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# The Violence, Injury, and Death Exposure Scale<sup>™</sup> (VIDES)

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- ⇒Violence, Injury and Death Exposure Scale<sup>™</sup> (VIDES) Assessment
- ⇒Depression Danger Scale™ (DDS) Assessment
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## The Violence, Injury, and Death Exposure Scale<sup>™</sup> (VIDES) Data Sheet

Development and Psychometric Properties

By Michael. D. Denhof, PhD.

This product is a Desert Waters Data Sheet. Desert Waters Data Sheets summarize specifications for particular Desert Waters or Desert Waters-sponsored products or services.

Desert Waters' data-driven products and services are engineered to promote the health and well-being of individuals and groups working in public safety roles.

### What is the Violence, Injury, and Death Exposure Scale (VIDES)?

High-stress incidents, such as witnessing the assault or murder of a person, or being assaulted oneself, are associated with health-related consequences. Post-traumatic Stress Disorder (PTSD), for example, is well-established and widely understood to have its genesis in high-stress events involving violence, injury, or death (American Psychiatric Association<sup>1</sup>, 2013; Spinaris, Denhof, and Kellaway<sup>2</sup>, 2012). The Violence, Injury, and Death Exposure Scale (VIDES) was developed to provide a reliable and valid way to measure the magnitude of direct and indirect exposure to events involving Violence, Injury, and Death (VID).

Desert Waters Correctional Outreach researchers discovered that asking research participants single questions about the extent of their exposure to VID events, such as over the course of their careers, gives unreliable results, plausibly due to factors such as poor recollection and variability in individuals' subjective judgment about what experiences they have had that qualify as traumatic. Researchers also discovered that individuals provided more reliable information if asked whether they had experienced very specifically-defined types of events. Data have also suggested that the recency of VID exposure moderates health-related impact upon individuals. For example, individuals who have experienced a larger number of VID exposures may nevertheless be less impacted presently if substantial time has passed following their most recent VID event exposure. Stated another way, someone exposed to 25 VID events more than a year ago may be less affected currently than an individual exposed to only a few VID event that happened within the last 3 months.

It should be noted that the Diagnostic and Statistical Manual of Mental Disorders (DSM-5; American Psychiatric Association, 2013)¹ now defines indirect exposure as "traumatic"—if this occurs extremely or repeatedly as part of a person's vocational role. Examples of indirect exposure might include exposure to electronic media, printed material or images detailing events involving violence, injury, or death.

Taking into account these observations and circumstances, the VIDES was designed to include a broad spectrum of questions about specifically-defined and unique types of both direct and indirect VID events, which get scored in aggregate for increased reliability of measurement. In addition, responses to questions about exposure to specific types of VID events are accompanied by questions about the recency of the exposures, which serve to "weight" the exposure questions. The VIDES score can therefore be considered an indication of exposure magnitude, as a function of both frequency and recency of exposure to events involving violence, injury, or death. The result of this design has been improved reliability of scores and higher correlations with relevant criterion variables, such as measures of PTSD and Stress.

#### How Is the VIDES Used?

Desert Waters Correctional Outreach offers two services based upon the VIDES. One service is a group-level assessment, where a subscribing organization's staff complete the VIDES from work or home through a secure website, resulting in an aggregated data set that Desert Waters researchers use to prepare an organization-level report. The report indicates and interprets the average extent of violence, injury, and death exposure for the workforce. A second service is individual VIDES assessments. In this case individuals can purchase VIDES assessments on their own, complete the assessment online, and receive an instant interpretive report.

The VIDES represents a useful tool for individuals, clinicians, and organizations interested in objectively assessing or monitoring over time how affected they are by exposure to violence, injury, and death events. The information can be helpful as a basis for self-help health maintenance and research projects involving interest in the magnitude of VID exposure for individuals or groups.

<sup>&</sup>lt;sup>1</sup> American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (DSM-5) (Fifth Ed.). Washington D.C.: American Psychiatric Association.

<sup>&</sup>lt;sup>2</sup> Spinaris, C.G., Denhof, M.D., and Kellaway, J.A. (2012). Post-traumatic Stress Disorder in United States corrections professionals: Prevalence and impact on health and functioning. Located at: http://desertwaters.com/wp-content/uploads/2013/09/PTSD\_Prev\_in\_Corrections\_09-03-131.pdf



## Concurrent Validity

The VIDES total score has been found to correlate substantially and significantly with other conceptually and theoretically-related measures.

