

LESBIAN, GAY, TRANSGENDER AND BISEXUAL (LGTB)
DOMESTIC VIOLENCE IN 1999

A Report of the
National Coalition of Anti-Violence Programs



This report was authored by the
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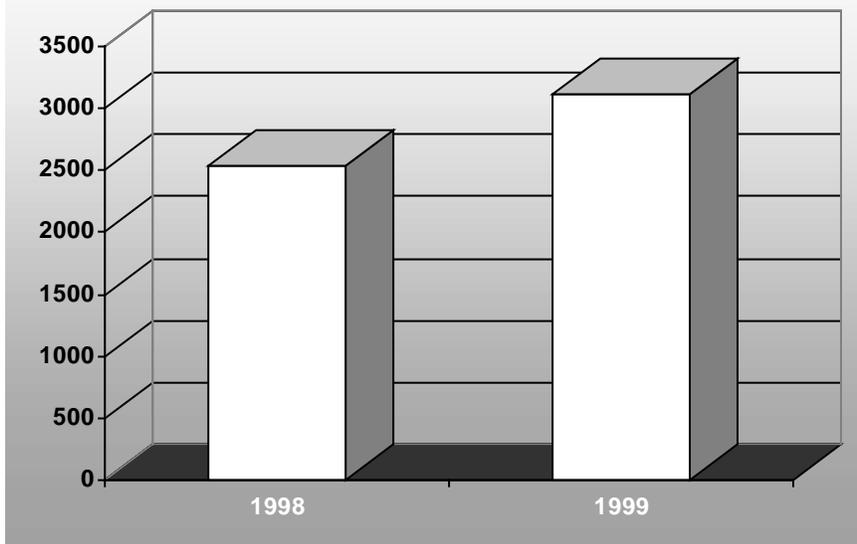
Introduction

In 1999, the National Coalition of Anti-Violence Programs (NCAVP) collected domestic violence report statistics from eight regions of the United States. These included Los Angeles, CA; San Francisco, CA; Colorado; Chicago, IL; Boston, MA; New York City, NY; Cleveland, OH and Columbus, OH. These statistics reflected the data collected by eleven distinct agencies, some of them NCAVP member programs and others that work collaboratively with an NCAVP member program in that region (see agency list—in the cases of San Francisco and Boston, statistics came from more than one agency).

During the reporting year beginning January 1, 1999 and ending December 31, 1999, these groups recorded 3,120 cases of domestic violence in the relationships of lesbian, gay, transgender and bisexual (LGTB) people. This marks a 23% increase over the 1998 total of 2,534. The largest numbers of cases were reported in major coastal metropolitan areas such as San Francisco (741 cases), Los Angeles (1,356), and New York (510). Increased case reporting rates were most marked in programs in Colorado (a 19% increase over 1998), Boston (22% increase), Los Angeles (43% increase), and Chicago (64% increase). The Lesbian & Gay Community Center of Greater Cleveland, which had no reported cases in 1998, reported 10 cases this year. The remaining programs' numbers remained at levels similar to those reported in 1998.

While significant for what it reveals about the broader incidence of domestic violence in the LGTB community, the rise in reported case

Number
of Domestic Violence Cases 98-99



NCAVP MISSION STATEMENT

The National Coalition of Anti-Violence Programs (NCAVP) addresses the pervasive problem of violence committed against and within the lesbian, gay, transgender, bisexual (LGTB) and HIV-positive communities.

NCAVP is a coalition of programs that document and advocate for victims of anti-LGTB and anti-HIV/AIDS violence/harassment, domestic violence, sexual assault, police misconduct and other forms of victimization.

NCAVP is dedicated to creating a national response to the violence plaguing these communities. Further, NCAVP supports existing anti-violence organizations and emerging local programs in their efforts to document and prevent such violence.

NCAVP MEMBER ORGANIZATIONS

Organizations whose names are in *bold and italic type* contributed data to this report.

ARIZONA

Anti-Violence Project/Valley of the Sun Gay & Lesbian Community Center
PO Box 33367
Phoenix, AZ 85067-3367
TEL (602) 265-7283
FAX (602) 265-7283

ARKANSAS

Womens Project
2224 Main Street
Little Rock, AR 72206
TEL (501) 372-511
FAX (501) 372-0009

CALIFORNIA

Anti-Violence Empowerment Committee Project of the Central Coast
PO Box 241
Santa Barbara, CA 93102
TEL (805) 569-0561
FAX (805) 569-0526

Community United Against Violence

973 Market Street, Suite 500
San Francisco, CA 94103
TEL (415) 777-5500
FAX (415) 777-5565
<http://www.xq.com/cuav/>

NCAVP MEMBER ORGANIZATIONS (continued)

