



## Six Essential Strategies for Clinicians Working with Domestic Violence Survivors

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### **ASK – Screen for Domestic Violence (DV)**

- DV often is an underreported and unrecognized crime. DV screening should be routinely administered with each family. The practice of routine DV screening not only increases the likelihood of DV being reported, but it also increases the likelihood that providers will be able to identify DV when it is disclosed.
- Some potential screening questions:
  - “Have you been hit, kicked, punched, or otherwise hurt by someone within the past year? If so, by whom?”
  - “Do you feel safe in your current relationship?”
  - “Is there a partner from a previous relationship who is making you feel unsafe now?”
  - “Have you ever felt controlled or isolated by a current or past partner?”

### **ACKNOWLEDGE – Make the survivor feel comfortable and validate their experiences**

- It can very difficult for a DV survivor to make disclosures about the abuse they are experiencing. It is important that survivors be made to feel comfortable and supported when disclosing their sensitive information. It is also important to validate their experiences. Support and concern can be expressed to survivors with the following statements:
  - “I am concerned about your safety and well-being.”
  - “I imagine this situation must be very difficult for you.”
  - “Thank you for telling me.”

### **ASSESS – Explore immediate physical safety and options for longer-term planning**

- Safety planning is an ongoing process of brainstorming in which the survivor and professional work together to reduce barriers to safety and stability. You can start a conversation about safety planning with the following simple questions:
  - What do you do now to keep safe? What do you need now to be safe?
  - What worked to keep you safe when you left or defied your partner before?
  - How would they react if you (called 911, went to your mom’s, etc)...?
- There are a number of evidenced-based risk assessment tools, including the Danger Assessment, available at [www.dangerassessment.org](http://www.dangerassessment.org).

### **REFER & CONSULT – To and with local domestic violence advocacy programs**

- Support and services are available to your clients at *community-based domestic violence agencies* around the clock; their extensive range of services is free and confidential. Survivors who are victims of DV crimes may have a *systems-based domestic violence advocate* assigned through the court; they have different confidentiality laws, but can be invaluable in helping your clients through what can often be a very confusing and overwhelming legal situation.

- You can help your clients by initiating a call to a DV agency. The advocate will want to talk with the survivor directly at some point and may not be able to share information back with you.
- Your colleagues at domestic violence agencies are also available as resources to you; you can call to consult on safety issues, domestic violence education or community resources.

**ASSURE & FOLLOW UP – Provide ongoing emotional support and follow up with the survivor about referrals**

- There are barriers to information sharing with DV advocates, and you may not be able to talk with them freely about shared clients. Explore Releases of Information if appropriate.

**DOCUMENT – Keep confidentiality in mind**

- Mental health records and diagnoses are often used against survivors in legal or child custody settings. Consider the potential effect of your records were they to be released when documenting your work with survivors of DV.