

# REDUCING INTAKE TRAUMA

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Most of our programs require that people receiving services complete an intake process. All intakes have a common thread, say Sonia D. Ferencik & Rachel Ramirez-Hammond in *Trauma Informed Care: Best Practices and Protocols for Ohio's Domestic Violence Programs*:

“Intakes inquire about extensive, detailed, personal information on a subject that is very sensitive for most individuals. Some survivors find this process extremely painful, and there are many opportunities to trigger an individual or retraumatize someone seeking services.”

In their manual, Ferencik & Ramirez-Hammon (2011) offer several suggestions for making the intake process less stressful and intimidating for the people you serve:

- Before you begin, describe what will occur during the intake process and why you need the information. Reassure individuals that they have the right to “put on the brakes” by asking to stop the process if any of the questions cause them to become triggered, exhausted or in need of a physical or emotional break.
- Inform individuals what you are writing down and why you are documenting what is shared with you. Also fully explain the release of information form and any other documents you are asking them to sign, and offer them plenty of time to read documents if they desire to do so before signing.
- Explain the limits of your confidentiality before you begin, since this may impact which issues an individual feels safe sharing with you. Clarify to survivors what information you cannot keep confidential due to ethical, professional, or legal obligations. This often includes information about imminent harm to a child or credible threats to hurt another individual or oneself.
- Intake questions are often shaped around grant reporting requirements and require lots of information that may seem unnecessary and even insensitive to a survivor in crisis. Remember this and have empathy for the feelings survivors have about the process.
- Include survivors in deciding when to complete their intake. Individuals may feel much better about answering needed questions once they have had a chance to get themselves and/or children settled.
- Pay attention to the environment. Is the space where you are doing the intake interview quiet and private, or are you constantly interrupted by others or have people passing by in the background? Do you have tissues and water available? Allow the individual to modify the lighting and perhaps even offer quiet music as an option. Offering water, tea or coffee and a choice of snacks during the intake can also help put the individual at ease.

- When concluding the intake process, ask how the individual is feeling. Make sure you are not letting the person leave feeling vulnerable. Questions to check out include: How are they feeling both physically and emotionally? Do they have any questions they wanted to ask?

*Trauma Informed Care: Best Practices and Protocols for Ohio's Domestic Violence Programs*, written by Sonia D. Ferencik and Rachel Ramirez-Hammond for the Ohio Domestic Violence Network, explains the need for a trauma-informed approach to domestic violence services, and offers a wealth of suggestions for creating a more welcoming environment in shelter programs, as well as helping survivors of trauma feel more empowered. Access the manual at [www.odvn.org](http://www.odvn.org).