

UNC CFAR Social and Behavioral Science Research Core SABI Database

INSTRUMENT TITLE: Mediator's Assessment of Safety Concerns and Issues (MASIC)

SOURCE ARTICLE: Pokman, V., Rossi, F. S., Holtzworth-Munroe, A., Applegate, A. G., Beck, C. J., & D'Onofrio, B. M. (2014). Mediator's Assessment of Safety Issues and Concerns (MASIC) Reliability and Validity of a New Intimate Partner Violence Screen. *Assessment*, 21(5), 529-542.

POPULATION: general population

RESPONSE OPTIONS: Participants respond yes or no to each item; if yes, then the MASIC asks how often that behavior occurred in the past year, with responses given on a scale from *never* to *daily*.

SCORING: "(a) An IPV/A *ever variety total score* was the sum of the different kinds of violent and abusive behaviors occurring during the relationship. Given 37 items, each "yes" (scored 1) or "no" (scored 0), the ever variety total score can range from 0 to 37. (b) An IPV/A *past year variety total score* was generated with the same method. Each behavior reported in the past year is given a score of 1; this score can range from 0 to 37. (c) An IPV/A *past year frequency total score* was calculated by assigning numbersfor the response options from *never* = 0 to *daily* = 5. A past year frequency score was computed by adding the reported frequencies of all listed violent and abusive behaviors; the past year frequency total score can range from 0 to 185." (Pokman et al 533)

SURVEY ITEMS: [enter survey here]

TERMS OF USE:

Individuals may use this information for research or educational purposes <u>only</u> and may not use this information for commercial purposes. When using this instrument, please cite:

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When presenting results using any survey information you obtained from the SABI, please acknowledge the University of North Carolina at Chapel Hill Center for AIDS Research (CFAR), an NIH funded program P30 AI50410.



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[This instrument has already been formatted by the author. Please see attached.]

RELIABILITY INFORMATION: Confirmatory factor analysis conducted, McDonald's omega was computed to assess the internal consistency—ranging from 0.44-0.94, average interim correlations conducted—0.31.

VALIDITY INFORMATION: Construct validity found no statistically significant gender differences on questions.

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APPENDIX

Date:	Case Name(s):	Case Number:	Circle: Mother/Father
	· /		

MEDIATOR'S ASSESSMENT OF SAFETY ISSUES AND CONCERNS (MASIC)ⁱ (ADMINISTERED VERBALLY BY THE MEDIATOR IN FAMILY LAW CASES WITH CHILDREN)

The authors of this instrument recommend that, if possible, the mediator should (a) obtain any court or police records that might address parties' violent or abusive conduct before completing this Assessment, (b) complete this Assessment in intake session(s) separate from negotiation session(s), and (c) complete this Assessment with each party privately (i.e., separately from the other party).

[Read introduction and questions to each party:] In mediation, parents work together to try to make decisions in their children's best interests outside of court. The mediators do not take sides and will not be making any decisions. Rather, the mediators assist both parents in exploring ways to resolve any disagreements in this confidential settlement process. Before the parents start negotiations, we ask parents to give us some background information and to complete a confidential intake form. Please answer the following background questions to the best of your ability, keeping in mind that we will keep your answers to these questions private and confidential from the court and the other parent:

Section 1

1. what is your age:		what is the other	parent s age:			
2. Are you employed?	Yes No	Is the other pa	rent employed?	Yes	No	
3. If you have ever lived/stogether? [Focus here on w	•	* '		-	lived or	stayec
4. If you have ever lived	stayed with tl	he other parent, for	how long did you	live/stay	together	,
5. Which parent left the r	elationship? Y	You The other paren	t Both parents de	cided to e	nd relatio	onship
6. Why did [you/the other	er parent] leav	e the relationship?				
7. Do you have any child	ren from anot	her marriage or rela	tionship who live	with you	? Yes	– No
8. If yes, how does the ot	ther parent get	t along with your of	her child or child	ren?		_
9. Are you comfortable m	nediating with	the other parent?	Yes No			_