Concurrent Measure	Correlation (r) with VIDES Score			
Total Score - Post-traumatic Check- list-Civilian Version (PCL-C) <sup>1</sup>	.41*			
DASS-21 Stress - DASS-21 Depression, Anxiety, and Stress Scales <sup>2</sup>	.33*			
Global Score - Corrections Fatigue Status Assessment (CFSA-v5) <sup>3</sup>	.31*			
*Statistically Significant at p<.01( Pearson r)				
	MDECC 1 1:			

VIDES Standardization Sample Scale Mean (M)	VIDES Standardization Sample Scale Standard Deviation (SD)	
3.75	1.49	

## Scale Reliability

The internal consistency reliability of the VIDES was estimated using Cronbach's Alpha ( $\alpha$ ).

The VIDES demonstrates a high level of internal consistency reliability.  $\alpha$ = .92.

### Sample Characteristics

A total of *N*=592 assessment batteries were completed by corrections professionals (1) from 44 different U.S. States and the District of Columbia, (2) having 24+ different job titles (e.g., custody/security officer, classification officer, executive staff, medical health provider, etc.), (3) from 18+ different facility/organization types (e.g., Jail, Federal Prison, State Prison, Community Corrections Organizations, etc.), (4) having a broad range of ages, (5) having a broad range of years experience working in the field of corrections, (6) having any of six ethnic/cultural affiliations, primarily White/Caucasian, and (7) consisting of 63% males and 37% females.

#### Item Descriptives

	1						
Item	VIDES Standardization Sample Item Means (M)	VIDES Standardization Sample Item Standard Deviations (SD)					
Q1	2.71	1.81					
Q2	2.73	1.85					
Q3	4.03	2.18					
Q4	4.29	2.22					
Q5	3.75	2.35					
Q6	4.50	2.28					
Q7	2.48	1.62					
Q8	3.36	2.04					
Q9	5.28	1.97					
Q10	5.17	2.04					
Q11	3.90	2.02					
Q12	2.77	1.99					

<sup>&</sup>lt;sup>1</sup> Weathers, F.W., Litz, B.T., Herman, D.S, Huska, J.A., & Keane, T.M.(1994). The PTSD Checklist (PCL): Reliability, validity, and diagnostic utility. Paper presented at the Annual Meeting of International Society for Traumatic Stress Studies, San Antonio, TX, October, 1993.

<sup>&</sup>lt;sup>2</sup> Henry, J.D., & Crawford, J.R. (2005). The short-form version of the Depression Anxiety Stress Scales (DASS-21): Construct validity and normative data in a large non-clinical sample. *British Journal of Clinical Psychology*, 44, 227-239.

<sup>&</sup>lt;sup>3</sup> Denhof, M.D. (2014). The Corrections Fatigue Status Assessment (CFSA-v5): Data sheet. Available at <a href="http://desertwaters.com/wp-content/uploads/2014/01/CFSA-V4">http://desertwaters.com/wp-content/uploads/2014/01/CFSA-V4</a> Data Sheet.pdf



## Relationship Between VIDES Score and Assessed Health Conditions

#### Relative Risk Ratios

INDIVIDUALS WHO SCORE HIGH ON THE VIDES ARE: <sup>1,2</sup>	EVENT	ASSESSMENT INSTRUMENT
126%-223% more likely (126% <sup>4,7</sup> , 147% <sup>5,6</sup> , 223% <sup>3,7</sup> )	to screen Positive for Post-traumatic Stress Disorder (PTSD)	PCL-C <sup>6</sup> /PCL-5 <sup>7</sup>
102%-151% more likely (102%³, 104%⁴, 151%⁵)	to score in the High Risk range for Depression/Suicide	DDS <sup>8</sup>
<b>37%-106% more likely</b> (37% <sup>5</sup> , 70% <sup>4</sup> , 106% <sup>3</sup> )	to score in the Moderate to Extreme range of Anxiety symptom severity	DASS-21 Anxiety Scale <sup>9</sup>
131%-170% more likely (131% <sup>3</sup> , 164% <sup>4</sup> , 170% <sup>5</sup> )	to score in the HIGH range for extent of Corrections Fatigue	CFSA-v5 <sup>10</sup>

<sup>&</sup>lt;sup>1</sup> Based upon Relative Risk Ratio calculations; Indicates how much more likely someone is to experience the event if they scored HIGH (>4) on the VIDES, compared to those scoring <=4.

