AASI-3 GRAPH



Administrator Version 4.2 Report Version 4.2

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The AASI-3 for Men Summary				
Client ID 000000	Age 47	Race White/Caucasian	Sex Male	
Site ID 0000			Test Date	

23 Sexual Behaviors						
		Age Onset	Age End	<u>N Victims</u>	<u>N Times</u>	<u>Control</u>
Child Molestation	NO					
Child Internet Contact	NO					
Child Pornography	NO					
Adult Pornography	NO					
Rape	NO					
Bestiality	NO					
Obscene Notes/Email/Calls	NO					
Telephone Sex	NO					
Exhibitionism	NO					
Frottage	NO					
Public Masturbation	NO					
Voyeurism	NO					
Prof. Sexual Misconduct	NO					
Prostitutes	NO					
Sexual Affairs	NO					
Sex With Strangers	NO					
Fetishism	NO					
Transvestism	NO					
Coprophilia	NO					
Necrophilia	NO					
Masochism	NO					
Sadism	NO					
		Additional Second	exual Health Cor	<u>icerns</u>		
Transsexualism	NO					
Sexual Abuse Survivor	NO					

Race White/Caucasian

Sex Male Test Date

Therapist's Reasons for Evaluation

Child Sexual Abuse: Female 13 years of age or younger

Age 47

Summary of Admitted Sexual Behaviors

The therapist should question this person in detail regarding the inappropriate sexual behaviors in which this person indicates current or previous involvement. These items are listed below. This summary also indicates whether this person is currently involved in each of these behaviors and whether this person reports poor control. The behaviors are presented as reported by this person and may be inconsistent with responses to similar questions in other sections of the questionnaire.

The client lists no admitted sexual behaviors.

Summary of Sexual Health Concerns

The client lists no sexual health concerns

The AASI-3 for Men Summary

Client ID 000000 Site ID 0000 Race White/Caucasian

Sex Male Test Date

The Emerick Sexual Victimization Scales

The Emerick Scales measure a person's degree of sexual victimization trauma.

Age 47

In all scales, a score of 0 indicates no concern.

Trauma Intrusive Thoughts Scale - Measures the degree to which this person involuntarily remembers or thinks about the child molestation they suffered.

A score of 1 to 32% indicates a moderate concern. A score of 33 to 100% indicates a severe concern.

Trauma Intrusive Thoughts Scale **NA**

Trauma Symptomatology Scale - There are three critical ways that a sexual abuse victim may misinterpret the process of abuse: cognitive distortions about violence, justifications enabling violence, and faulty beliefs about the world in general. Collectively, these misinterpretations about one's own victimization are a measure of one's trauma relating to abuse and <u>one's potential to hold enabling views about sexual abusing behavior.</u>

A score of 1 to 54% indicates moderate concern. A score of 55 to 100% indicates severe concern.

Trauma Symptomatology Scale	**NA**
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Trauma Potentiators Scale - Measures the degree to which developmental and social issues are likely to aggravate trauma symptomatology. This scale comprises both static and dynamic issues.

A score of 1 to 59% indicates moderate concern. A score of 60 to 100% indicates severe concern.

