DANGER ASSESSMENT for IMMIGRANT WOMEN

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Several risk factors have been associated with increased risk of violence, particularly severe and/or life threatening violence, among immigrant women in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of repeat and severe violence in situations of abuse and for you to see how many of the risk factors apply to your situation.

Using the calendar, please mark the approximate dates during the past year when you were abused by your partner or ex partner. Write on that date how bad the incident was according to the following scale:

1. Slapping, pushing; no injuries and/or lasting pain
2. Punching, kicking; bruises, cuts, and/or continuing pain
3. "Beating up"; severe contusions, burns, broken bones
4. Threat to use weapon; head injury, internal injury, permanent injury
5. Use of weapon; wounds from weapon (If **any** of the descriptions for the higher number apply, use the higher number.)

#	Yes	No	Mark **Yes** or **No** for each of the following ("he" or “him” refers to your husband, partner, ex-husband, ex-partner, or whoever is currently physically hurting you.)
1			Do you prefer to answer these questions in English?
2			Has the physical violence increased in severity or frequency over the past year?
3			Has he ever used a weapon against you or threatened you with a lethal weapon? (If yes, was the weapon a gun?____)
4			Does he threaten to kill you?
5			Has he avoided being arrested for domestic violence?
6			Are you married to him?
7		*	Do you have any children living with you in your home?
8		*	Do you have any children with him?
9			Do you have a child that is not his?
10			Has he ever forced you to have sex when you did not wish to do so?
11			Does he ever try to choke you?
12			Is he an alcoholic or problem drinker?
13			Is he violently and constantly jealous of you? (For instance, does he say "If I can't have you, no one can.")
14			Have you ever been beaten by him while you were pregnant? (If you have never been pregnant by him, check here: ____)
15			Has he ever threatened or tried to commit suicide?
16			Does he threaten to harm your children?
17			Do you believe he is capable of killing you?
18			Does he follow or spy on you, leave threatening notes or messages on voicemail, destroy your property, or call you when you don’t want him to?
19			Are you unemployed?
20			Have you attended college, vocational school and/or graduate school?
21		*	Do you have another / new partner?
22			Do you hide the truth from others because you are afraid of him?
23			Does he prevent you from going to school, or getting job training, or learning English?
24			Has he threatened to report you to child protective services, immigration, or other authorities?
25			Do you feel ashamed of the things he does to you?
26			Have you ever threatened or tried to commit suicide?

* indicates that a “no” response increases risk.

Thank you. Please talk to your social worker, advocate, counselor or nurse about what the Danger Assessment means in terms of your situation.