¹ Amy Holtzworth-Munroe, Connie J.A. Beck, and Amy G. Applegate, Mediator's Assessment of Safety Issues and Concerns (MASIC) (2010). The questions in Section 2 of this assessment have been adapted from Marshall L.L., Development of the Severity of Violence Against Women Scale; Sullivan CM, Parisian JA, Davidson WS, Index of Psychological Abuse; and Tjaden P, Thoennes N, National Violence Against Women Survey. The Marshall, Sullivan, and Tjaden screens, in their entirety, have been validated; however, the adaptation and use of selected questions from validated screens does not validate this screen. The authors wish to acknowledge their law and psychology students who assisted, directly and indirectly, in the development of this Assessment.

ⁱⁱTo obtain a copy of the Confidential Intake Form used by mediators in the Viola J. Taliaferro Family and Children Mediation Clinic at the IU Maurer School of Law, contact Professor Amy G. Applegate at aga@indiana.edu.

10. If not, what makes you uncomfortable?
11. What, if anything, would make you feel more comfortable?
12. Do you think there is any reason why you should not participate in this mediation? Yes No 13. If yes, please explain:
14. Everyone fights or argues with family members and friends now and then. What happened when you fought or argued with the other parent involved in this mediation?
15. Which of the following statements most correctly describes how you and the other parent have made decisions in the past twelve (12) months? [If parents ask what kind of decisions, break ou question into child/ren's care/finances/other kinds of decisions — ask them to clarify.] Mother has made almost all decisions Mother has made the majority of the decisions We have shared equally in making decisions Father has made the majority of the decisions Father has made almost all of the decisions
16. How satisfied are you with your role in influencing and making decisions about your child/ren's care?
Very satisfied Satisfied Neutral/it varies Unsatisfied Very unsatisfied 17. Do you have any of the following concerns about the other parent? Overuse of alcohol or prescription medications Illegal drug use Mental health problems Child abuse and/or neglect concerns Any criminal history
If yes, please tell me about your concerns:
18. Do you think the other parent will say that s/he has any of the following concerns about you? Overuse of alcohol or prescription medications Illegal drug use Mental health problems Child abuse and/or neglect concerns Any criminal history
19. During the mediation, would you prefer to sit in the same room with the other parent or in a different room?
Same room Different room No preference 20. If in a different room, why?
21. If in the same room, why?
22. Are there any current or past protective orders, restraining orders, or orders of protection issued against the other parent in this case? Yes No 23. If yes, please explain:

24. Does the other parent own or have access to any weapons? Yes No 25. If yes, what kind(s) of weapons?							
26. Do you own or have access to any weapons? 27. If yes, what kind(s) of weapons?	Yes	No					
28. If the Court ordered mediation, why do you be mediation?	lieve that	the Co	ourt ordered this matter to				
29. What parenting plan or arrangements do you th	ink woul	d work	best for your family?				

Section 2

Now, I am going to ask you a series of questions about your relationship with NAME [the other parent]. I am interested in things that [NAME] may have done during a conflict, disagreement, fight, or in anger, or to scare you or hurt you.

First, I will ask if something ever happened, and you should answer yes or no.

Second, if you answer yes, then I will ask how often it happened within the past 12 months. Please tell me how often based on the sheet I just gave you [explain sheet and ensure it is in front of them when answering].

A = never, B = once or twice, C = three to six times (approx. once every few months), D = seven to twelve times (approx. every month or two), E = weekly, F = daily

