

Information for CHA Providers

The Trauma Resource and Support Program recognizes that violence affects not only those who experience it directly but also those who care for and support those individuals. Statistics on the prevalence and morbidity of violence are staggering. Violence impacts people of all genders, sexual orientations, cultural, religious, and socioeconomic backgrounds. It is responsible for the preventable deaths of more than 1.6 million people each year, and for long-term physical, psychological, economic, health, and social consequences for countless others.

You are likely to be confronted with the recent or long-term impact of violence on your patients or among your co-workers. No one is exempt.

The Trauma Resource and Support Program seeks to provide answers to many questions that arise when you suspect or hear that the suffering of your patients may be related to exposure to violence.

For urgent matters involving Domestic Violence dial SafeLink's 24hr hotline at 1-877-785-2020.

For urgent matters related to Sexual Assault, contact Boston Area Rape Crisis Center's 24hr hotline at 617-492-7273 or 1-800-841-8371.

How to Ask Important Screening Questions

As you are screening for patient's violence and trauma, it is important to be sensitive about how you ask questions.

- Let a patient know you ask these questions to every patient as the routine. Explain that violence is widespread in our community that many people have been affected by it and experience both physical and psychological effects as a result.
- Use a quiet and private space and ask questions away from patient's friends and family members.
- Respect a patient's autonomy if you suspect some history or presence of violence. Violence takes away a victim's choices and supporting them in feeling empowered and informed to make their own choices can help facilitate recovery.
- Ask questions in culturally appropriate ways, and in ways that are inclusive of survivors who may identify as LGBTQ. Be careful not to assume the gender identity or sexual orientation of the patient or the patient's partner, and always use the patient's preferred pronoun when addressing them.

- Rather than focusing on the details of what happened, validate the patient's experience, and let them know there are resources and support available. Have some resources and materials ready for patients at your office so that when a patient discloses his/her victimization, those materials can be given right away.

Sample Screening Questions

1. Has anyone in your life hurt you physically (e.g., hit, kicked, pushed, choked)?
2. Has anyone in your life threatened to harm you or someone else? (Remember this can include but is not limited to threats of further physical or sexual violence, threats around custody of minor children, threats to jeopardize someone's immigration status and/or threats to "out" someone's sexual orientation or gender identity.)
3. Has anyone in your life forced or coerced you into unwanted sexual activities?
4. Have you ever witnessed someone else being physically or sexually hurt, or threatened?
5. Have you ever lost someone in your life to homicide, domestic violence, war, etc.?
6. How does the violence you've experienced impact you in your present life?
 - a. Thoughts/Images or memories of the events?
 - b. Avoiding reminders of the event?
 - c. Feeling numb?
 - d. Feeling easily startled or on guard?
 - e. Difficulty sleeping?
7. If yes, normalize these reactions and provide resources on common reactions.