Integrating Health and Wellness into Domestic Violence Advocacy Programs: Sample Intake Questions

Incorporating discussions about health into domestic violence (DV) program intake procedures ensures that clients know that advocates are able to support them with health issues, and that wellness is a central part of healing and safety.

- Many survivors are not able to have their health needs addressed while surviving abuse, so advocates play a crucial role in helping them access care.
- In addition to your organization’s COVID mitigation procedures, you can integrate the following information and questions into intake tools to promote the health and wellness of your clients.
- These conversations can be added to intake procedures both for shelter programs and non-shelter case management.
- Creating a partnership with your local community health center or other low-barrier healthcare clinic can help ensure clients have access to low or no-cost healthcare. Learn more about building partnerships.

**Time-sensitive questions to ask at initial intake:**

“We’ve started talking to all of our clients about urgent health issues when they enter our program to make sure we are best able to support you today. Everything you share is confidential unless you tell me it’s ok to share it with someone else, like a healthcare professional. You do not have to answer any, or all of the questions.”

**Immediate Health Needs:** “Do you [or your children] have any immediate health needs or medical concerns that we can support you with?”

**Access to Medication:** “Many people have been prescribed medication to take daily. Do you need help filling any medication for you [or your children]?”

- If yes, connect the client to a community health center partner for an urgent appointment, and help coordinate onsite medication needs/storage.

**Allergies and Health Conditions:** “Do you [or your children] have any allergies or health conditions that you want us to be aware of? For example, if you have a food allergy, we can make sure that there are meals that fit your diet.”

**Brain Injury:** Clients who have experienced trauma or injury to the face or head, including strangulation/“getting choked out” may find that it’s harder to do everyday things like running errands,
or getting to appointments, or may find that they are more forgetful, have a hard time sleeping, or emotional regulation. Those with certain serious symptoms should seek medical care. For more information on supporting survivors with brain injuries in your program check out Partner-Inflicted Brain Injury: Promising Practices for Domestic Violence Programs.

“We talk with all clients about if they have been hit in the head or face, choked or strangled. When these things happen-- especially repeatedly or if it has made you pass out-- it can affect health, emotions, and day-to-day in significant ways. Has anything like this happened to you recently? If so, it could be important for you to get medical attention, which I can help you with.”

- If yes, share the Has your head been hurt? Brochure in English and Spanish and/or Invisible Injuries Workbook and offer to help make a medical appointment for further assessment and support if necessary.

**Emergency Contraception:** “We always like to check with clients to see if they might have any need for emergency contraception, which can stop a pregnancy from happening before it starts. Clients might choose to use emergency contraception if they are not wanting to become pregnant, but in the last five days had sex without a condom, were coerced or forced to have sex without a condom, or were worried that someone had messed with their birth control. We have one kind of emergency contraception that clients can access in the first aid cabinet. Do you have questions about emergency contraception today? That’s something we can help with.”

- If a client is interested, provide information about emergency contraception (EC) options and how you can assist with accessing. **Plan B is available over the counter and advocacy programs can have it available on site for clients.** Reproductive healthcare access is changing and differs from state to state so it is important to have the most up to date information on reproductive health rights and emergency contraception in your state. NOTE: for clients who weigh more than 155 lbs, Plan B may be less effective, but other EC options are available through a healthcare provider.

**Reflective Question:** “It is understandable if you are not interested in focusing on these things at the moment, but we are here to support you if you want to check in about them another time. Do you have any questions for me?”

**Follow-up conversations about health**

“We wanted to touch back with you and see if there were any other health issues we could support you with, or help get you connected to healthcare if you need it.”

**Supporting Wellness:** Trauma or sudden change can trigger underlying health issues. It is important to continue to check in with clients about their health needs.
“How are you feeling physically and emotionally? Do you [or your children] have any wellness needs or health concerns that we can support you around?”

Share any health and wellness opportunities sponsored by your program or other community based organizations e.g. yoga & mindfulness practices; breathing exercises; exercise and walking groups; sleep support. Share *Just Breathe: A Guide to Wellness* with your client.

**Healthcare Access:**

- **Insurance/Medical Coverage:** “Do you currently have health insurance or medical coverage?” If client does not have health insurance, advocates can:
  - Help clients enroll in health insurance. *Victims of domestic violence are eligible to enroll at anytime during the year.*
  - Find a local health coverage enrollment assister in your area, through Healthcare.gov.
  - Connect clients to a local community health center, which typically have enrollment specialists.
- **Healthcare Provider or Medical Home:** “Do you currently have a health provider who you like and trust?”
  - If the client does not currently have a health provider, or one they trust, learn more about where they are currently being seen and what they are looking for. Offer a warm handoff to the local community health center if appropriate. “*Sometimes clients like to get connected to a regular healthcare provider they like while they are with us, even if everything is okay at the moment, so it is easier to get access to healthcare in the future.*”
- **History of Healthcare Trauma:** “If healthcare providers have been hurtful or broken your trust in the past, or if you are feeling afraid to go to the doctor for whatever reason, it can be really difficult to seek care again. A staff person may be available to come with you if you ever want to bring a support person to a healthcare visit.” Share *Healthcare Guide for Survivors*.