A. Did the other parent ever (whether living together or not)			B. How often did that happen in the past 12 months?						
1.	Call you names?	Yes	No	Α	В	С	D	Е	F
2.	Insult you or make you feel bad in	Yes	No	A	В	С	D	Е	F
	front of others?					~			_
3.	Yell or scream at you?	Yes	No	Α	В	С	D	Е	F
4.	Forbid you to go out without him/her?	Yes	No	Α	В	С	D	Е	F
5.	Try to control how much money you had or spent?	Yes	No	A	В	С	D	Е	F
6.	Try to control your activities in or outside the home?	Yes	No	A	В	С	D	Е	F
7.	Try to control your contact with family and friends?	Yes	No	A	В	С	D	Е	F
8.	Act extremely jealous, or frequently check up on where you've been or who you've been with?	Yes	No	A	В	С	D	Е	F
9.	Demand that you obey him/her?	Yes	No	Α	В	С	D	Е	F
10.	Physically abuse or threaten to abuse pets to scare or hurt you, or when angry at you?	Yes	No	A	В	С	D	Е	F
11.	Punish or deprive the children because he/she was angry at you?	Yes	No	A	В	С	D	Е	F

12.	Make threatening gestures or faces at	Yes	No	A	В	C	D	Е	F
13.	you or shake a fist at you? Threaten to take or have the children	Yes	No	A	В	С	D	Е	F
	taken away from you?								
14.	Destroy property, for example, hit or kick a wall, door, or furniture or	Yes	No	A	В	С	D	Е	F
	throw, smash, or break an object?								
15.	Drive dangerously to scare you, or when angry at you?	Yes	No	A	В	С	D	Е	F
16.	Throw an object at you to scare or hurt you, or when angry at you?	Yes	No	A	В	С	D	Е	F
17.	Destroy or harm something you care about?	Yes	No	A	В	С	D	Е	F
18.	Threaten to hurt someone you care about?* (If yes, ask for details and write them here)	Yes	No	A	В	С	D	Е	F
19.	Threaten to hurt you?* (If yes, ask for details and write them here)	Yes	No	A	В	С	D	Е	F
20.	Threaten to kill him/herself?* (If yes, ask for details and write them here)	Yes	No	A	В	С	D	Е	F
21.	Threaten to kill you?* (If yes, ask for details and write them here)	Yes	No	A	В	С	D	Е	F
22.	Threaten you with a weapon or	Yes	No	A	В	С	D	Е	F
	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here)								
Iн	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions coduring a conflict, disagreement, or figure		iings ti						, F
<i>I</i> w	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions coduring a conflict, disagreement, or figure Hold you down, pinning you in place?	ht, or in Yes	nings ti anger,	or to	scare	or hu	irt yo	и.	
23. 24.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions coduring a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist	ht, or in	iings ti anger,	or to	scare B	or hu	rt yo D	и. Е	F
23. 24. 25.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions coduring a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you?	Yes Yes Yes Yes	No No No	A A A	B B B	C C C	D D D D	E E E	F F F
23. 24. 25.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you?	Yes Yes Yes Yes Yes	No No No No	A A A A	B B B	C C C	D D D D	E E E E	F F F
23. 24. 25. 26. 27.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you? Hit or punch you?	Yes Yes Yes Yes Yes Yes Yes	No No No No No	A A A A	B B B B	C C C C	D D D D	E E E E	F F F
23. 24. 25. 26. 27. 28.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you? Hit or punch you? Kick or stomp on you?	Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No No No	A A A A A	B B B B	C C C C C	D D D D D D	E E E E E	F F F F
23. 24. 25. 26. 27. 28. 29.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you? Hit or punch you? Kick or stomp on you? Choke or strangle you?	Yes	No No No No No No No No	A A A A A A	B B B B B	C C C C C C C C	D D D D D D	E E E E E E	F F F F F
23. 24. 25. 26. 27. 28. 29. 30.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or fig. Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you? Hit or punch you? Kick or stomp on you? Choke or strangle you? Burn you with something? Use a weapon or something like a weapon against you? If yes, what	Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No No No	A A A A A	B B B B	C C C C C	D D D D D D	E E E E E	F F F F
	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you? Hit or punch you? Kick or stomp on you? Choke or strangle you? Burn you with something? Use a weapon or something like a weapon against you? If yes, what kind(s) of weapon(s) or object(s)? Demand or insist that you engage in	Yes	No	A A A A A A A	B B B B B B	C C C C C C C C C	D D D D D D D D	E E E E E E E	F F F F F F
23. 24. 25. 26. 27. 28. 29. 30. 31.	something like a weapon?* (If yes, ask for details, including, what kind(s) of weapon(s) or object(s); write details here) want to remind you that all my questions co during a conflict, disagreement, or figure Hold you down, pinning you in place? Push, shove, shake or grab you? Scratch you, or pull your hair, or twist your arm, or bite you? Slap you? Hit or punch you? Kick or stomp on you? Choke or strangle you? Burn you with something? Use a weapon or something like a weapon against you? If yes, what kind(s) of weapon(s) or object(s)?	Yes	No No No No No No No No No No	A A A A A A	B B B B B B B	C C C C C C C C	D D D D D D D D	E E E E E E E E	F F F F F F

