



**Sexual Assault**  
DEMONSTRATION INITIATIVE  
Enhancing Sexual Assault Services

# LISTENING TO SURVIVORS

## ESSENTIAL STEPS FOR THE INTAKE PROCESS

The forms and procedures that an agency uses can ensure that our work with survivors of sexual violence is done in a trauma-informed manner. However, a recurring theme in the Sexual Assault Demonstration Initiative (SADI) was that the intake process and forms used by the Project Sites were often barriers to listening to survivors. As the SADI sites themselves reported (Townsend, 2017):

***“We act like we need a form to work with sexual assault survivors.”***

***“We train staff and volunteers to the form, not to the individual sitting in front of them or on the other end of the phone line.”***

***“Our forms and intake protocols really get in the way. They are the opposite of active listening and trauma-informed. But how do we get away from them?”***

An essential step of making sexual assault services more survivor-focused and trauma-informed is reviewing and revising intake forms and procedures. A trauma-informed system uses the principles of safety, trust, cultural relevance, choice, collaboration, and empowerment in every aspect of their work, including all paperwork.

## THE PURPOSE OF INTAKE

The intake process should first and foremost be about getting to know the survivor so we can support all of their needs and connect them to all the available resources. The intake process is an extension of the healing support that is being offered. It is an

opportunity to introduce the survivor to our approach to services and explain any limits or boundaries on services, such as confidentiality. Information and transparency about our program builds trust, safety, and choice, setting up trauma-informed care from the start. The intake process is about getting to know the whole person – not just their victimization – and helping them get [re]connected to their wholeness. It should always be a two-way conversation – not just filling out forms – where the survivor is introduced to the program and where the advocate gets to know the survivor and their needs, goals, strengths, and resources in order to help them build upon that for their healing.

## THE IDEAL INTAKE FORM

Every agency will develop their own intake forms and procedures based on their advocacy practices and state/territory laws or tribal code. While there is no single perfect form, there are four main components to an ideal intake form. The forms we use guide the questions we ask, so it's important that the form be designed for survivors' comfort and wellbeing. The questions we ask should never be voyeuristic or data driven, but always have the purpose of helping the survivor and be open-ended.

**Intake works best when it is blended into normal processes and conversation.**

There are four components of an ideal intake procedure and forms:

### 1. Information you want the survivor to know, such as:

- a) I believe you
- b) I'm here to support you
- c) The role of the advocate
- d) Confidentiality
- e) Agency services
- f) How advocacy appointments work get scheduled etc.

### 2. Open ended questions, such as:

- a) How would you like for me to help you today?
- b) What would you like for me to refer to you as [name]?
- c) What would you like to share with me about your experience[s] with sexual violence [or whatever word the survivor has already used]?
- d) Would you like for me to stay for this part of the exam/interview?
- e) Did the nurse/officer explain to you...?

**Advocates need to put the intake form aside and not use it while meeting with a survivor, whether on the phone or in-person. Rather, advocates should already know the questions and information to be shared and be prepared to incorporate them into conversation so that they are asking or bringing it up when it is appropriate.**

- f) Do you have any questions?
- g) What supports do you have?

### 3. Required signatures (if any)

- a) Federal and state laws
- b) State service standards

### 4. Demographic and other data collection information required by

- a) Federal and state laws or funding requirements
- b) State service standards

## CONDUCTING THE INTAKE

Advocates need to put the intake form aside and not use it while meeting with a survivor, whether on the phone or in-person. The intake isn't about following forms and fitting the survivor into neat little check boxes. Rather, advocates should already know the questions and information to be shared and be prepared to incorporate them into conversation so that they are asking or bringing it up when it is appropriate. Any information for required data collection, such as demographics, can be completed on the forms afterwards and should not be the first thing an advocate does when first meeting with a survivor. This practice of putting our forms aside encourages advocates to really engage in conversation with survivors.

**Remember, the survivor's needs and comfort always come first.**

### References

Townsend, S. M. [2017]. *Sexual Assault Demonstration Initiative: Final report*. Retrieved from the National Sexual Violence Resource Center: <https://www.nsvrc.org/publications/nsvrc-publications/sexual-assault-demonstration-initiative-final-report>

