

## Reporting Static-99R scores with 2009 recidivism norms (non-routine samples):

A template for cases in which the norms for routine samples do not apply.

**Note: This template is provided as an example only. Evaluators are free to use this template, or to revise the wording as they see fit. Further information concerning the research upon which this template is based can be found at [www.static99.org](http://www.static99.org).**

Mr. XXX was scored on Static-99R, which is an actuarial measure of relative risk for sexual offense recidivism. Given that Static-99R was found to fully incorporate the relationship between age at release and sexual recidivism, whereas the original Static-99 scale did not (Helmus, Thornton, Hanson, & Babchishin, 2011)<sup>1</sup>, the developers of Static-99 recommend that the revised version of the scale (Static-99R) replace Static-99 in all contexts where it is used. Static-99R has shown moderate accuracy in ranking offenders according to their relative risk for sexual recidivism. Furthermore, its accuracy in assessing relative risk has been consistent across a wide variety of samples, countries, and unique settings (Helmus, 2009)<sup>2</sup>. As the table below illustrates, Mr. XXX received a total score of XXX which places him in the Low, Moderate-Low, Moderate-High, or High Risk Category for being charged or convicted of another sexual offence.

### Static-99R Score Summary

	Risk Factor	Yes = 1, No = 0	Scores
1	Age at Release? (Score range is -3 to 1)		
2	Ever lived with (no two year relationship)?		
3	Index non-sexual violence, any conviction?		
4	Prior non-sexual violence, any convictions?		
5	Prior sex offenses? (Score range is 0-3)		
6	Prior sentencing dates (excluding index)?		
7	Convictions for non-contact sex offenses?		
8	Any unrelated victims?		
9	Any stranger victims?		
10	Any male victims?		
<b>TOTAL SCORE =</b>			_____
<b>RISK CATEGORY=</b>			_____

Percentile data are from 2,011 cases from 4 samples of Canadian sex offenders, which were reweighted to approximate the distribution of all convicted sex offenders in Canada. These percentiles appear highly stable in international comparisons with large, relatively

<sup>1</sup> Helmus, L., Thornton, D., Hanson, R. K., & Babchishin, K. M. (2011). Improving the predictive accuracy of Static-99 and Static-2002 with older sex offenders: Revised age weights. *Sexual Abuse: A Journal of Research and Treatment*. Advance online publication. doi:10.1177/1079063211409951

<sup>2</sup> Helmus, L. (2009). *Re-norming Static-99 recidivism estimates: Exploring base rate variability across sex offender samples*. Unpublished master's thesis, Carleton University, Ottawa, Ontario, Canada.

representative samples in Sweden and California (Hanson, Lloyd, Helmus, & Thornton, 2011).<sup>3</sup> Given ties (i.e., several offenders receiving the same score), there are several different ways of reporting percentiles, including the percentage scoring below, the percentage above, and a midpoint average of these values. Percentile rankings are thought to be most useful in situations where the allocation of limited resources must be made, such as for treatment, community supervision, etc. Absolute degrees of recidivism risk cannot be directly inferred from these relative rankings. The appropriateness of applying these percentiles to sexual offenders in jurisdictions other than those listed above is not known.

Compared to other adult male sex offenders, Mr. XXX's score is in the XX<sup>th</sup> percentile (defined as a midpoint average). Taking into account that about XX% of sex offenders shared the same score as Mr. XXXX, the percentile means that roughly XX% of offenders scored lower than Mr. XXXX, and XX% scored higher.

Relative risk ratios refer to the ratio of two recidivism rates. Research has found the relative risk associated with different Static-99R scores to be consistent even when the overall base rate of recidivism varies across samples. Risk ratios for Static-99R scores were based on 8 samples of sexual offenders from Canada, the United States, the United Kingdom, Austria, and Sweden ( $n = 4,037$ ). The analyses were based on routine (i.e., relatively unselected) correctional samples. The recidivism rate for sex offenders with the same score as Mr. XXXX would be expected to be approximately (half/two thirds) of (**FOR SCORES LOWER THAN 2**), the same as (**FOR SCORES OF 2**), X.X times higher than (**FOR SCORES GREATER THAN 2**) the recidivism rate of the typical sexual offender (defined as median score of 2).

There have been a large number of studies examining the absolute sexual recidivism rates associated with Static-99 scores. Helmus (2009) combined 28 Static-99 replication studies and was able to calculate Static-99R scores for 23 of these samples. The samples ( $n = 8,139$ ) were drawn from Canada, the United States, United Kingdom, western Europe and New Zealand. Recidivism was defined as charges in about half of these studies and as convictions in the other half.

Although the relative risk was consistent across studies, the observed recidivism base rates varied considerably across samples based on factors not measured by Static-99R. Samples that were preselected to be high-risk/high needs (6 samples) show the highest recidivism rates, samples preselected based on treatment need (6 samples) had intermediate recidivism rates, and routine (i.e., unselected) correctional samples had recidivism rates substantially lower than the preselected groups (and also lower than the recidivism rates in the original development samples for Static-99).