35.	Try to contact you against your will	Vec	No	A	В	С	D	Е	F
33.	or in a way that made you feel	1 03	110	A	ъ	C	D	L	1
	frightened or harassed, for example,								
	by unsolicited written								
	correspondence, phone calls, or other ways of communicating, like text								
	messages, or on Facebook or My								
	Space?								
36.	Stand outside your home, school,	Yes	No	Α	В	С	D	Е	F
	workplace, or other places where								
	he/she had no business being, and in a way that made you feel frightened								
	or harassed?								
37.	Leave items for you to find in a way	Yes	No	Α	В	С	D	Е	F
	that made you feel frightened or								
38	harassed? Do anything else similar to the kinds	Yes	No	A	В	С	D	Е	F
30	of behaviors we've been discussing?	1 68	110	A	ט	C	ט	ட்	1
	If yes, what kind(s) of behavior(s)?								
	Now consider the things we've been di	scussin	g or sin	nilar k	inds (of this	ngs:		
39.	[If the parent endorsed any of items	Yes	No						
	22–31, and 33 above]: You said that								
	[NAME] [insert applicable behaviors, e.g., has slapped you and choked you]								
	in the past 12 months. Have these								
	types of behaviors been happening								
	more often recently than before?								
40.	[If the parent endorsed any of items	Yes	No						
	22–31, and 33 above]: Have these types of behaviors been getting worse								
	recently than before?								
41.	As a result of the other parent's	Yes	No	A	В	С	D	Е	F
	behaviors, did you feel fearful, scared								
	or afraid of physical harm to yourself								
42.	or to others? As a result of the other parent's	Ves	No	A	В	С	D	Е	F
	behaviors, have you ever had a	103	110	'`	ב	_	ב		•
	physical injury? If yes, did you seek,								
	or should you have sought medical								
43.	attention? As a result of the other parent's	Vac	No	A	В	С	D	Е	F
43.	behaviors, did you ever call the	res	INO	A	D	C	ע	Ľ	Г
	police? When and what specifically								
	prompted the call?								
		1							