Los Angeles Gay and Lesbian Center Anti-Violence Project and the STOP Partner Abuse Domestic Violence Program

1625 North Schrader Blvd.
Los Angeles, CA 90028
TEL (323) 993-7645
FAX (323) 993-7699
<http://www.laglc.org>

Gay and Lesbian Center of Long Beach
2017 East Fourth Street
Long Beach, CA 90814
TEL (562) 434-4455
FAX (562) 433-6428

The Lesbian & Gay Men's Community Center, San Diego
P.O. Box 3357
San Diego, CA 92163
TEL (619) 692-2077
FAX (619) 260-3092

WOMAN INC.
333 Valencia Street, Suite 251
San Francisco, CA 94103
TEL (415) 864-4777
FAX (415) 864-1082

COLORADO
The Anti-Violence Program of Equality Colorado
P.O. Box 300476
Denver, CO 80203
TEL (303) 839-5540
FAX (303) 839-1361
<http://www.equalitycolorado.org>

CONNECTICUT
Connecticut Women's Education and Legal Fund
135 Broad Street
Hartford, CT 06105
TEL (860) 247-6090
FAX (860) 524-0804

DISTRICT OF COLUMBIA
Gays and Lesbians Opposing Violence
1712 16th Street NW
Washington, DC 20009

FLORIDA
Gay, Lesbian & Bisexual Community Center of Central Florida
PO Box 533446
Orlando, FL 32853
TEL (407) 425-4527
FAX (407) 423-9904
<http://www.glbcc.org>

numbers should not be interpreted to reflect an absolute increase in the incidence of such violence overall. Larger numbers of cases reported to NCAVP member can often be traced to enhancements in staffing and program capacity as well as improved outreach efforts. While NCAVP is not able to gauge the total incidence of domestic violence in the lives of LGTB people with this report, other research has estimated the rates to be similar to those experienced by heterosexual couples; i.e., 25%-33% of all relationships involve violence.¹

While the agencies participating in this report have each made an institutional commitment to track incidents of LGTB domestic violence, differences in program size and local reporting requirements make having one unified reporting form impractical. In order to contribute data to this report, all the agencies agreed on common questions and definitions, and only provided statistics that corresponded to them.

As a result, only some sections of the analysis in this report reflect complete information from all eight regions. Every region's information is included in the demographic sections of gender, sexual orientation, and race, but under the section about age, one agency's (Network for Battered Lesbians and Bisexual Women, Boston MA) recording mechanism made its data incompatible with NCAVP's tallying procedures. Further, data from only seven of the eight regions are included in this report under the areas of: physical injuries, medical attention sought or received, crimes, number of incidents, offender information, police response, and monthly incident trends. The seven regions reporting data in these categories were: San Francisco, Colorado, Boston (Fenway Community Health Center only, the Network for Battered Lesbians and Bisexual Women only contributed data for monthly incident trends), Columbus, New York City and Cleveland.

This year, NCAVP added three experimental areas of data collection. These areas were related to issues that have emerged as significant to programs serving LGTB survivors of domestic violence. First, to the category of Police Response, "Complaint Taken/Dual Arrest" was added as an outcome. Second, under Offender Information, "Caregiver" was added as a relationship option. And third, a new category, "Court Response" was added to track information about post-arrest restraining order activity. However, these new categories were conceived only during the period in which aggregate data were being prepared for this report, so that it was necessary for the reporting groups to undertake extensive retrospective analysis of their client and case information. As a result, only three regions were able to provide reliable data in these

¹Lobel, K. (Ed.). (1986). *Naming the violence*. Seattle: Seal Press.

new categories. These regions were San Francisco, Chicago and Boston (again, Fenway only). NCAVP anticipates that data in the new categories will become collected from a larger number of sites next year

All of the reporting agencies included in this report collect other data that is not requested or reported by NCAVP. For more information from a particular region or program, please first review the independent local analyses included at the end of this report, and then contact those agencies directly. A contact list of all NCAVP member agencies can be found in the margins of this section.