## Disorder Prevalence Estimates<sup>11</sup> (N=3599)

Post-traumatic Stress Disorder (PTSD), based upon PCL-C	27%
Depression*, based upon the DASS-21 Depression Scale	26%
Comorbid Depression and PTSD, based on PCL-C and DASS-21	17%
Anxiety*, based on the DASS-21 Anxiety Scale	20%**
Post-traumatic Stress Disorder (PTSD) for Security Staff Specifically	34%
Depression* for Security Staff Specifically	30%

<sup>\*</sup>Defined as a Moderate to Extreme Symptom Severity Scale Score on the DASS-21

<sup>&</sup>lt;sup>2</sup> Based on estimates from 3 independent samples of corrections staff

<sup>&</sup>lt;sup>3</sup> 592 Corrections staff from 44 states, in 24+ different job roles, and from 18 different facility/organization types

<sup>&</sup>lt;sup>4</sup> 1091 Security/Custody staff working in prison settings in a Northeastern state

<sup>&</sup>lt;sup>5</sup> 273 Security/Custody staff working in a metropolitan jail in the Northwest.

<sup>&</sup>lt;sup>6</sup> Weathers, F.W., Litz, B.T., Herman, D.S, Huska, J.A., & Keane, T.M.(1994). The PTSD Checklist (PCL): Reliability, validity, and diagnostic utility. Paper presented at the Annual Meeting of International Society for Traumatic Stress Studies, San Antonio, TX, October, 1993.

<sup>&</sup>lt;sup>7</sup> Weathers, F.W., Litz, B.T., Keane, T.M., Palmieri, P.A., Marx, B.P., & Schnurr, P.P. (2013). The PTSD Checklist for DSM-5 (PCL-5). Scale available from the National Center for PTSD at www.ptsd.va.gov.

<sup>8</sup> Denhof, M.D. (2014). The Depression Danger Scale (DDS): Data Sheet. Located at http://desertwaters.com/wp-content/uploads/2014/01/DDS\_Data\_Sheet.pdf

<sup>&</sup>lt;sup>9</sup> Henry, J.D., & Crawford, J.R. (2005). The short-form version of the Depression Anxiety Stress Scales (DASS-21): Construct validity and normative data in a large non-clinical sample. British Journal of Clinical Psychology, 44, 227-239.

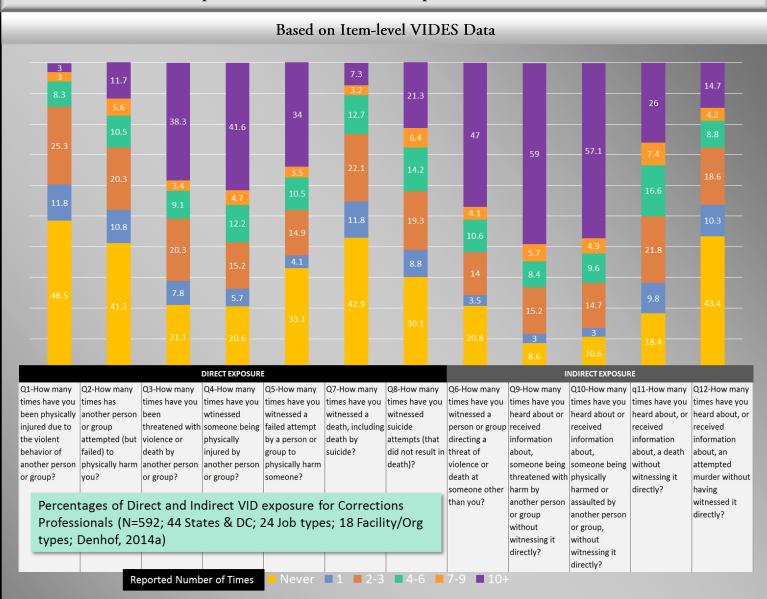
<sup>&</sup>lt;sup>10</sup> Denhof, M.D. (2014). The Corrections Fatigue Status Assessment (CFSA-v5): Data sheet. Available at http://desertwaters.com/wp-content/uploads/2014/01/CFSA\_V4\_Data\_Sheet.pdf

<sup>&</sup>lt;sup>11</sup> Denhof, M.D., & Spinaris, C.G. (2013). Depression, PTSD, and comorbidity in United States corrections professionals: Prevalence and impact on health and functioning. Located at: http://desertwaters.com/wp-content/uploads/2013/09/Comorbidity\_Study\_09-03-131.pdf

