

SAFETY PLANNING & HIV

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 or anyone else close to them. Survivors face different risks depending if they are currently with an abusive partner, are considering leaving, or have left the relationship. Safety plans should be tailored to best meet the needs of the individual's circumstances. The most dangerous time for a survivor of domestic violence is when they are leaving the relationship. Providers should be aware that safety concerns may continue long after leaving the relationship.

Decisions about specific strategies of a Safety Plan 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 can stay safe across all aspects of their life, offering information, resources, and possible options for consideration. We recommend

encouraging survivors to consider their safety across a broad range of circumstances and options. Topics to discuss with a survivor may include safety at home and in the workplace, safe housing options, civil and criminal legal options, finances, risks associated with technology, and maintaining privacy. If the survivor has children, safety planning might include discussions about safety with the children and the children's school. Safety planning can often include collaboration with safe family and friends.

Each plan generated with a survivor will be unique and should include short- and long-term plans. Additional risks 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 safety planning discussion. Being comfortable talking about sexuality, gender, and sex is key in assisting survivors vulnerable to 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 with their sexual partner. Their access to testing, medical care, and other support may have also been limited by an abusive partner.

You can help empower survivors to take back control of their sex lives and their sexual health. Domestic violence agencies should offer free condoms and information on HIV prevention methods, such as PEP and PrEP. For individuals whose sexual partner forces them to engage in sex without prevention methods, like condoms, safety planning may include discussing ways the survivor can safely and discreetly use birth control or HIV prevention methods. Domestic violence advocates should provide information on HIV transmission, testing, medical care, and support groups. The more comfortable you are discussing sex and sexuality, the better support and information you can provide to survivors.

INJECTION DRUG SAFETY

While not all survivors use drugs or alcohol, it is common for people who have experienced trauma to use drugs and/or alcohol as a coping mechanism. We recommend not requiring

survivors to discuss their drug use, current or past. Instead, let survivors know about the likelihood of HIV acquisition through drug works, such as used syringes. Provide information about where they can get sterile syringes, such as drug stores or 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. Implementing Harm Reduction Principles is essential to trauma-informed conversations on drug use. Learn more about the Principles of Harm Reduction through the National Harm Reduction Coalition: <https://harmreduction.org/about-us/principles-of-harm-reduction/>.





PROTECTING PRIVACY

In many communities, there is still significant stigma around living with HIV. For survivors living with HIV, safety planning may also include strategies to keep their HIV status private. This may include transporting and storing medications in a way that doesn't allow others to read the label and thereby determine the survivor may be living with HIV or taking medications for HIV prevention. This could include strategies such as storing and transporting medications in unlabeled pill boxes or vitamin bottles. This may also include discussing the pros and cons of injectable PrEP versus oral medication PrEP.

In small or rural communities, being seen entering certain clinics or testing sites could

inadvertently disclose a survivor's HIV status or concerns. In turn, an individual seen accessing domestic violence services could be 'outed' for seeking information or support about abuse. Domestic violence and HIV providers have the opportunity to work together to ensure that survivors can access critical services with privacy and dignity. This may include offering on-site testing / medical services at domestic violence programs or domestic violence advocacy at health clinics.

SAFETY AND TECHNOLOGY

Technology has a major impact on survivors. It can be used by a survivor to access help, strategically maintain safety and privacy, and remain connected to family and friends. It can be used to prove guilt and hold offenders accountable. Yet, technology, in its various forms, is also misused by abusive partners 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 survivors. Safety planning should include discussions on technology. The Safety Net Project believes that survivors should not have to give up technology, such as social media, in order to be safe. Instead, Safety Net empowers survivors to make informed decisions about their technology use and their own safety. For more information about safety and technology, please refer to www.techsafety.org.