Consequently, in order to evaluate Mr. XXXX we need to consider the extent to which he resembles the typical member of the routine samples, or if he is more representative of the samples preselected for treatment or the high-risk/high needs samples.

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<sup>3</sup> Hanson, R. K., Lloyd, C. D., Helmus, L., & Thornton, D. (in press). Developing non-arbitrary metrics for risk communication: Percentile ranks for the Static-99/R and Static-2002/R sexual offender risk tools. *International Journal of Forensic Mental Health*.

The best method of determining which sample type is the most appropriate match to an individual is not fully known. The position of the test developers is that the variability across samples can best be explained by differences in the density of individual risk factors not already included in the scale. Consequently, determining the appropriate sample type reference group should be based on consideration of psychologically meaningful risk factors (e.g., a dynamic risk assessment scale). As a general guideline, the routine norms should be used for offenders low on external psychologically meaningful risk factors. The preselected for treatment norms should be used for offenders with moderate needs on external risk factors. The preselected high risk/needs norms should be reserved for offenders with pronounced external psychologically meaningful risk factors (e.g., reserved for no more than the top 10-20% highest risk).

In the absence of information about external psychologically meaningful risk factors, evaluators can also consider the features of the three samples, which are described in further detail below.

#### Routine Correctional Samples

This group consisted of eight samples of sex offenders from Canada, the United States, England, Austria and Sweden. These samples were relatively random (i.e., unselected) samples from a correctional system (as opposed to samples from specific institutions or subject to specific measures). In other words, they can be considered roughly representative of all adjudicated sex offenders. Some offenders in these samples would have been subsequently screened for treatment or other special measures (e.g., psychiatric admission or exceptional measures related to dangerousness), but these samples represent the full population of all offenders prior to any preselection processes. The recidivism norms for the unselected samples are the closest available to a hypothetical average of all sex offenders.

#### Preselected for Treatment Needs Samples

This group consisted of six samples of offenders referred for sex offender specific treatment during their current incarceration. If an offender is selected for treatment but does not receive it due to bed shortages, he would still be considered preselected for treatment. It is the selection that defines this sample, not the participation in treatment. This includes referral for community sex offender treatment programs for any type of conditional release during the current incarceration or for non-custodial sentences. The quality of the treatment program, jurisdiction of the program, program structure (length or content), and the quality of the offender's participation in and completion of the program is not a consideration in the definition of this group. These factors would be taken into account by an evaluator outside of the Static-99R assessment. This sample is defined by the presence of treatment needs. Samples were categorized in this group if the treatment program was specific to sex offenders and offenders were referred for treatment during their current incarceration. Given the overlap in dynamic risk factors between sex offenders and general offenders, it is plausible that offenders referred to other (i.e., non-sex-offender-specific) treatment programs may be similar to this group. Additionally, offenders referred for treatment during previous incarcerations could also plausibly fit in this group given that at some point they were identified as having treatment needs warranting intervention and that they subsequently reoffended.

Preselected for High-Risk/High-Needs Sample

This would include a small minority of offenders selected from routine correctional populations on the basis of risk and need factors external to Static-99R. Offenders in this group were referred for services at forensic psychiatric facilities, such as offenders referred as Mentally Disorder Sex Offenders, Sexually Violent Predators/Sexually Dangerous Persons, Not Guilty by Reason of Insanity, or for treatment of a mental disorder (sexual or otherwise). It would also include offenders referred to intensive treatment programs reserved for the highest risk offenders (not moderate intensity treatment programs, or treatment programs offered to the majority of sex offenders). Offenders identified as high risk through a quasi-judicial or administrative process examining a range of risk relevant characteristics such as sentence extensions for dangerousness (e.g., preventative or indefinite detention, treatment orders, denial of statutory release) would also be in this group.

Non-Routine Correctional Sample

The non-routine group includes all samples of offenders preselected in some way. It therefore combines samples preselected based on treatment need, as well as those preselected as high risk/high need, and also includes a small number of offenders preselected in different ways that fit neither category (e.g., preselected based on offence severity). In some cases there may have been some measure of preselection and the offender would be most similar to either the preselection for treatment or pre-selection for high-risk/ high-needs samples. If the amount of preselection is unknown and there is no strong evidence to differentiate between preselected for treatment and pre-selected for high-risk/high-needs then the non-routine sample norms are an option to consider.

In applying the recidivism norms it is ideal to use local norms that are applicable to the group of offenders to which this offender most closely resembles. Given that these norms are not often available, the routine sample will usually reflect the most appropriate recidivism rates as they are representative of typical sex offenders in correctional systems. If an evaluator believes that the offender being assessed is not typical, then it may be appropriate to use the recidivism rates from samples pre-selected for treatment, high-risk/needs, or the non-routine norms. Using any of the non-routine or preselected norms, however, requires justification.

Mr. XXXX scored a XX on the Static-99R. Offenders with the same score as Mr. XXXX from the routine/preselected treatment need/preselected high risk and needs/non-routine samples have been found to sexually reoffend at a rate of XXXX percent in five years and XXXX percent in ten years.

The justification for using the recidivism rates from the preselected treatment need/preselected high risk and needs/non-routine samples is as follows: