

# BC Summary of Intimate Partner Violence Risk Factors (BC SIPVR)



The SIPVR is a summary of some of the risk factors associated with an increased likelihood of future intimate partner violence (IPV). This is not a formal risk assessment tool, but rather a job aid for use by trained police officers to assist with identifying risks while conducting and documenting evidence-based, risk-focused IPV investigations. In addition to identifying individual IPV risk factors, always document escalating, persistent or repeat behaviours and patterns of coercive control (section 1.7).



Date of ICAT meeting: \_\_\_\_\_ Police file number: \_\_\_\_\_



## TEXT IN THE BOXES BELOW ARE TO DESCRIBE RISK AND IMPORTANT NOTES


### RISK FACTOR


Indicates a risk factor associated with an increased likelihood of future violence and an increased severity of future violence

| Relationship History |   |   | Yes | No |
|----------------------|---|---|-----|----|
| 1.1                  | <b>Recent or Threatened Separation</b><br> | <p>Is there recent, threatened or pending separation in the relationship?</p> <p><b>Document time frame paying particular attention to separation in the past 12 months.</b></p> <p><b>Note: An actual or pending separation in the current relationship is the most significant risk factor associated with an increased severity (escalation) of future violence.</b></p> <p><b>Consider in conjunction with section 1.7, Coercive and Controlling Behaviour.</b></p> |     |    |
| 1.2                  | <b>Escalation in Abuse</b><br>             | <p>Is there escalation in frequency or severity of abuse toward the complainant (COM), family members, another person, animals or family pet? Escalation may take a variety of forms including increased calls for service, escalation of verbal to physical abuse, escalation of verbal abuse to threats (see section 1.4, Threats), and increase in severity of physical abuse.</p>   |     |    |

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| <p>1.2<br/>cont.</p> | <p><b>Escalation<br/>in Abuse</b></p>  | <p><b>Note:</b> Escalating violence could indicate an “imminent risk,” particularly when combined with recent/pending separation or other recent stressors.</p>  |  |  |
| <p>1.3</p>           | <p><b>Children</b></p>  | <p>Are there children (under 19 years of age), whether or not present or living at home?</p> <p>Document legal names, DOBs, and relationship to suspect (SUS) and COM (bio, step, foster, etc.).</p> <p>Is there a child custody, access or guardianship dispute?</p> <p>Are court orders in place?</p> <p>Obtain copies of court orders if available.</p> <p>Contact the Ministry of Children and Family Development (MCFD) Provincial Centralized Screening 1-800-663-9122. Document MCFD contact in your Report to Crown Counsel.</p>   |  |  |
| <p>1.4</p>           | <p><b>Threats</b></p>                | <ol style="list-style-type: none"> <li>Has the SUS ever threatened to kill or harm the COM?</li> <li>Has the SUS ever threatened to kill or harm children, a family member, another person or family pet?</li> </ol> <p>Document the wording of the threat, the subject of the threat, who the threat was made to, and how the threat was made (e.g., was it an overt threat, a threat made during a strangulation incident, an implied threat, etc.).</p> <p>Document how often the threats have been made, with a focus on recent escalation.</p> <p>Refer to section 4.1, Firearms/ Weapons, if threat involved a weapon.</p> |  |  |
| <p>1.5</p>           | <p><b>Sexual<br/>Coercion</b></p>   | <ol style="list-style-type: none"> <li>Has SUS pressured or forced COM into sexual acts?</li> <li>Have there been unwanted and/or harmful forms of sexual aggression against the COM’s will (e.g., biting, etc.)?</li> <li>Is sex ever humiliating or degrading?</li> </ol> <p><b>Note:</b> Sexual assault, abuse or coercion is commonly experienced by IPV COMs. Sex may be used to demonstrate power and control over the COM.</p>  |  |  |


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| <p>1.6</p> | <p><b>Strangulation/<br/>Suffocation<br/>(Choking)</b></p> <p>s. 267(c) CC</p>  | <ol style="list-style-type: none"> <li>1. Did strangulation occur in the current incident? If so, obtain immediate medical attention.</li> <li>2. Has the SUS ever strangled, choked or suffocated the COM?</li> <li>3. Has the SUS ever threatened or gestured strangulation toward the COM?</li> </ol> <p>Document any neck marks or bruising, discomfort, cough, petechia. Look for defensive injuries to SUS (e.g., scratch marks or bite marks on SUS's hands, arms or face etc.).</p> <p>Document method of strangulation (i.e., with hands, arms, body, ligature). <b>Note:</b> While COM may not recall being strangled, if they lost control of bodily function, or can't recall what happened during an assault, this may be an indication of a non-fatal strangulation incident where they lost consciousness.</p>   |  |  |
| <p>1.7</p> | <p><b>Coercive<br/>Controlling<br/>Behaviour</b></p>                          | <p>Document coercive controlling behaviour (CCB) as part of an overall pattern of behaviour.</p> <p>Is there a pattern of CCB toward the COM, including but not limited to:</p> <ol style="list-style-type: none"> <li>1. Expressing jealousy, sexual jealousy, or signs of obsessive or possessive behaviour.</li> <li>2. Isolating the COM by controlling/limiting activities or contact with others.</li> <li>3. Withholding/restricting/monitoring use of vehicle, phone, clothing, finances, medication, or any other resources.</li> <li>4. Micro-regulation of everyday life.</li> <li>5. Surveilling COM in person or through technology (e.g., cameras, tracking apps, phone, or social media, etc.).</li> <li>6. Setting rules, curfews, or schedules.</li> <li>7. Threatening consequences for not complying (e.g., violence, self-harm, harm to other people, harm to pets, destruction of property, revenge porn, etc.).</li> <li>8. <b>Criminal Harassment (s. 264(1) CC):</b> stalking, persistent following, watching, or engaging in persistent and unwanted communication with COM or a previous intimate partner.</li> </ol> |  |  |


