

LETHALITY ASSESSMENT

(To the providers: The Lethality Assessment should be administered to patients who screen positive for domestic violence in order to determine the level of danger and severity of the situation. There is no fixed score for this assessment that indicates on woman will be murdered and another will not; providers should use their judgment to interpret the information which the victim provides. Roughly, more yes answers to the Lethality Assessment questions indicate that the patient is more likely to be killed or severely injured. It is important to use the results of this assessment in a constructive way, to develop a safety plan that will address the specific circumstances of the victim's situation.

To the Patient: Several risk factors have been associated with homicides (murder) of both batterers and battered women/men. 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 severe battering and to see how many of the risk factors apply to your situation. The s/he in the questions refers to husband, wife, life partner, ex-husband, ex-wife, ex-partner, or whoever is physically hurting you.

Please check YES or NO for each questions below.

YES NO

- ___ ___ 1. Has the physical violence increased in frequency over the past year?
___ ___ 2. Has the physical violence increased in severity over the past year and/or has a
 weapon been used?
___ ___ 3. Has s/he ever tried to choke you?
___ ___ 4. Is there a gun in the house?
___ ___ 5. Has s/he ever tried to force you into sex?
___ ___ 6. Does s/he use drugs? By drugs I mean "uppers" or amphetamines, speed, angel dust,
 cocaine, "crack", street drugs, heroin, or mixtures.
___ ___ 7. Does s/he threaten to kill you, and/or do you believe s/he is capable of killing you?
___ ___ 8. Is s/he drunk every day or almost everyday? (In terms of quantity of alcohol.)
___ ___ 9. Does s/he control most of your daily activities? For instance, does s/he tell you who
 you can be friend with, how much money you can take with you shopping, or when
 you can tak the car? (If he tries, but you do not let him/her, check here ___)
___ ___ 10. Have you ever been beaten by him when you were pregnant? (if never pregnant by
 him, check here ___)
___ ___ 11. Is s/he violently and constantly jealous of you? (For instance, does s/he say, "If I can
 have you, no one can"?)
___ ___ 12. Have you ever been threatened or tried to commit suicide?
___ ___ 13. Has s/he ever threatened or tried to commit suicide?
___ ___ 14. Is s/he violent outside of the home?

TOTAL YES ANSWERS: _____

