

Guide to Creating A Risk Assessment for Survivor Engagement

This document is about assessing risk in survivor participation activities and events. The guide was co-produced with survivors, and it should be used alongside the National Engagement Framework.

Introduction

It is important to identify potential risks when starting engagement work. A **risk** is *the chance of something happening which will negatively affect a person or people*.

Survivor participation will always be risky. Nobody wants to feel uncomfortable or retraumatised. Ensuring no-one ever feels uncomfortable means both responsible church officers (RCOs) and survivors couldn't ask difficult and important questions, which would limit the chance of creating meaningful changes towards a safer Church. This is what we all want and why we are all here.

Risks will change over time; because we all change, the wider world changes, and our relationships change. Keeping an open dialogue essential to build and sustain relationships between victims and survivors and RCOs. This in turn will maintain manageable limits around risk. It shouldn't be a chore – it's a hopeful, creative opportunity.

A worked example is included in each step of this guide, followed by safety and wellbeing discussion prompts: *5 survivors and 2 facilitators are creating a document explaining how to respond well to disclosures of harm for Church of England staff and volunteers in diocese X. The document will be shared with staff and volunteers and will be available online and in parishes*

1. Identify the nature, length, and frequency of the engagement. Explore the engagement in the context of each person's life and circumstances where they are comfortable to do so.

Example: Consider how many hours the document will take to create, then consider how often the survivors can meet and for how many hours at a time. This will determine how long each participatory activity will take. This needs to be discussed with everyone involved, so you hear everyone's opinions and schedules. You can consider the many availabilities and needs before coming up with the best for everyone.

Discussion prompts:

- What do you think you can bring to this conversation?
- How often would you want meetings to be held?
- How long should each meeting be?
- If we were to meet [this frequently] for [this long], the participation would finish in [this month]. Does that sound alright to you?
- How do you think you might feel about extending, if everything took a bit longer than expected?
- What might you want or need to feel OK during and between sessions? How about in the weeks after we finish?
- This engagement will involve doing...seeing...being...

2. Identify any potential risks.

The risks to someone, and how to minimise them, is best represented in their own words. It is each person's responsibility to share their relevant needs and circumstances as far as they are able. The RCO is responsible for creating an environment where people feel able to share this information. The RCO can then collate this information, and arrange the participation so that everyone's needs and circumstances – whether they are a victim, survivor, facilitator, or anyone else - can be accommodated as far as possible.

Example:

Discussion prompts:

- These are some questions to ask. How do you feel about discussing these with a group?
- There will be some follow-up questions that we won't know in advance. How does that feel?
- We plan to meet [on Zoom/Teams/in person at this venue]. Do you need any support to access that space?
- In an ideal world, what changes would you like to see? And, in our unideal world, what we can reasonably expect to achieve?

<p>1) Survivors may find it hard to hear, or give, testimony: While discussing how disclosures can be handled well, some survivors might share their experience of disclosures being handled badly. Some survivors will find it empowering to share their stories and hear other stories, while others may find it uncomfortable or upsetting.</p> <p>2) Survivors may be retraumatized if they hear further poor responses to disclosure: Survivors may feel lied to or ignored if they hear about more inappropriate responses to harm in diocese X or even the wider Church. This may trigger trauma responses around previous experiences of being lied to or ignored, with severe personal consequences.</p>	<ul style="list-style-type: none"> - How long might those changes take? How would it feel to keep hearing about poor responses in the meantime? - We won't solve the problem altogether. How would it feel to find out further down the line that poor responses were still happening? - How can you look after yourself if you get triggered? Do you have support in place?
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3. Assess the impact of the risk on each person. Consider both the likelihood of the risk, and how severe the impact could be. The impact might be on someone's emotional, physical, psychological or social wellbeing, and/or it might be on the efficacy or longevity of the work being done.

<p><i>Example:</i></p> <p>1) Survivors may be retraumatized: someone may feel mild discomfort to life-threatening distress depending on the context and individual. Trauma responses are involuntary survival mechanisms and can lead people to say or do things that they otherwise would. This means other members of the group may feel offended, threatened or upset by someone else's trauma response.</p> <p>2) Survivors may need to stop their participation, and they have the right to do so : for some survivors, engagements contribute to personal healing and so stopping their involvement can be difficult. For others, this kind of work may simply not be right for them, and that is fine too. Prioritise the wellbeing of that person. There is a chance the work will slow down if someone withdraws – create a plan for this situation.</p>	<p>Discussion prompts: (Following on from the answers given to questions in the previous example about how certain events would feel:)</p> <ul style="list-style-type: none"> - What normally happens for you when you feel like that? - If you can, please let me know in the moment if something doesn't feel safe. However, I know that it not always possible. Are there any signs that show you are becoming distressed?
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4. Discuss what could be done to minimise chances of the risk occurring, or manage the impact if it does. Evaluate the current and past strategies for managing risks. Create a safety plan when appropriate.

<p><i>Example:</i></p> <p>1) Facilitators can work hard to try to avoid certain topics or triggers, but they can't guarantee to succeed at the time.</p> <p>2) The group might be impacted if one survivor withdraws from the project. It's important to explore how individuals may respond in that situation</p>	<p>Discussion points:</p> <ul style="list-style-type: none"> - We can't guarantee that something won't come up, and we can't ban specific topics as being silenced or censored can be retraumatizing. However, if we are aware there are topics or phrases that are particularly difficult, we can respond appropriately if they come up. Are there topics or triggers you want to let us know about? (You can go away and think about this). - What would you like me to do if I notice signs of possible distress? - What can we do to support you through finding out that poor responses are still occurring? - Participants may drop out for all sorts of reasons. Do you have a sense now of whether you'd rather continue with the remaining group or recruit another survivor? We will re-evaluate at the time if this does occur.
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Please note that, though we hope this document will help to shape your plans, following this advice is not an adequate replacement for risk assessment policies and procedures in your setting. It is not also replacing trauma-conscious training. Trauma-conscious practice and awareness is relational and needs to be embodied. RSOs and particularly your facilitators need as a minimum to

have undertaken some in-person relevant training, and ideally to engage in ongoing reflective practice with a qualified practitioner as well.

This guide will be reviewed in November 2026 alongside the National Survivor Participation Framework