Trauma Potentiators Scale **NA**

Client ID 000000 Site ID 0000	Age 47	Race White/Caucasian	Sex Male Test Date	
	<u>Sexual B</u>	ehaviors Ratings		
Indicates the extent to which this person would find participating in the following activities as highly sexually disgusting to highly sexually arousing.				
Purposely exposing myself in a public p	lace Highly Disgusting			
Contact with pee or bowel movements	Highly Disgusting			
Sexual arousal by touching a child	Highly Disgusting			
Forcing an adult to have sex with me	Highly Disgusting			
lurting or degrading a sex partner	Highly Disgusting			
Becoming aroused by dressing in cloth	ing of the opposite sex	Highly Disgusting		
As a professional, having sex with my	parishioners, patients, clients, o	r subordinates Highly Disgusting	3	
Having sex with prostitutes H	ighly Disgusting			
Having sexual affairs outside a primary relationship Highly Disgusting				
Having adult sex partners who are total strangers Moderately Arousing				
Paying to have phone sex Highly Disgusting				
Masturbating in public without being seen Highly Disgusting				
Jsing sexual magazines or movies exc	essively Moderately Arous	ing		
Being in the body of the wrong sex	Highly Disgusting			
Using Internet adult sexual materials or sexual chat rooms excessively Moderately Arousing				
/iewing images or movies of children	or teenagers for sexual arousal	Neutral		
Communicating with or attempting to r	neet up with children or teenage	rs for sexual arousal Slightly Disgusting	3	
Becoming obsessively aroused by obj	ects or parts of the body Mo	oderately Arousing		
Rubbing up against or touching strangers in crowded places Highly Disgusting				
Window peeping or secretly watching others undress or have sex Highly Disgusting				
laving sexual contact with animals	Highly Disgusting			
Vriting obscene notes or making obsc	ene phone calls	Highly Disgusting		
	/ Highly Dis	sgusting		

	Client ID 000000	Age 47	Race White/Caucasian	Sex Male	
	Site ID 0000			Test Date	
		<u>Sexual F</u>	antasies Ratings		
т	his person has indicated the freque	ency of having sexual fanta	sies involving each of the following sexua	l activities as Always through Never.	
Purposel	y exposing myself in a public place	Never			
Contact	with pee or bowel movements	Never			
Sexual a	rousal by touching a child Ne	ever			
Forcing	an adult to have sex with me	Never			
Hurting	or degrading a sex partner	lever			
Becomir	ng aroused by dressing in clothing o	f the opposite sex Ne	ver		
As a pro	fessional, having sex with my paris	hioners, patients, clients or	subordinates Never		
Having s	Having sex with prostitutes Never				
Having a	Having adult sexual affairs outside a primary relationship Never				
Having a	Having adult sex partners who are total strangers Never				
Paying	Paying to have phone sex Never				
Masturb	ating in public without being seen	Never			
Using se	exual magazines or movies excessiv	ely Rarely			
Being in	the body of the wrong sex Ne	ever			
Using In	ternet adult sexual materials or sexu	ual chat rooms excessively	Rarely		
Viewing	images or movies of children or tee	enagers for sexual arousal	Never		
Commu	nicating with or attempting to meet	up with children or teenagers	s for sexual arousal Rarely		
Becomi	ng obsessively aroused to objects o	r parts of the body	Rarely		
Rubbing	up against or touching strangers ir	n crowded places Neve	er		
Window	peeping or secretly watching othe	ers undress or have sex	Never		
Having s	exual contact with animals N	ever			
Writing o	obscene notes or making obscene pl	none calls Never			
Havings	exual contact with a dead body	Never			
Being se	xually hurt or degraded Ne	ver			

Age 47

Client ID 000000 Site ID 0000 Race White/Caucasian

Sex Male Test Date

Cognitive Distortion Score

These items describe potential justifications frequently used by persons who are sexually involved with children. A higher score suggests a greater use of such cognitive distortions.

Scores of 0 to 25% are considered non-problematic. Scores of 26 to 39% are problematic. Scores of 40 to 100% are highly problematic.

Cognitive Distortion Score: 15%

Social Desirability Score

The Social Desirability Score measures a person's unwillingness to admit to any violation of common social mores, such as impatience, feelings of anger, etc. A high score may indicate the person's inability to respond truthfully to others.

Scores of 0 to 45% are considered non-problematic. Scores of 46 to 64% are problematic. Scores of 65 to 100% are highly problematic.

Social Desirability Score: 84%

Race White/Caucasian

Sex Male Test Date

Summary of Drug and Alcohol Use

The Summary of Drug and Alcohol Use allows people to report the extent of their experience with drugs and alcohol, the number of times they used each substance, the age of first use, and the last year they used. The summary notes if this person failed to answer any questions.

This person reports having used:

Marijuana, grass, pot or hashish more than 10 times a week beginning at age 15. The last year of use was 2000.

