



SAFETY PLANNING GUIDE

WHAT IS SAFETY PLANNING?

Safety Planning is a personalized plan to keep an individual safe and it is typically used with survivors of domestic violence, sexual assault, dating violence, and stalking. Safety Planning is a term that refers to the ongoing conversation between an advocate and a survivor on this topic and may or may not be in the form of a written document. Safety plans should always be developed by and with the survivor. They are dynamic and flexible and will likely change with the changing circumstances of an individual's life.

WHAT SHOULD BE INCLUDED IN A SAFETY PLAN?

The contents of a Safety Plan will vary depending on each survivor's experience. Safety Plans should focus on how to reduce risks for the survivor and their children. Victims face different risks if they are currently in an abusive relationship, are considering leaving, or have left the relationship. Safety plans should be tailored to best meet the needs of the individual's circumstance. The most dangerous time for a victim of domestic violence is when they are leaving the relationship. Providers should be aware that safety concerns may be present long after leaving an abusive relationship.

Decisions about specific strategies of a Safety Plans should always be made by the survivor. The role of the advocate is to facilitate a discussion with the survivor to think strategically about how they will stay safe across all aspects of their life and offer information, resources and possible options for consideration. We recommend facilitating the discussion by encouraging the survivors to consider their safety across a broad range of circumstances and options. Topics to discuss with a survivor should include staying safe at home and in the workplace, talking to their children about safety, finding safe housing options, getting support, civil and criminal legal options, protecting their finances, being aware of risks associated with technology and maintaining privacy.

Each plan generated with a survivor will be unique and should include short- and long-term plans. Additional risk and concerns may arise and require changes to the plan. It is essential to let each survivor know that making changes is both a normal part of the process and an important element in optimal safety. Work closely with each survivor to encourage them to revisit and make changes to their plans as needed.



SEXUAL SAFETY

Sexual activity and history should be a part of the discussion around safety planning. Being comfortable with sexuality and gender is key in assisting survivors at risk for HIV or who are living with HIV. We know that survivors of domestic violence, sexual assault, dating violence, and stalking do not always have the power to negotiate safe sex practices with their sexual partner.

However, you can open the conversation about sexual activity with a survivor by giving them information on risk factors for HIV transmission, where they can get tested and medical care, free birth control, and support groups. The more comfortable you are discussing sex and sexuality, the better support and information you can provide to the survivor.

INJECTION DRUG SAFETY

People in abusive and violent environments often use drugs and/or alcohol as a coping mechanism, but not all survivors will drink or use drugs. We recommend **not** requiring survivors to discuss their drug use, current or past, but instead let them know about the risk of HIV acquisition through shared/contaminated drug works, including needles, and where they can get clean syringes, such as drug stores or a needle exchange programs (if your community has one). If a survivor does mention drug use we recommend not documenting this in their file. This is an opportunity to discuss the transmission of HIV and where they can receive testing if they are interested. Review the **Risk Reduction** handout in the *Positively Safe Toolkit* for more information on injection drug use.

PROTECTING PRIVACY

For survivors living with HIV, safety planning may also include strategies to keep their HIV status private. In many communities, there is a significant stigma around being HIV positive. It may be important to discuss ways in which the survivor will be able to prevent others from inadvertently discovering their HIV status. This may include ways to transport and store medications in a way that others won't be able to read the name of the medications that they are taking and thereby figure out that they are living with HIV. This could include strategies such as, storage and transportation of medications in unlabeled pill boxes or vitamin bottles.

In small or rural communities, even being seen entering certain clinics or testing sites could inadvertently disclose a survivor's HIV status or concerns. In turn, an individual living with



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THE INTERSECTION OF DOMESTIC VIOLENCE & HIV/AIDS

HIV being seen accessing domestic violence services, could be “outed” for seeking information or support about abuse in their relationship. Here, domestic violence and HIV providers have the opportunity to work together to ensure that survivors can access critical services with privacy. This may include offering on-site testing and medical services at domestic violence programs or the provision of domestic violence advocacy at health clinics.

SAFETY AND TECHNOLOGY

Technology has a major impact on survivors of abuse. It can be used by a victim to access help, to strategically maintain safety and privacy, and to remain connected to family and friends. It is often used to prove guilt and hold offenders accountable. Yet, technology, in its various forms, is also misused by abusers and perpetrators in crimes of domestic violence, sexual assault, stalking, and trafficking.

NNEDV's Safety Net Project focuses on the intersection of technology and intimate partner abuse and works to address how it impacts the safety, privacy, accessibility and civil rights of victims. For more information about safety and technology, please refer to www.techsafety.org.