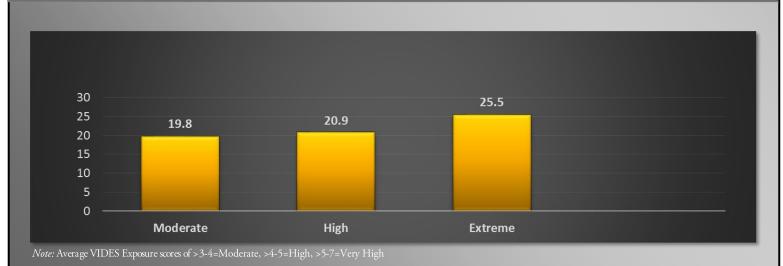
<sup>\*\*</sup>Located at http://desertwaters.com/wp-content/uploads/2014/01/Correctional-Oasis-01-14.pdf

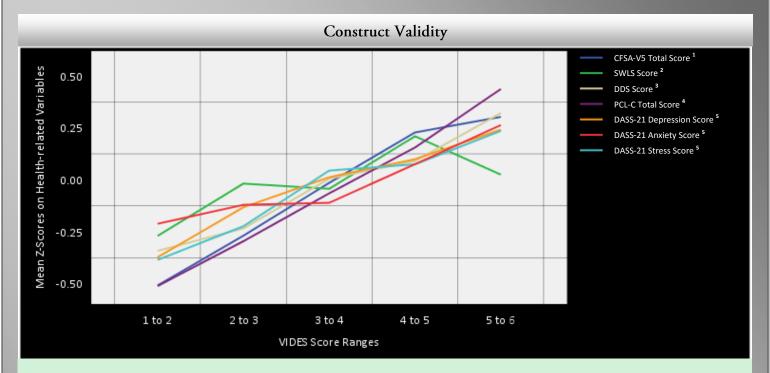


## Common Frequencies of Direct and Indirect Exposure for Corrections Professionals



## Scoring Range Prevalence for Corrections Professionals (N=592)





As the magnitude of VIDES scores (reflecting the extent and recency of exposures to violence, injury, and death events) increases, so do scores on numerous health-related measures (reflecting declined health).

- <sup>1</sup> Denhof, M.D. (2014). Data Sheet: The Corrections Fatigue Status Assessment (CFSA-V5). Available at: <a href="http://desertwaters.com/wp-content/uploads/2014/01/CFSA-V4">http://desertwaters.com/wp-content/uploads/2014/01/CFSA-V4</a> Data Sheet.pdf
- <sup>2</sup> Diener, E., Emmons, R.A., Larsen, R.J., & Griffin, S.(1985). The Satisfaction with Life Scale. Journal of Personality Assessment, 49, 71-75.
- <sup>3</sup> Denhof, M.D. (2014). The Depression Danger Scale (DDS): Data Sheet. Located at <a href="http://desertwaters.com/wp-content/uploads/2014/01/DDS\_Data\_Sheet.pdf">http://desertwaters.com/wp-content/uploads/2014/01/DDS\_Data\_Sheet.pdf</a>
- <sup>4</sup> Weathers, F.W., Litz, B.T., Herman, D.S, Huska, J.A., & Keane, T.M.(1994). The PTSD Checklist (PCL): Reliability, Validity, and Diagnostic Utility. Paper presented at the Annual Meeting of International Society for Traumatic Stress Studies, San Antonio, TX, October, 1993.
- <sup>5</sup> Henry, J.D., & Crawford, J.R. (2005). The short-form version of the Depression Anxiety Stress Scales (DASS-21): Construct validity and normative data in a large non-clinical sample. *British Journal of Clinical Psychology*, 44, 227-239.



DATE

## **INDIVIDUAL RESULTS REPORT**



NAME		

The Violence, Injury, and Death Exposure Scale™ (VIDES) score represents an index of a corrections professional's level of exposure magnitude. The score is a function of both (1) how many times an individual has been exposed to violence, injury, or death events, and (2) how recently a VID event was experienced. The higher the VIDES score (i.e., the higher the exposure magnitude), the more potential there is for negative effects upon the individual.

Your VIDES Score is **HIGH**, reflecting a high magnitude of exposure (≥4 and <5). Scores in this range are considered **likely** to be associated with the experience of substantial negative effects upon your mental/emotional health.

It is **highly** recommended that you take advantage of resources available to you to help ensure the most expedient path to optimal health and functioning.

DWCO Disclaimer: The VIDES is a scientifically developed psychological assessment tool with sound psychometric properties. It provides results based upon an algorithm developed from a combination of quantitative research and psychological judgment. While the VIDES can be expected to, on average, provide valid and reliable results, no mental/behavioral assessment instrument, including the VIDES, can guarantee interpretative accuracy in every individual case 100% of the time. Results are not to be considered diagnostic of a disorder or health condition. Rather, results reflect an individual's magnitude of exposure to certain VID-related incidents. The VIDES is a copyrighted assessment instrument developed by Drs. Michael D. Denhof and Caterina G.



