

Addressing Intimate Partner Violence Through Confidentiality, Universal Education + Empowerment, and Support (CUES)

Confidentiality, Universal Education + Empowerment, and Support (CUES) is an evidence-based, trauma-informed approach to screening clients for intimate partner violence (IPV), no matter their perceived risk. CUES helps providers ensure that clients are aware of available survivor support services—and that they have information to pass to friends and family who might need it. This job aid supplements the RHNTC’s [Demonstration Video Series: Applying the CUES Approach for Intimate Partner Violence Response](#), which was developed in partnership with [Futures Without Violence](#).

C: Confidential

Always see the client alone for at least part of the visit. Explain the limits of confidentiality before discussing relationships or IPV.

UE: Universal Education + Empowerment

Use safety cards to talk with all clients about healthy and unhealthy relationships, without focusing on disclosure. Give at least two cards to every client so they can share them with friends and family. Order free safety cards [here](#).

S: Support

Know how to support a client who discloses IPV. Respond in a nonjudgmental way. Make a warm referral to a domestic violence partner organization, and document the disclosure so you can follow up at the next visit. Consult and follow your Mandatory Child Abuse Reporting Policy. Find guidance on [mandatory reporting requirements](#) and responding to disclosures at [RHNTC.org](#) and [statutes and policies](#) on domestic violence and health care at Futures Without Violence.

Why CUES?

Even though at least 1 out of 3 individuals report experiencing sexual violence, physical violence, or stalking by an intimate partner, clients rarely disclose IPV when asked directly, and may have valid reasons for that.¹ Instead of asking for disclosure, use CUES.

Why two?

Research shows that giving two copies of IPV resources, not just one, normalizes the encounter by treating clients as allies who can help others. Taking the focus off the client can help them feel respected and puts power into their hands, whether or not they choose to share their stories.

¹ <https://www.cdc.gov/intimate-partner-violence/about/index.html>

CUES: How can I say it?

C: Confidentiality

To partners/family members
accompanying the client:

To the client:

“Before we get started, I want to let you know that everything you tell me is confidential, unless you were to tell me about [see your state’s mandatory reporting requirements].”

“It’s great that you came today to support [name,] but we see all clients alone first for the first part of the visit. If you wait here, we can come get you as soon as we’re ready for you.”

UE: Universal Education + Empowerment

“I share these cards with all my clients. I give everyone two: one for you and one you can give to a friend. They talk about relationships and what we deserve in them, such as respect, kindness, and no pressure to have sex. They also talk about situations with partners who may try to hurt or control you. On the back are numbers for 24/7, free, anonymous text and helplines.”

“Is this something that you could take with you? Or can you take a photo of it?”

S: Support

“Thank you for sharing this with me. I’m so sorry this is happening. A lot of people have been in this kind of situation. I could connect you to an expert who can help, like the folks from the [National Domestic Violence Hotline or other appropriate referral resource*].”

Survivors say they want health providers to:

- Be nonjudgmental
- Offer information and support
- Listen
- Not push for disclosure

Hotlines and Resources

Free, confidential 24/7 talk or text support:

- National Domestic Violence Hotline
1-800-799-SAFE (7233)
thehotline.org
- RAINN
1-800-656-HOPE (4673)
rainn.org

Learn more at:

- IPVHealth ipvhealth.org
- Futures Without Violence
futureswithoutviolence.org
- Reproductive Health National Training Center RHNTC.org