**Mental and Behavioral Health:** Some clients are interested in connecting with mental health supports to help them address trauma, ongoing mental health support, or substance use. Consult *Tips for Discussing a Mental Health Referral with DV Survivors* for more information on how to refer a client to mental health supports.

- **Mental health care:** “Many clients are interested in connecting with mental health supports to help with stress or trauma. If that is something that you were interested in, we can help you navigate that process. Is this something that you would like help with?”
- **Substance use and harm reduction:** “Many people experiencing abuse use alcohol or other drugs more than they would like to be to help them cope. We are here to support you and can connect you to resources that match your needs. Is this something that you would like help with?”
- **Self-harm and suicide:** “Going though domestic violence can be so difficult and can sometimes
lead to people feeling hopeless or like they want to hurt themselves. If any of this is coming up for you, would you be willing to come talk to one of us?”

For more information on how advocates can support the emotional wellness of clients, visit the National Center on Domestic Violence, Trauma, and Mental Health (NCDVTMH). For more information on supporting survivors who are using substances, check out NCDVTMH’s Committed to Safety for ALL Survivors: Guidance for Domestic Violence Programs on Supporting Survivors Who Use Substances.

Sexual and Reproductive Health: Surviving abuse can make it hard for people to get their reproductive and sexual health needs met and sometimes partners interfere with or control sexual and reproductive health choices.

- Reproductive Coercion: “We give all of our clients a few of these cards (share repro health safety card), if it is ever an issue for you or a friend. This info can be helpful if a partner is trying to get you pregnant when you don’t want to be by messing with your birth control, hiding it or tampering with it, not letting you go to the clinic, or not using a condom when you want them to. If you are interested, we can help you get access to emergency contraception, birth control, and other reproductive healthcare.” If yes, offer information or help making an appointment with a local health partner.
- STI Testing: “Many clients are interested in getting tested for STIs and HIV, especially if have experience forced or coerced sex. I can help you get connected to free, anonymous STI testing if you are interested.”
- STIs and HIV: “Many clients are interested in learning more about PrEP, which is a daily medication people can take to prevent HIV. If you are worried about on-going exposure to HIV, I can help you get connected to a healthcare provider who can give you more information about this medication.”
- Pregnant/Parenting Clients: “We want to make sure that pregnant and new parenting clients get all of the support they need. Are you interested in getting more information about supports like doulas, midwives, lactation consultants, or (prenatal) yoga classes?”
- Onsite Sexual Health Resources: “We have different sexual and reproductive health resources here onsite, in case you ever need them. Condoms, lube, and emergency contraception are right here for you to grab anytime.”

For more information about reproductive coercion visit FuturesWithoutViolence.org. For more information supporting clients around HIV testing and care, check out NNEDV’s Positively Safe Toolkit.
Health Centered DV Advocacy Programs

Ensure that your advocacy program is set up to support the health and wellness of survivors!

- Make sure that all client-facing staff receive training and ongoing support on how to offer these health and wellness resources in non-judgmental, non-stigmatizing ways.
- For more information on fostering healing centered shelter environments, check out: [Running a Shelter With Minimal Rules](#).
- Share a list of health and wellness services, resources and strategies available for clients:

<table>
<thead>
<tr>
<th>First Aid</th>
<th>Health Access</th>
<th>Sexual/Repro Health</th>
<th>Wellness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain medicine (Ibuprofen, Tylenol, Aspirin, etc.)</td>
<td>Health insurance enrollment</td>
<td>Pregnancy test</td>
<td>Weekly yoga/ mindfulness class</td>
</tr>
<tr>
<td>First aid for cuts, sprains, etc.</td>
<td>Finding a primary care, mental, dental health provider</td>
<td>Emergency contraception to prevent pregnancy</td>
<td>Food/pantry bank</td>
</tr>
<tr>
<td>Ice packs for injuries</td>
<td>COVID-19 testing, care, and vaccinations</td>
<td>Connection to STI/HIV testing, prevention, counseling</td>
<td>Monthly health celebrations or education sessions</td>
</tr>
<tr>
<td>Medicine for heartburn, diarrhea, nausea, constipation</td>
<td>Health appointments support or transportation</td>
<td>Condoms + lube</td>
<td>Weekly visiting nurse</td>
</tr>
<tr>
<td>Melatonin, tea for sleeplessness</td>
<td>Referral for chronic health issues/pain, brain injury, pregnancy, substance use, etc.</td>
<td>Information on less detectable birth control methods</td>
<td>Survivor relaxation room</td>
</tr>
<tr>
<td>Naloxone for overdose reversal</td>
<td></td>
<td>Connection to reproductive/ sexual healthcare</td>
<td>Support groups and talking circles</td>
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</tbody>
</table>

Add the name, phone, location, hours and other related info for your local health center(s), wellness resources, etc.

**What other ways is your program supporting survivor health and wellness?** Let us know by emailing health@futureswithoutviolence.org.

Updated December 2022. This tool was developed by the National Health Resource Center on Domestic Violence, a project of Futures Without Violence. For more information, visit: [www.IPVhealth.org](http://www.IPVhealth.org)