Tranquilizers, downers, sedative hypnotics or benzodiazepines some beginning at age 17. The last year of use was 1995.

Cocaine, crack or rock more than 10 times a week beginning at age 28. The last year of use was 2006.

Hallucinogens, LSD, ecstasy, mescaline, peyote, PCP, angel dust or mushrooms more than 10 times a week beginning at age 32. The last year of use was 2006.

Crystal meth, krank, tweak or ice some beginning at age 27. The last year of use was 2005.

Age 47

Pain medication such as Lortab, Vicodin, hydrocodone, Percocet, OxyContin, etc. <u>more than 10 times a week</u> beginning at age 23. The last year of use was 2008.

Inhalants, nitrous oxide, amyl nitrate, gasoline, solvents, glue, whippit, poppers, etc. <u>more than 10 times a week</u> beginning at age 19. The last year of use was 1988.

This person reports that they have never used:

Alcohol, beer or wine;

Narcotics, methadone, heroin or opium;

Speed, Dexedrine, Adderall or uppers;

Race White/Caucasian

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Danger Registry

The Danger Registry measures a person's attraction to, fantasies about, and sexual interest in young girls and boys sometime since the person turned 18 years old.

Concerns are registered when the person answers any of the questions as "Completely True" or "Somewhat True."

Moderate Concerns are registered when the person reports fantasy without action.

Age 47

Moderate Concerns:

Sometime since this person turned 18:

** There are no concerns listed by the client

Severe Concerns are registered when the person reports actual behavioral intent.

Severe Concerns:

** There are no concerns listed by the client

Race White/Caucasian

Sex Male Test Date

Admissions, Accusations and Convictions

(for sexual acts against children)

This person ADMITS having been accused of sexually abusing a child.

Age 47

Details of Accusations

These items indicate this person's admission of accusations and offer another independent measure of admission of child sexual abuse. This information should be interpreted in the context of this person's overall situation and compared with other sources of information available to the therapist. If this person's responses are clearly at odds with the information available from other sources, the therapist should follow-up with more detailed questioning.

This person ADMITS having been accused and having sexually molested the child to the extent reported. This person ADMITS never having been accused, but having sexually molested a child.

The AASI-3 for Men Summary

Client ID 000000 Site ID 0000 Race White/Caucasian

Sex Male Test Date

Probability of PAST Child Sexual Abuse Behavior for Males

Probability of PAST CSA Behavior is based on a Denier-Dissimulator model.

Age 47

Use this **Probability of Past Child Sexual Abuse (CSA) Behavior** for clients who have been accused but deny sexually abusing a child. The higher the score the more likely the client is to match the denying child sexual abusers.

The probability of <u>PAST</u> CSA Behavior score is based on a combination of variables from the Male AASI-3 Questionnaire and the VRT[™] assessment. Client's response patterns are compared to those of <u>child sexual abusers</u> who attempt to conceal having sexually abused a child <u>17 years of age or younger</u>. The Probability of <u>PAST</u> CSA Behavior was developed using both extra-familial and incestuous sexual abusers of girls and/or boys (17 years old or younger) and is therefore applicable to abusers of both boys and girls as well as incest child sexual abusers and extra-familial child sexual abusers.

NO test or test score can determine the guilt or innocence of your client for the behaviors of which he is accused.

The probability of <u>PAST</u> CSA Behavior represents the likelihood that your client fits into the Denier-Dissimulator child sexual abuser category:

Score: 95

Group: Higher Risk

Group probability: 86%

Cut Score Ranges for Risk Groups

Group	Cut Score Ranges	Associated Probability	
Lower	<= 0.21	18%	
Medium	> 0.21 and < 1.4	50%	
Higher	>= 1.4	86%	

Probability Scores Should Only Be Used For The Client's First Assessment.

Please be aware that these are <u>probability</u> scores. They should be used <u>only as a guideline</u> and incorporated into the totality of information about the case.

PROBABILITY SCORES CAN NEVER DETERMINE GUILT OR INNOCENCE.