening version comprised of 10 risk factors administered to all offenders and a more comprehensive version comprised of 43 risk factors administered to offenders either judged to be at medium risk or high risk by the screener, or undergoing a significant transition. Risk factors in the RisCanvi are weighted differently depending on the outcome of interest (violent recidivism, self-harm, intrainstitutional incidents, or technical violations). Total scores on the instrument are used to produce an actuarial estimate of recidivism risk associated with one of three risk categories (low, medium, high). The administering practitioner can change this estimate, although justification for this change is required in writing.

The RisCanvi has been found to produce excellent levels of predictive validity for intrainstitutional violent infractions (area under the curve [AUC] = .82, standard error = .02,  $p < .01$ ) (Arbach-Lucioni, Martínez-García, & Andrés-Pueyo, 2012). The study findings examining the predictive validity of the RisCanvi for its other outcomes of interest will be available shortly (Capdevila-Capdevila et al., 2015). The RisCanvi's systematic evaluation of risk factors for different outcome criteria has also led to a better understanding of the differences in risk profiles between specific populations, such as

Spanish nationals versus immigrants (Arbach-Lucioni, Redondo-Illescas, Singh, & Andrés-Pueyo, 2014).

The use of the RisCanvi is now mandatory for assessing all offenders entering the Catalanian correctional system as well as for the reassessment of inmates over time. It includes a detailed user manual, and training in the system's use is provided regularly by the Centre d'Estudis Jurídics i Formació Especialitzada de la Generalitat de Catalunya, or Center for Legal Studies and Specialized Training of the Catalan Government. Because the system is computerized, the Justice Department provides data on an annual basis to the GEAV-UB, which then analyzes its predictive validity and interrater reliability with the aim of adjusting cutoff thresholds and actuarial estimates.

#### Risc de Violència vers la Dona-Barcelona

The autonomous communities of Catalonia, the Basque Country, and Madrid were also pioneers in the development of protocols for the assessment of intimate partner violence risk. A project recently carried out in Catalonia resulted in the development of the RVD-BCN, or Risk of Violence against Women—Barcelona. The instrument was developed between 2008 and 2009 through an initiative of the Circuit Barcelona contra la Violència vers les Dones (CIRCUIT), or Barcelona Network against Gender Violence. CIRCUIT consists of a network of all institutions in the city of Barcelona involved in addressing violence against women (e.g., healthcare, social, legal, educational services).

The RVD-BCN is an SPJ tool for assessing the risk of severe physical violence by intimate partners, and was designed to aid in the identification of suitable interventions for victims receiving CIRCUIT services. The instrument is composed of 16 risk factors measuring five domains: history of violence, severe threats and aggressions against the partner, aggravating circumstances, the partner's vulnerability, and risk perception. Each risk factor is coded dichotomously (presence or absence) and is based on the sum of risk factors present; the victim is classified as being in a situation of low, medium, or high risk.

The RVD-BCN was validated prospectively between 2009 and 2010 in a sample of 216 women attending any of the CIRCUIT facilities. Mean total scores correlated significantly with physical violence at 3 months ( $r[208] = .19$ ,  $p < .05$ ) and 6 months ( $r[202] = .22$ ,  $p < .01$ ). The instrument demonstrated good levels of internal consistency ( $\alpha = .71$ ) and predictive validity for the most severe forms of physical violence during the 6-month follow-up ( $AUC = .72$ , standard error =  $.06$ ,  $p < 0.01$ ), suggesting that the tool may be useful in the assessment and short-term management of this type of violence (Arbach-Lucioni & Andrés-Pueyo, 2014). Both the user manual and the scale

itself have been registered under a Creative Commons license to allow free use (Álvarez et al., 2011).

#### Escala de Predicción del Riesgo de Violencia Grave contra la Pareja

Echeburúa, Fernández-Montalvo, De Corral, and López-Goñi (2009) constructed the EPV, or Prediction Scale for the Risk of Serious Intimate Partner Violence, at the University of the Basque Country. The EPV was developed to evaluate the likelihood of intimate partner homicide victimization in police complainants in the region. Furthermore, the tool was established to enable mental health, legal, and law enforcement professionals to identify which protective measures are required to meet the specific needs of a potential victim. The current revision of the instrument, the EPV-R, consists of 20 items selected for their high statistical relationship with serious intimate partner violence. The EPV-R measures victimization risk across five domains: personal data, relationship type, violence type, aggressor profile, and victim's vulnerability. Total scores are used to classify victimization risk as being low, moderate, or high (Echeburúa, Fernández-Montalvo, & de Corral, 2009). The scale has demonstrated good levels of internal consistency ( $\alpha = .71$ ) and interrater reliability ( $r[448] = .73$ ,  $p < .001$ ) in retrospective studies (Echeburúa et al., 2010). Although the EPV-R is currently being used by police officers in the Basque Country, there are no published prospective studies investigating the relationship between EPV-R assessments and future intimate partner violence.

