

Your Voice Matters: Assessing Your Safety and Support

Voluntary, Confidential DVP MOVERS Assessment — Your feedback shapes future services and funding.

You may be facing a variety of different challenges to safety. When we use the word **safety** in the next set of questions, we mean safety from physical or emotional abuse by another person. **Please circle the number that best describes how you think about your and your family's safety right now.** When you are responding to these questions, it is fine to think about your family's safety along with your own if that is what you usually do.

0: *Never true* 1: *Sometimes true* 2: *Half the time true* 3: *Mostly true* 4: *Always true*

1. I can cope with whatever challenges come at me as I work to keep safe.	0	1	2	3	4
2. I have to give up too much to keep safe.	0	1	2	3	4
3. I know what to do in response to threats to my safety.	0	1	2	3	4
4. I have a good idea about what kinds of support for safety that I can get from people in my community (friends, family, neighbors, my faith community, etc.).	0	1	2	3	4
5. I know what my next steps are on the path to keeping safe.	0	1	2	3	4
6. Working to keep safe creates (or will create) new problems for me.	0	1	2	3	4
7. When something doesn't work to keep safe, I can try something else.	0	1	2	3	4
8. I feel comfortable asking for help to keep safe.	0	1	2	3	4
9. When I think about keeping safe, I have a clear sense of my goals for the next few years.	0	1	2	3	4
10. Working to keep safe creates (or will create) new problems for people I care about.	0	1	2	3	4
11. I feel confident in the decisions I make to keep safe.	0	1	2	3	4
12. I have a good idea about what kinds of support for safety I can get from community programs and services.	0	1	2	3	4
13. Community programs and services provide support what I need to keep safe.	0	1	2	3	4

Please feel free to share additional comments about working with Clear Creek Advocates:

DATE: _____

CLIENT ID # _____ to be filled by staff