

Sensitive Practice At-a-Glance

The goal of Sensitive Practice is to foster a sense of safety for clients. By adopting the principles of Sensitive Practice as a standard, DHS staff convey respect, support clients autonomy and the right to participate in decision making processes within DHS and decrease the likelihood of inadvertently re-traumatizing the survivors of abuse with whom we work knowingly or unknowingly.

Summary of Principles of Sensitive Practice¹ for DHS Staff	
Respect	Acknowledging the inherent value of clients as individuals with unique beliefs, values, needs, and histories means upholding and defending their basic human rights and suspending judgment of them.
Taking Time	Taking adequate time with clients ensures that they do not feel depersonalized or objectified.
Rapport	Developing and maintaining an interpersonal style that is professional, yet conveys genuine caring, promotes trust and a sense of duty.
Sharing Information	Informing clients of what to expect on an on going basis and inviting them to ask questions and offer information and feedback helps reduce anxiety and promotes active engagement in the planning process.
Respecting Boundaries	Paying ongoing attention to boundaries and addressing difficulties that arise reinforces the client’s right to personal autonomy.
Fostering Mutual Learning	Fostering an environment in which information sharing is a two-way process encourages survivors to learn about options and how to become an active participant in the creation of their plan. It also assists DHS staff to learn how to best work with individuals who have experienced interpersonal violence.
Understanding nonlinear healing	Checking in with the survivor throughout each encounter and over time, and being willing to adjust their actions accordingly, enables DHS staff to meet the needs of individuals whose ability to tolerate questions and information sharing may vary over time.
Demonstrating awareness and knowledge	Showing that they are aware of interpersonal violence helps professionals foster a sense of trustworthiness and promotes an atmosphere in which survivors are willing to work alongside DHS staff.

¹ Adapted from Sensitive Practice At-a-Glance – Handbook on Sensitive Practice for Health Care Practitioners

Responding Effectively	
Waiting areas	<ul style="list-style-type: none"> • Keep clients informed of the length of wait or invite the client to check intermittently • Provide printed materials about domestic violence and sexual assault
Privacy	<ul style="list-style-type: none"> • Have at least one soundproof interview room • Knock and wait for acknowledgement before entering • Problem-solve with clients to meet their needs for privacy or safety
Preparation of Clients	<ul style="list-style-type: none"> • Provide introductory information in plain language, both written and verbal • Negotiate with client to identify workable solutions • Don't assume the client knows what is involved in our processes
Non-adherence to a plan	<ul style="list-style-type: none"> • Explore all types of barriers with the client and problem solve to identify workable solutions • Adapt the plan to fit the client • Create a "same-day" appointment for clients who frequently cancel appointments or don't show
SAVE the situation	<ul style="list-style-type: none"> • Stop what you are doing and focus fully on the present situation • Appreciate and understand the person's situation • Validate the person's experience • Explore the next steps with the client
Anger & Agitation	<ul style="list-style-type: none"> • Pay attention to personal safety • Adopt non-threatening language • Negotiate and assure the client of your interest and concern • Become familiar with signs of a "fight or flight" response
Disclosure	<ul style="list-style-type: none"> • Accept the Information • Express empathy and caring • Clarify confidentiality • Normalize the experience by acknowledging the prevalence of abuse • Validate the disclosure and offer reassurance to counter feelings of vulnerability • Address time limitations • Collaborate with the survivor to develop an immediate plan for safety • Recognize that direct action is not always required • Ask whether it is a first disclosure • Inquire about social support around the abuse and safety issues • Work with the client to set realistic goals and determine appropriate referrals