#### Valoración Policial del Riesgo and Valoración Policial de la Evolución del Riesgo

The Spanish government developed the VPR, or Police Risk Assessment Guide, for use by national and local law enforcement agencies in addressing intimate partner violence around the country (Group of Internal Security Studies, 2010). After surveying the practical utility of the SARA and a related SPJ instrument, the Brief Spousal Assault Form for the Evaluation of Risk (Kropp, Hart, & Belfrage, 2005), in police units from Cantabria and Asturias between late 2006 and early 2007, there was a perceived need for a new instrument adapted to the needs and resources of local security forces working with victims (Garrido Antón, 2012). The result was the computerized VPR system, which consists of 16 risk factors rated on a 6-point scale according to intensity, and weighted according to their empirical association with future intimate partner violence risk against women. The factor structure of the VPR has four dimensions: psychological characteristics, violence, maladjusted behavior, and compliance with the law. When completed, the VPR offers a catalog of police interventions designed to protect potential victims.

Garrido Antón (2012) established good levels of internal consistency for the VPR in a sample of 20,824 intimate partner violence victims ( $\alpha = 0.86$ ).

The VPR has a complementary guide called the *Valoración Policial de la Evolución del Riesgo (VPER)*, or *Police Assessment of Risk Evolution*. This ancillary instrument is comprised of 17 items that aim to reassess intimate partner violence risk to examine whether there have been significant changes in risk level following the initial VPR assessment. Both the VPR and VPER offer the administering practitioner the option of adjusting the level of risk suggested by the computerized system, although this decision requires justification (Garrido Antón, 2012).

There are currently no published findings on the predictive validity of either the VPR or VPER, although preliminary results from a recent report suggest that VPR assessments produce poor levels of predictive validity ( $AUC = .58$ ; 95% confidence interval, 0.49–0.67), with risk levels being routinely underestimated. It has been suggested that this underestimation may be the result of methodological and/or implementation-related issues. Further research is needed to calibrate the weighting algorithms and cutoff thresholds for local populations. In addition, police staff may need additional training on the effective use of these instruments, especially how to code items using information provided by victims (López Ossorio, 2014).

#### Juvenile Violence Risk Assessment Tools

The Spanish juvenile justice system has also benefited from the adaptation of risk assessment tools for use with violent young offenders. Two examples of such instruments are the introduction of the Spanish translation of Hoge and Andrews's (2003) *Youth Level of Service/Case Management Inventory (YLS/CMI)*; Garrido-Genovés, López-Martín, & Silva do Rosario, (2004) in Madrid (Graña-Gómez, Garrido-Genovés, & Cieza-González, 2007), as well as the adaptation by the Catalan government of the *Structured Assessment for Violence Risk in Youth (SAVRY)*; Borum, Bartel, & Forth, (2000) for use in its own juvenile justice system (Vallès-Port & Hilterman, 2006). In addition, two instruments designed to assist in the detection of antisocial personality and psychopathy precursors in juvenile offenders have been translated and adapted for use with Spanish youths—namely, the *Antisocial Process Screening Device* (Frick & Hare, 2001); Spanish adaptation: González, Molinuevo, Pardo, & Torrubia, 2003) and the *Hare Psychopathy Checklist—Youth Version (PCL-YV)*; Forth, Kosson, & Hare, 2003; Spanish adaptation: Graña-Gómez, Garrido-Genovés, & González-Cieza, 2011).

A recent study examined the predictive validity and interrater reliability of the SAVRY, YLS/CMI, and PCL-YV in a 1-year follow-up of 105 Spanish adolescents with a community sanction (Hilterman, Nicholls, & van Nieuwenhuizen, 2014). All three instruments produced excellent levels of predictive validity when used to evaluate the likelihood of self-reported

violent recidivism (AUC range, .72–.75). The SAVRY was found to produce higher levels of interrater reliability (intra-class correlation coefficient [ICC] = .79) than the YLS/CMI (ICC = .51) and PCL-YV (ICC = .63). This is the first study in Spain in which the predictive validity of these three risk measures has been tested in relation to future recidivism. Its methodological rigor has provided a useful model for future research in the field.

