

Communication in Cases of Domestic Violence

Factsheet

“Never assume and always ask!” (1)



Find information on [patient cues and empathetic listening](#).

Individuals experiencing domestic violence (DV) may face [various challenges](#) (concerns for safety, fear of potential consequences, or a lack of trust) that can make it difficult for them to openly discuss their situation.

To foster a respect- and trustful communication about the experienced violence, ensure victims have a [private space without accompanying individuals](#) (partner, children, other family members or non-family caretakers) allowing the patient to speak freely and comfortably. In general, it is useful to use “I-Messages” and other non-violent communication methods. It can be used specifically to solve ambivalences in a victim during the counselling or in case of less time for counselling.

Screening Questions for DV

It is crucial to inquire about domestic violence through screening questions without exacerbating the risk of harm to victims and their children. The screening process should commence with a framing statement to introduce and normalise the questions, such as: “I have some questions that I ask every patient. I’m going to ask you these questions now, too.” (2)

Start with asking general questions: Use statements like these to raise the subject of violence before you ask direct questions. Open questions should be asked to encourage the victim to talk instead of saying yes or no. Avoid questions that put the blame on the victim.

- “How are things at home?”
- “I know many people have problems facing violence by their partners, other family members, or someone else they live with. Could it be, that this is the same in your case?”

Framing the question: Create space for silence, allowing the individual time to gather their thoughts. Demonstrate patience and maintain a calm demeanour. Validate the emotions and encourage the patient to share the story at a pace that feels comfortable for them.

- “Because unfortunately violence is so common in our society, I have started asking all of my patients about it.” (3)
- “I’m going to ask you a question that I ask all patients.”



Find information on **indicators** in [Module 2](#).



Individuals from **diverse cultural backgrounds may manifest their symptoms differently.**

Please remain conscious of your own **perspective, biases, and stereotypes** when communicating with a potential victim. Find more information in [Module 8](#).

Ask direct questions: Here are some simple and direct questions that you can start with. They show you want to hear about their problems. Depending on their answers, continue to ask questions and listen to their story. If they answer “yes” to any of these questions, offer support. Do not tell the victim it is not that bad or minimise the pain.

- “Are you ever afraid at home or in your relationship?”
- “Have you ever been slapped, pushed or shoved by someone close to you?”



Responding to a Disclosure

In the event of a patient disclosing domestic violence, employing a [patient-centred approach](#) proves beneficial in offering support to the individual and their family. When someone opens up, listen actively without judgment or offering solutions, giving them the space to express their needs.

While you can seek clarification through questions, focus on allowing them to share their emotions. Pay attention to both [spoken and unspoken cues](#), and use the following techniques to help them articulate their needs, ensuring a better understanding.

- “Is there anything you need or are worried about?”
- “You mentioned that you feel very frustrated.”
- “It sounds as if you are angry about this...”
- “It’s not your fault. You are not to blame.”
- “It’s okay to talk.”
- “I know this is difficult to discuss, but you can talk to me.”
- “You are not alone. I’m here for you.”
- “You are not responsible for what’s going on.”
- “Here is the number to your local domestic violence office. They can help with shelter and counselling.”

Visual Communication

Often, individuals experiencing domestic violence find it challenging to access information or support services. [Visual communication](#) plays a crucial role in raising awareness about domestic violence in medical settings such as hospitals and medical practices. Utilising tools like posters (e.g., with QR codes), leaflets, or pamphlets displays strategically placed in waiting rooms, bathrooms, and other visible areas is essential. Place information with support services in washrooms (with appropriate warnings about not taking them home if the perpetrator could find them).



Click [here](#) for an explanation Video on how to respond to a disclosure.



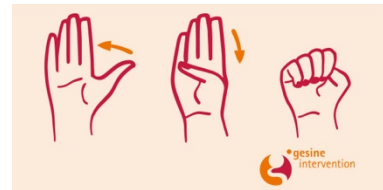
Find specific information on [Gynaecology/Obsetrics](#), [Surgery](#), [Paediatric](#) and [Dentistry](#).

Remember:

- Use inclusive visuals that accurately represent the diverse experiences of individuals affected by violence (all genders without stereotypes).
- If possible, use information available in multiple languages.
- Choose impactful images that promote a positive message. Avoid harmful visuals such as depictions of physical violence (because DV is not only physical), sexualised portrayals of victim-survivors, and images exclusive to specific demographics.

International signal for help

This is an international single-handed gesture used to draw attention to domestic violence. It can be employed when the person in need of help cannot speak loudly, for instance, because the perpetrator is nearby (in the car, at home etc.).



“The signal is performed by holding one hand up with the thumb tucked into the palm, then folding the four other fingers down, symbolically trapping the thumb by the rest of the finger.”

[Click here](#) to see an example Video on how this sign is used in a video call without leaving a digital trace.

Helpful sources

They can be found [here](#).

- ⁽¹⁾ RACGP, Factsheet: Improving Responses, <https://www.racgp.org.au/familyviolence/resources.htm>, accessed 10.01.2024
- ⁽²⁾ www.endgv.org, Working together for gender equity and social justice in King County, Screening for Domestic Violence, <https://endgv.org/wp-content/uploads/2016/05/Screening-for-Domestic-Violence-00000002.pdf>
- ⁽³⁾ Ashur M. L. (1993). Asking about domestic violence: SAFE questions. JAMA, 269(18), 2367