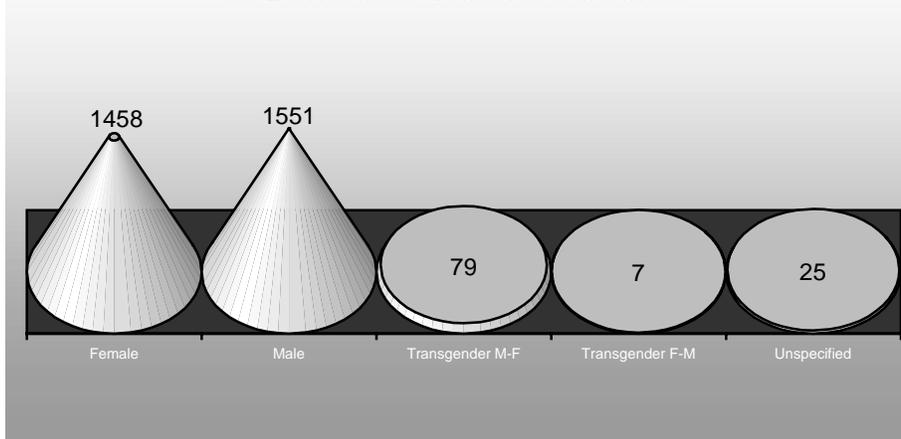
INFORMATION ABOUT SURVIVORS

Gender Identity

In 1999, 50% (1,551) of the LGTB domestic violence cases reported to NCAVP involved survivors identifying as male, and 47% (1,458) as female. Just fewer than 3% (79) of reported survivors were transgender male to female, and in only 7 cases did a survivor identify himself as transgender female to male. In less than 1% of the cases, the gender identity of the survivor was not reported.

In comparing to the proportion of male to female cases, it should be noted that not all reporting agencies have services for men (e.g. Network for Battered Lesbians, Asian Women's Shelter, and WOMAN Inc. are women-only services). Further, the agencies that serve people of all genders tend to report higher rates of usage among men. This may be explained by the fact that while female survivors can in some areas access lesbian-specific programs or services from some mainstream

Gender
of Domestic Violence Clients



NCAVP MEMBER ORGANIZATIONS (continued)

IDAHO
Idaho Anti-Violence Project
P.O. Box 768
Boise, ID 83701
TEL (208) 344-4295
FAX (208) 344-4458

ILLINOIS
Horizons Anti-Violence Project
961 West Montana
Chicago, IL 60614
TEL (773) 871-CARE hotline
FAX (773) 472-6643
<http://www.horizonsonline.org>

KENTUCKY
Gay & Lesbian Services Organization
Box 11471
Lexington, KY 40575-1471
TEL (606) 257-3530

LOUISIANA
Lesbian and Gay Community Center of New Orleans
2114 Decatur
New Orleans, LA 70116
TEL (504) 945-1103

MASSACHUSETTS
Fenway Community Health Center
Violence Recovery Program
7 Haviland Street
Boston, MA 02115
TEL (617) 267-0900
FAX (617) 267-3667
<http://www.fchc.org>

MICHIGAN
Triangle Foundation
19641 West Seven Mile Rd.
Detroit, MI 48219
TEL (313) 537-3323
FAX (313) 537-3379
<http://www.tri.org>

MINNESOTA
Out Front Minnesota
310 East 38 Street, Suite 204
Minneapolis, MN 55409
TEL (612) 822-0127
FAX (612) 822-8786

MISSOURI
St. Louis Lesbian & Gay Anti-Violence Project
c/o University of Missouri
Department of Psychology
St. Louis, MO 63121
TEL (314) 826-7067 hotline
FAX (314) 516-5392

NCAVP MEMBER ORGANIZATIONS (continued)

NEW YORK
New York City Gay & Lesbian Anti-Violence Project
240 West 35th Street, 200
New York, NY 10001
TEL 212-714-1184
FAX 212-714-2627
<http://www.avp.org>

OHIO
Buckeye Region Anti-Violence Organization
P.O. Box 82068
Columbus, OH 43202
TEL (614) 268-9622
FAX (614) 262-9264

Lesbian and Gay Community Service Center of Greater Cleveland
6600 Detroit Avenue
Cleveland, OH 44102
TEL (216) 651-5428
FAX (216) 651-6439

Stonewall Cincinnati
PO Box 954
Cincinnati, OH 45201
TEL (513) 651-2500
FAX (513) 651-3044

OKLAHOMA
Tulsa Oklahomans for Human Rights
4021 South Harvard Avenue
Suite 210
Tulsa, OK 74135-4600
TEL (918) 747-5466
FAX (918) 747-5499

RHODE ISLAND
Rhode Island Alliance for Lesbian and Gay Civil Rights
41 12th Street
Providence, RI 02906
TEL (401) 331-6671
FAX (401) 272-4374

TEXAS
Montrose Counseling Center
701 Richmond Avenue
Houston, TX 77006
TEL (713) 529-0037
FAX (713) 529-0037
<http://www.neosoft.com/~mcc/>

domestic violence programs, male survivors are more likely to identify LGTB agencies as their only resources for help.