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| <p>1.7<br/>cont.</p> | <p><b>Coercive Controlling Behaviour</b></p>  | <p>Has the SUS behaviour persisted after being charged or warned by police?</p> <p>Is there a pattern of CCB in this or previous relationships? Is it escalating? Look for overlapping patterns in other risk factors (see sections 1.4 Threats, 1.5 Sexual Coercion, and 3.7 Suicidal Ideation, etc.).</p> <p><b>Note:</b> Research consistently identifies that where there is CCB, the severity of the violence can escalate when the COM attempts to leave the relationship or regain control.</p> <p>Consider this factor in conjunction with section 1.1 Recent or Threatened Separation.</p> |  |  |
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| Complainant's Risk Factors |   |  | Yes | No |
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| <p>2.1</p>                 | <p><b>Perception of Personal Safety</b></p>   | <ol style="list-style-type: none"> <li>Does the COM believe that the SUS could harm or kill them or their children?</li> <li>Does the COM believe SUS will disobey release conditions, particularly a no contact order?</li> </ol> <p>Document the basis of the COM's fear/belief and examples. Determine what access the SUS has to the COM. Always address this in the safety plan.</p> <p><b>Note:</b> Trauma and culture can cause people to present their responses to fear and risk in different ways. While some people may show extreme fear, some may not demonstrate or articulate fear in an obvious way.</p> |     |    |
| <p>2.2</p>                 | <p><b>Perception of Future Violence</b></p>  | <ol style="list-style-type: none"> <li>Does the COM believe that the violence is escalating?</li> <li>Does the COM fear further violence if the SUS is released from custody?</li> </ol> <p>Document COM's perceptions of future violence and reasons for belief. Include in the safety plan.</p> <p><b>Note:</b> It is not uncommon for a COM to minimize risk to self and their children, but they may be able to assess whether there is an escalating level of risk. Trauma and culture can cause people to perceive their own risk in different ways.</p>   |     |    |

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| 2.3 | <b>Complainant's Vulnerabilities</b> | <p>Are there factors present that increase COM's risks including:</p> <ol style="list-style-type: none"> <li>1. Isolation/marginalization (e.g., remote location, rural, on-nation/reserve, language barrier, literacy, cognitive or physical disability, age, pregnancy, engaged in sex work, etc.).</li> <li>2. Compromised physical or mental health, or substance abuse issues?<br/><b>Note: COM's intoxication at the time of an intimate partner violence incident can increase the risk for lethal violence.</b></li> <li>3. Inadequate community support or unsafe living conditions (e.g., poverty, financial dependence, homelessness, unsuitable housing, lack of transportation, etc.).</li> <li>4. Is the woman Indigenous, an immigrant or refugee?</li> <li>5. Are there potential cultural safety barriers (e.g., male privilege, fear of seeking help, shame, religious beliefs, distrust of police, threats from family or community, intergenerational trauma, gender inequality, social isolation, etc.)?</li> </ol> <p>See also section 3.8, Suspect Supports or Condone Violence.</p> |  |  |
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| Suspect History |  |   | Yes | No |
|-----------------|--|---|-----|----|
| 3.1             | <b>Criminal Violence History (non-IPV)</b> | <p>Does the SUS have a history of: making threats, intimidation, violence, strangulation, sex assaults, or criminal harassment toward any person?</p> <p><b>Note: Research suggests that persons who engage in general violence (non-IPV) as well as IPV tend to show a more overall antisocial pattern of behaviour. For this group, factors like substance abuse (section 3.4), unemployment (section 3.5), and mental health issues (section 3.6) are particularly relevant to consider.</b></p> |     |    |
| 3.2             | <b>IPV History</b>                         | <p>Is there a history/pattern of CCB, criminal harassment, violence, threats or other abuse in the current or a previous intimate partner relationship? Document all IPV incidents in last 60 days (reported and non-reported).</p>   |     |    |