#### The International Risk Survey Study in Spain

Within the framework of the International Risk Survey (IRIS) project led by Dr. Jay P. Singh in 2012, the first national survey regarding the use and perceived utility of violence risk assessments was conducted by professionals in the correctional and mental health systems in Spain. Invitations to participate were distributed electronically through online directories of 13 national professional organizations (Box 19.1). Respondents included 35 psychologists and 5 professionals from other disciplines in the area of mental health who had conducted at least one violence risk assessment in Spain during the 12 months before receiving the survey. The mean age of respondents was 42 years (standard deviation [SD], 10.1 years) and they had an average of 14 years (SD, 9.2 years) of experience.

The average number of violence risk assessments made by respondents was 320 (SD, 899) in their lifetime and 35 (SD, 90) during the past year. The SDs of the means showed considerable variability in the practice of risk assessment among professionals, suggesting that a select group of professionals are conducting most such assessments in Spain. On average, 68% to 70% of assessments during the past year were carried out with the help of structured tools. For an average of 57% of assessments (SD, 35%), professionals did not know the outcome that followed the risk assessment they carried out. In other words, they had no criteria with which to compare their predictions. Again, the wide dispersion of this estimate indicates there is no prescribed practice that ensures professionals can compare their predictions with objective measures.

The *Psychopathy Checklist—Revised*, *Psychopathy Checklist—Screening Version*, and *HCR-20* topped the list of the most commonly used tools in Spain for the purposes of risk assessment, both by personal preference as well as by institutional requirement. Forty percent to 45% of respondents reported having used these instruments during the past year. The survey also explored professionals' views regarding the usefulness of these tools for risk assessment, management, and monitoring (see Table 19.1). Interestingly, the *Level of Service Inventory—Revised* (Andrews & Bonta, 1995) was the instrument perceived by professionals to be the most useful for all three tasks, despite the fact that it was designed to predict general recidivism risk rather than violent recidivism risk, and its use is not requested routinely by Spanish institutions. This finding may be important because the *Level of Service*

### Box 19.1 List of Institutions in Spain to Which the International Risk Survey Was Disseminated

#### Forensic Psychiatric Institutions

- Spanish Coroners' Association (*Asociación Nacional de Médicos Forenses*)
- Catalan Coroners' Association (*Asociación Catalana de Metges Forenses*)
- College of Physicians of Barcelona (*Collegi Oficial de Metges de Barcelona*)
- Catalan Institute of Forensic Medicine (*Institut de Medicina Legal de Catalunya*)
- Spanish Society of Forensic Psychiatry (*Sociedad Española de Psiquiatría Forense*)
- Catalan Society of Forensic Medicine and Toxicology (*Societat Catalana de Medicina Legal i Toxicologia*)
- Catalan Society of Psychiatry and Mental Health (*Societat Catalana de Psiquiatria i Salut Mental*)

#### Forensic Psychology Institutions

- Center for Legal Studies and Specialized Training of the Catalan Government (*Centre d'Estudis Jurídics i Formació Especialitzada de la Generalitat de Catalunya*)
- Spanish Society of Legal and Forensic Psychology (*Sociedad Española de Psicología Jurídica y Forense*)
- Psychological Societies of Each Autonomous Community in Spain (*Colegios de Psicólogos de cada Comunidad Autónoma*)
- General Council of Psychological Societies in Spain (*Consejo General de Colegios Oficiales de Psicólogos*)
- Psi-forense@listserv.rediris.es (ListServ)

#### Forensic Nursing Institutions

- Spanish Association for Mental Health (*Asociación Nacional Española de Salud Mental*)

Inventory—Revised contains dynamic risk factors designed to identify treatment targets and responsivity characteristics, both of which have apparent importance to practitioners in the country. The Violence Risk Appraisal Guide (Harris, Rice, & Quinsey, 1993) and Classification of Violence Risk (Monahan et al., 2005) were also required for select facilities, although these are initiatives of specific institutions rather than blanket regulations. In fact,

**Table 19.1 Violence Risk Assessment Tool Use and Perceived Usefulness in Risk Assessment, Management, and Monitoring by 24 Practitioners during the Past 12 Months**