In 1999, the differences between reported rates of male and female survivors at organizations serving both genders were as much as 68% and 32% at Fenway in Boston, and as low as 51% and 44% at Equality Colorado. Also, limited program capacity may force some LGTB-specific programs that serve people across the gender spectrum to refer some female clients elsewhere for services, since it is more likely that there will be other resources available to women in any given area. Therefore, in these instances, male victims are slightly more likely to receive ongoing services at LGTB agencies than are female victims. Referrals for lesbian and bisexual women often pose additional data collection problems because most mainstream agencies do not ask about sexual orientation or record that information even when it is volunteered.

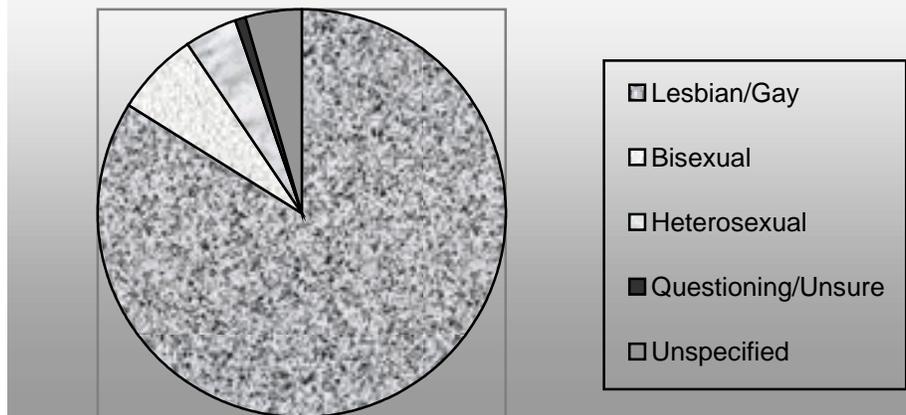
The extraordinarily low rates of reporting among transgender-identified victims may be attributable to the perceived or actual lack of appropriate resources to serve them. Many LGTB community-based agencies are still in the process of structuring their services in such a way to make them fully welcoming and supportive of transgender survivors. Finally, data collection from transgender people becomes particularly elusive because it is likely that some transgender survivors report at intake as the gender (male or female) with which they identify, rather than identifying as transgender. The policy of most of the groups participating in this report is to acknowledge the self-reported gender identity of survivors in all instances.

Sexual Orientation

The overwhelming majority (84%) of reports of domestic violence came from people identifying as lesbian or gay (2,615). An additional 7% of reports (210) came from bisexual identified survivors; 4% (128) identified as heterosexual; and another 1% (31) who questioned or were unsure of their sexual orientation. Finally, in 4% of the cases (136) the sexual orientation of the survivors was unknown.

These numbers, too, should be approached with caution. Collection of data from bisexual survivors, for example, presents its own set of challenges. Given that bisexual people can often meet with subtle or overt bias responses when accessing services at agencies predominantly serving lesbians and gay men, it is possible that some bisexual survivors who received domestic violence services identified themselves as gay or lesbian. Furthermore, when a bisexual person is in a domestic violence

Sexual Orientation of Domestic Violence Clients



situation with an opposite sex partner, the former may choose to go to a mainstream agency and identify him/herself as heterosexual. Finally, because many domestic violence programs that serve people of all genders construct their interventions around the gender of the *partner* (rather than the identity of the survivor), bisexual survivors may have no choice but to remain uncounted in many instances—they are effectively classified either as gay/lesbian or heterosexual.

There were a small number of people who identified as heterosexual in 1999. Some of the people in this group may be transgender/transsexual people who identify as heterosexual. Other than some heterosexual individuals who self-identify as “queer” (such as some transgender individuals), most of the rest were males denied services at mainstream agencies serving only women. Still others sought services as a consequence of outreach to HIV-affected communities, which are not defined by tsexual orientation. Finally, some heterosexual individuals choose to access LGTB victim service agencies for a variety of other reasons including proximity, public awareness, advertising, agency reputation, or referral.

Age

Note: Analysis in this category includes all eight reporting regions, but again, the Boston data is solely from Fenway, and does not incorporate information gathered from the Network for Battered Lesbians and Bisexual Women.

None of the reporting agencies had specific outreach programs for young people or senior adults in 1999 (Colorado began a program specific to youth in 1999, but had not yet progressed beyond its start up

NCAVP MEMBER ORGANIZATIONS (continued)

Lambda GLBT Community Services
P.O. Box 31321
El Paso, TX 79931
TEL (800) 616-HATE hotline
FAX (208) 246-2292
<http://www.lambda.org>

VIRGINIA
Virginians for Justice
P.O. Box 342
Capitol Station
Richmond, VA 23202
TEL: (800) 258-7842 hotline
FAX (804) 643-2050

OTHER GROUPS

The following groups also collected and contributed data for portions of this report. NCAVP is grateful for their assistance.