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| 3.2<br>cont. | IPV History  | <p>Note: History of IPV is common in cases of lethal IPV; however, in many cases the IPV history was not known to police.</p>   |  |  |
| 3.3          | Court Orders/<br>Violations of<br>Conditions   | <ol style="list-style-type: none"> <li>1. Has the SUS ever violated a court order?</li> <li>2. Is the SUS presently bound by any court orders including protection orders under the Family Law Act (FLA) or Child, Family and Community Service Act (CFCSA)?</li> <li>3. Is the SUS in a reverse onus situation for bail?</li> </ol> <p>Obtain copies of court orders whenever possible.<br/>CALL POR: 1-800-990-9888 (POLICE ONLY 24/7)</p>  |  |  |
| 3.4          | Alcohol/Drugs  | <ol style="list-style-type: none"> <li>1. Was the SUS using or intoxicated at the time of the incident?</li> <li>2. Is there a recent history of substance abuse?</li> <li>3. What substances are used? How often?</li> <li>4. Does the SUS become angry, jealous or violent when using a substance?</li> <li>5. Are there other addictive behaviours stressing the relationship (e.g., gambling)?</li> </ol>   |  |  |
| 3.5          | Financial<br>Instability   | <ol style="list-style-type: none"> <li>1. Is the SUS experiencing financial problems? Is this a factor in the conflict?</li> <li>2. Have there been recent changes in employment? Is this a factor in the conflict?</li> </ol> <p>Document relevant employer information.</p>   |  |  |
| 3.6          | Mental Health<br>Concerns<br> | <ol style="list-style-type: none"> <li>1. Is there information to suggest SUS is suffering from depression or any mental health issue?</li> <li>2. Is there a formal diagnosis (e.g., depression, psychosis, etc.)?</li> <li>3. If yes, is SUS currently complying with mental health care (taking meds/attending therapy, etc.)?</li> <li>4. Have there been recent changes in any prescription(s)?</li> </ol> <p>Obtain treating doctor/psychiatrist name(s) if applicable. Also document any serious medical issues.</p> <p>Note: Depression is consistently identified as a risk factor in lethal cases of IPV.</p> |  |  |

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| <p>3.7</p> | <p><b>Suicidal Ideation</b></p>  | <ol style="list-style-type: none"> <li>1. Has the SUS discussed, threatened or attempted suicide (self-harm)?</li> <li>2. If YES, when and how?</li> </ol> <p><b>Recall PIMAL: Plan, Intent, Means, Access, Lethality.</b></p> <p><b>Note: Superficial attempts or threats to commit suicide, particularly when they occur in conjunction with a victim intending to leave the relationship, may be part of a pattern of coercive and controlling behaviour.</b></p> <p><b>See sections 1.1 (separation) and 1.7 (CCB).</b></p>  |  |  |
| <p>3.8</p> | <p><b>Suspect Supports or Condones Violence</b></p>   | <p>Does the SUS show attitudes or beliefs that support or condone violence, such as:</p> <ol style="list-style-type: none"> <li>1. Behaviours suggestive of patriarchal attitudes or attitudes supporting male dominance over females.</li> <li>2. Extreme minimization or denial of the severity of the abuse.</li> <li>3. Normalization of violence (possibly due to intergenerational trauma, PTSD, post-war survivor trauma, etc.).</li> <li>4. Blaming the COM or condoning the use of violence to control COM.</li> <li>5. Entitlement or privilege.</li> </ol> <p><b>Provide behavioural examples where possible.</b></p> <p><b>Note: Hostile attitudes toward women and attitudes justifying, or favourable toward, the use of violence against women are factors that are consistently empirically related to the victimization of an intimate partner.</b></p> |  |  |

| Access to Firearms/Weapons |  |  | Yes | No |
|----------------------------|--|--|-----|----|
| 4.1                        | <p><b>Firearms/ Weapons Used or Threatened</b></p>  | <p>Has SUS used or threatened to use a firearm or any weapon against the COM, children, family member, another person, self or family pet?</p> <p>Document the wording of the threat, the subject of the threat, who the threat was made to, and how the threat was made (e.g., was it an overt threat, a threat made during a strangulation incident, an implied threat, etc.). Document how often the threats have been made with a focus on recent escalation.</p> <p>Refer back to section 1.4 Threats, and also determine if threat is part of a pattern of coercive controlling behaviour (section 1.7).</p> |     |    |
| 4.2                        | <p><b>Access to Firearms/ Weapons</b></p>  | <p>Does SUS have access to firearms/weapons?</p> <p>What types? Where and how are they stored? Are they readily accessible? Who has access?</p> <p>Are they legally possessed? Is the SUS prohibited from possessing firearms/weapons?</p> <p>Obtain copies of any orders.</p> <p>Is there evidence of extreme interest in, or a stockpiling of, firearms or weapons?</p> <p>Document efforts to determine if the SUS does or does not have access to firearms. This must include, but should not be limited to, checking the CFRO.</p>  |     |    |