

**Arizona intimate Partner Risk Assessment Instrument System  
VICTIM SERVICES PROTOCOL**

There are several options to respond to victims of intimate partner violence who screen-in based on the risk assessment questions (“risky” = 2-3 risk factors present or “high risk” = 4 or more risk factors present), or based on professional judgment that the victim is at high risk of future violence and/or homicide. These options may be used alone or in combination. For all potentially available interventions, it is the victim’s choice whether or not to accept offered assistance or information.

- If available, an advocate should join officers on-scene to provide support and information about local advocacy resources.
- If available, a local (or partner) advocacy organization should be called on the telephone for crisis intervention.
- If available and safe for the victim, telephone or in-person follow-up by a local advocate should be provided.
- If in-person or telephone advocacy services are not available on scene, police officers should provide a card with information about local, state and national resources.

The overarching goal of advocate contact at the scene of an intimate partner violence call for service (or shortly thereafter) is to offer support and education intended to increase the survivor’s empowerment and autonomy. The following guidelines are intended to assist advocates in achieving this goal.

- During follow up with victims who screened in as “risky” (2-3 risk factors present) or “high risk” (4 or more risk factors present), offer the following explanation.
  - I know the officer you had contact with asked you some questions about prior abuse and violence in your relationship. Your answers signaled to us that you might be in danger of being seriously hurt or even killed.
  - I would like to learn more about your situation and provide some strategies and suggestions that may help you to stay safer. While I can provide thoughts and suggestions, any decision about what to do (or what not to do) is up to you.
- During follow up with victims who did not screen in as “risky” (2-3 risk factors present) or “high risk” (4 or more risk factors present), offer the following explanation.
  - I know the officer you had contact with asked you some questions about prior abuse and violence in your relationship.
  - I would like to learn more about your situation and provide some strategies and suggestions that may increase your safety. While I can provide thoughts and suggestions, any decision about what to do (or what not to do) is up to you.
- You may ask additional follow up questions as needed, including additional (i.e., tier 2) questions about risk included in the protocol.

**CONTACTS AFTER A DOMESTIC VIOLENCE INCIDENT**

(adapted from the ACESDV service standards for crisis lines)

Crisis intervention services must be provided with a primary focus on the provision of safety planning information, advocacy, and empowerment.

1. Crisis intervention should include the following elements:
  - a. The crisis line must be answered by a program staff member or volunteer who has had domestic violence crisis intervention training.
  - b. Victims of domestic violence who are differently abled should be provided with equal access to domestic violence crisis intervention.
  - c. A program must have written procedures on how advocates will respond to non-English speaking persons. For telephone crisis intervention, use of an over-the-phone interpretation service, such as the one provided by the Coalition, is recommended.
  - d. For telephone crisis intervention, the use of caller-identification equipment or services should be used with discretion and in the spirit of anonymity.
  
2. Crisis intervention services are based upon a problem-solving model to provide information and referrals that assist an individual in crisis. Crisis intervention services should include, but not be limited to:
  - a. Assessing risk and/or danger (see the APRAIS law enforcement protocol);
  - b. Assessing critical needs, including medical needs;
  - c. Safety planning;
  - d. Education and empowerment;
  - e. Providing information and referral to community resources.