## THE VIOLENCE, INJURY, AND DEATH EXPOSURE SCALE $^{\text{\tiny{TM}}}$

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<u>Instructions</u>: Read each question below and indicate the most accurate answer for you from among the choices. Answer the questions in terms of what has been true during your work activity in your occupational work role or setting.

How many times have you been physically injured due to the violent behavior of another person or group? Q $\bf 1$				
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times			
Q1	When was the most recent occurrence?			
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago			
Q 2	How many times has another person or group attempted (but failed) to physically harm you?			
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times			
Q 2	When was the most recent occurrence?			
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago			
Q 3	How many times have you been threatened with violence or death by another person or group?			
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times			
Q 3	When was the most recent occurrence?			
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago			
How many times have you witnessed someone being physically injured by another person or group? Q 4				
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times			
Q 4	When was the most recent occurrence?			
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago			

Q 5	How many times have you witnessed a failed attempt by a person or group to physically harm someone?					
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times					
Q 5	When was the most recent occurrence?					
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago					
Q 6 (Exposure)	How many times have you witnessed a person or group directing a threat of violence or death at someone other than you?					
(	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times					
Q 6	When was the most recent occurrence?					
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago					
Q7	How many times have you witnessed a death, including death by suicide?					
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times					
Q 7	When was the most recent occurrence?					
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago					
Q 8	How many times have you witnessed suicide attempts (that did not result in death)?					
(Exposure)	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times					
Q 8	When was the most recent occurrence?					
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago					
Q 9 (Exposure)	How many times have you heard about, or received information about, someone being threatened with harm by another person or group, without witnessing it directly? (Occurring in your work setting/occupational role.)					
(=::[	O Never O Once O 2-3 Times O 4-6 Times O 7-9 Times O 10+ Times					
Q 9	When was the most recent occurrence?					
(Recency)	O Never O 1-30 Days Ago O 2-3 Months Ago O 4-6 Months Ago O 7-12 Months Ago O More Than a Year Ago					

Q 10 (Exposure)	How many times have you heard about or received information about, someone being physically harmed or assaulted by another person or group, without witnessing it directly? (Occurring in your work setting/occupational role.)						
(2.1500010)	O Never	O Once	O 2-3 Times	O 4-6 Times	O 7-9 Times	O 10+ Times	
Q 10	When was the most recent occurrence?						
(Recency)	O Never	O 1-30 Days Ago	O 2-3 Month	ns Ago O 4-6 N	Months Ago O	7-12 Months Ago O More Than a Year Ago	
Q 11 (Exposure)	How many times have you heard about, or received information about, a death without witnessing it directly?  (Occurring in your work setting/occupational role.)						
	O Never	O Once	O 2-3 Times	O 4-6 Times	O 7-9 Times	O 10+ Times	
Q 11	When was the most recent occurrence?						
(Recency)	O Never	O 1-30 Days Ago	O 2-3 Month	ns Ago O 4-6 N	Months Ago O	7-12 Months Ago O More Than a Year Ago	
Q 12 (Exposure)	•	imes have you he directly? (Occurr	•		•	attempted murder without having	
	O Never	O Once	O 2-3 Times	O 4-6 Times	O 7-9 Times	O 10+ Times	
Q 12	When was the most recent occurrence?						
(Recency)	O Never	O 1-30 Days Ago	O 2-3 Month	ns Ago O 4-6 N	Months Ago O	7-12 Months Ago O More Than a Year Ago	

END



## THE VIOLENCE, INJURY, AND DEATH EXPOSURE SCALE™

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<u>SCORING INSTRUCTIONS</u>: For each pair of VIDES Exposure and Recency Questions (e.g., Q1 [Exposure] and Q1 [Recency], Q2 [Exposure] and Q2 [Recency]), add the numeric score equivalents together (see below). This will give 12 sums. Next add these sums together and divide by 12. The result is the VIDES score, a measure of exposure magnitude, as a function of both quantity and recency of exposures.

#### **Response-to-Numeric Score Conversion Key**

VIDES Exposure Question Response Options	Numeric Score Equivalent	VIDES Recency Question Response Options	Numeric Score Equivalent (i.e., weighting)
Never	1	Never	+0
Once	2	1-30 Days Ago	+1
2-3 Times	3	2-3 Months Ago	+.5
4-6 Times	4	4-6 Months Ago	+.3
7-9 Times	5	6-12 Months Ago	+.1
10+ Times	6	More than 1 Year Ago	+0