Tool	Use and Perceived Usefulness					
	Assessment			Monitoring		
	% <sub>p</sub>	M <sub>PU</sub> (SD)	% <sub>p</sub>	M <sub>PU</sub> (SD)	% <sub>p</sub>	M <sub>PU</sub> (SD)
HCR-20	58.33	4.3 (0.7)	50.00	4.4 (0.8)	20.83	4.8 (0.5)
LSI-R	12.50	4.7 (0.6)	4.17	5.0 (-)	4.17	5.0 (-)
PCL-R	70.83	4.2 (0.6)	41.67	4.0 (1.2)	20.83	3.6 (1.7)
PCL-SV	58.33	3.9 (0.6)	37.50	3.8 (1.1)	12.50	3.3 (2.1)
VRAG	20.83	4.0 (0.7)	16.67	4.0 (0.8)	12.50	4.3 (0.6)
VRS	12.50	4.0 (1.0)	8.33	4.5 (0.7)	4.17	4.0 (-)

*Note.* %<sub>p</sub>, proportion of respondents who use the tool; HCR-20, Historical-Clinical-Risk Management 20 (Webster et al., 1997); LSI-R, Level of Service Inventory—Revised (Andrews & Bonta, 1995); M<sub>PU</sub>, Mean perceived usefulness measured on a 5-point Likert-type scale (1 point, useless; 5 points, useful); PCL-R, Psychopathy Checklist—Revised (Hare, 1991); PCL-SV, Psychopathy Checklist—Screening Version (Hart, Cox, & Hare, 1995); SD, standard deviation; VRAG, Violence Risk Appraisal Guide (Harris, Rice, & Quinsey, 1993); VRS, Violence Risk Scale (Wong & Gordon, 2009).

there are no regional or national level regulations at this time that indicate which specific instruments should (or should not) be used for the purposes of violence risk assessment.

As with perceived usefulness, cost information could also help institutions and professionals in Spain to choose which instruments to adopt. In the IRIS, unstructured clinical judgments were found to be more expensive but less time-consuming (on average, 5 hours and ~117 per unstructured assessment vs. 10 hours and ~81 for each structured assessment). Given the lower cost of structured assessments, coupled with their greater accuracy and reliability in predicting violence (Ægisdóttir et al., 2006), administrators and decision makers should be aware of the respective costs and benefits of both methods. It would also be useful to examine whether the time required to administer structured assessments could be reduced through adequate training.

### Future Directions for Violence Risk Assessment in Spain

The results of the IRIS study indicate that professionals in Spain have a positive attitude toward adopting new evidence-based instruments for the purposes of violence risk assessment, management, and monitoring. However, our experience during the past decade has shown that the process of integrating

this technology into standard working practices often meets with some resistance, usually the result of both an extreme reliance on unstructured clinical practices and organizational cultures. In addition, some instruments undermine professional trust by being implemented without proper prospective testing of their predictive validity, thus impacting negatively on their general acceptance.

Hence, there are several tasks for the future of violence risk assessment in Spain: (a) strengthen the evidence base of the psychometric properties of risk assessment systems currently in use throughout the country with specific populations (e.g., women, youth, mentally disordered offenders), (b) establish institutional "best-practice" guidelines for institutions to help regulating the professional practice of risk assessment, and (c) encourage mental health, correctional, law enforcement, and justice professionals to support the inclusion of evidence-based practices for violence risk assessment, management, and monitoring in institutions. Spanish researchers also need to ensure the advances they make in the field of risk assessment achieve a greater presence in the international literature.

The trend in legal statutes and institutional policies is clear, especially in those regions of Spain that have pioneered the introduction of violence risk assessment tools. Although the economic crisis that has affected the country since 2008 has likely slowed investment in and development of risk assessment technologies, it seems clear that the academic consensus that has been accepted and promoted by a number of government agencies during the past decade will continue to guide efforts in preventing violence throughout the nation.

## Conclusion

Practitioners and researchers in Spain have kept up to date with international developments in violence risk assessment for mental health, correctional, law enforcement, and judicial professionals. For more than a decade, whether as a result of personal or government initiatives, new techniques have been developed, adapted, and validated, as the focus on diagnosing dangerousness has shifted primarily to that of assessing violence risk (Andrés-Pueyo & Echeburúa, 2010).

The aforementioned IRIS study was the first to present information on the practice of violence risk assessment in Spain. Although no common guidelines in relation to violence risk assessment have been agreed on by professional associations in the country, most respondents reported using the same tools used by professionals from other countries in which the application of these techniques is more widespread (Singh et al., 2014). These results can help administrators and decision makers when it comes to selecting the most appropriate instruments for assessing, managing, and monitoring the risk of future violence. Furthermore, the results highlight the need for routine

training to ensure we achieve an optimal balance between public safety and respect for individual freedoms.

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