Section 3
1. Is there anything else you would like to share with me/us [the mediator(s)]?
2. Is there anything else you think I/we [the mediator(s)] should know?
PRIVATE INSTRUCTION TO MEDIATORS
Review the information obtained from each parent (with your supervisor, if applicable) to consider whether this case is appropriate for mediation, and if so, whether any accommodations should be made to the process. In some relationships one partner commits all or most of the abuse or violence; in other relationships the abuse or violence may be committed by both partners. Identify the victim(s): MotherFather
Consider (and check) the different types of intimate partner abuse or violence that may be present: psychological abuse (e.g., Items 1–3 in Section 2), coercive control (e.g., Items 4–17 in Section 2), threats of severe violence (e.g., Items 18–22 in Section 2), physical violence (e.g. Items 23–27 in Section 2), severe physical violence (e.g., Items 28–31, and 42 in Section 2), sexual violence (e.g., Items 32–33 in Section 2), and/or stalking (e.g., Items 34–37 in Section 2).
There are also differing degrees of abuse and violence, and differing degrees of risk from abuse or violence. Some family situations pose serious safety risks to a parent, child, or others, regardless of whether the person at risk recognizes the risk. Although as mediators we need to maintain our impartiality, in order to consider the risk in a given situation, it may be helpful to identify the apparent "victim" and "abuser" in a relationship. The research tells us that a victim of intimate partner abuse or violence is at risk of serious injury or death when some or all of the risk factors below are present.
Check all risk factors that apply: victim expresses fear of abuser (Questions 9–12 in Section 1, Item 41 in Section 2)** abuser is highly controlling (Question 15 in Section 1, Items 4–17 in Section 2) abuser uses drugs and/or alcohol (Questions 17–18 in Section 1) abuser has access to guns or other weapons (note that guns are of particular concern) (Question 24–27 in Section 1, Items 22 and 31 in Section 2) abuser stalks victim (Items 34–37 in Section 2) abuser threatens violence (Items 18–22 in Section 2) (note that threats of violence involv-ing detailed plans are of particular concern) abuser is physically violent towards victim, and the violence has been escalating in frequency and/or severity over the past 12 months (Items 22–31, 33, 39, 40 in Section 2)
Check the following additional risk factors which increase the risk to the victim: victim is a woman of child-bearing age (up to age 50) (Question 1 in Section 1) victim has children from another partner/spouse living with her (Question 7–8 in Section 1) victim is leaving her abuser for a new relationship (Question 5–6 in Section 1) abuser is currently unemployed (Question 2 in Section 1) victim and the other parent are still living or staying together (Question 3 in Section 1)

^{**}As mediators, we should always accommodate someone who expresses *fear* of the other parent (Questions 9 and 12 in Section 1 and Item 41 in Section 2). Accommodation will vary depending on

the circumstances, but a mediator should **not** insist that a party start or continue mediating when that party says that s/he does not want to mediate because of fear of the other party.

Some victims of intimate partner abuse or violence may not believe that they are at risk. Although we generally want to empower a victim of intimate partner abuse or violence who affirmatively wants to mediate, in making the decision whether or not to mediate we must also consider (a) the risks involved and (b) what accommodations to provide if we decide to mediate. In addition to safety risks, be sure to consider, among any other concerns presented in the specific situation, including balance of power issues, the possibility of coercion, the mediator's ethical duty not to facilitate involuntary and/or unconscionable agreements, and the mediator's ethical duty to remain impartial.

In considering the existence and effect of intimate partner abuse or violence in this case, please consider the questions below:

- 1) If you think the case is **not** appropriate for mediation, what are your concerns?
- 2) If you determine not to mediate or to terminate mediation iii because of concerns about intimate partner abuse or violence, are there any ethical constraints and/or any safety concerns in how you should communicate this decision with the parties and/or the court?
- 3) If you think the case may be mediated, should any of the following accommodations be implemented (check the ones you think should be implemented and indicate why)? parents to be in separate rooms at all times (shuttle mediation) parents to be in separate rooms if mediator not present (joint sessions possible, but only if the mediator is present with the parents) staggered arrival and departure times for parents support person necessary (for which parent(s)?) attorney necessary (for which parent(s)?) referral to DV program or shelter (e.g., Middle Way House in Bloomington, IN) mediation at secure facility, passing through security, presence of armed guards (e.g., Justice Center in Bloomington, IN) parent needs escort to/from car parent needs way to leave the building without being seen by the other parent parents to appear for mediation on separate days telephone or on-line mediation other accommodation?

iii Even with screening, there may be times when a mediator learns belatedly of intimate partner abuse or violence. If during the mediation, you become concerned about the possibility of intimate partner abuse or violence, take a break to consider how to proceed. Be sure to keep the parties separate while you determine the appropriate action to take.

ANSWER KEY

When responding to the questions, please use these choices for your answers about whether something EVER happened:

YES or NO

When responding to the questions, please use these choices for your answers about the PAST 12 MONTHS:

Never	Α
Once or twice	В
3-6 times (approx. once every few months)	C
7–12 times (approx. every month or two)	D
Once per week	E
Daily	F