Network for Battered Lesbians and Bisexual Women
PO Box 6011
Boston, MA 02114
TEL (617) 695-0877
FAX (617) 423-5651
<http://www.nblbw.org>

Asian Women's Shelter
35-43 18th Street #19
San Francisco, CA 94110
TEL (415) 751-7110
FAX (415) 751-0806

INCIDENT NARRATIVES

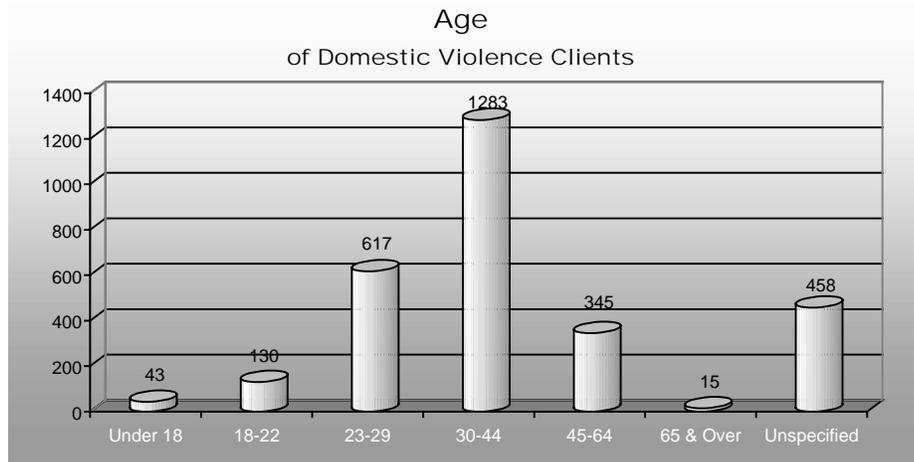
Several of the reporting NCAVP organizations submitted individual incident narratives along with aggregate incident data. These are reproduced on the succeeding pages to provide a better indication of the scope and diversity of LGTB domestic violence, as well as its effects on survivors. All personal names and most other identifying information have been changed.

Sharon (from Gay & Lesbian Community Service Center of Greater Cleveland)

I'm a 52 year old lesbian and live with my partner, Julie, and her mother. Things started going badly in our relationship during the last few years. Although there were signs before that, it's been worse lately. Julie doesn't like any of my friends or family and when she catches me talking with them, there is always a big fight so I've learned to lie to her. Although I've contributed as much financially to the relationship as she has, Julie claims that everything belongs to her. To prove this, she periodically breaks or gives things away.

Julie became physically violent last week. She knocked me to the ground and put her leg across my neck. I couldn't breathe and thought I was going to die. After the fight, she demanded that I leave the house and told me that I couldn't take anything with me because it all belonged to her. I had nowhere to go so I'm still living with Julie and her mother. I feel sorry for her mother because Julie is very mean to her too.

I don't know what to do anymore. I feel like I don't have control of anything. It's ironic because Julie



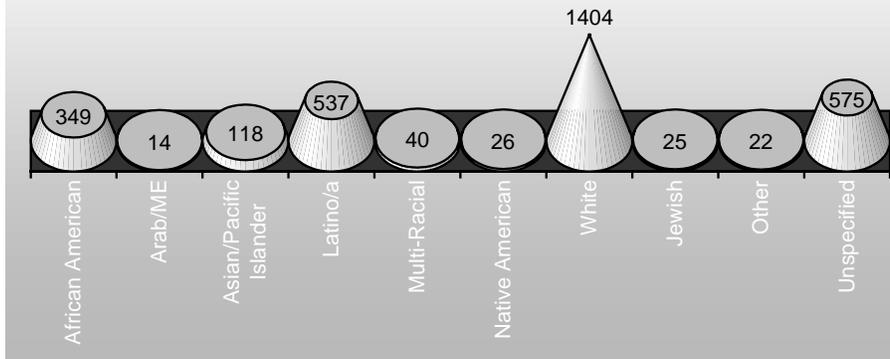
stage of development; and CUAUV in San Francisco has begun mounting another such program, but only this year). This fact is reflected in the distribution of the majority of survivors within the age categories. The largest reported group, with 44% of total cases (1,283), were between the ages of 30-44. Combined with the two next largest categories, 21% (617) in ages 23-29, and 12% (345) in ages 45-64, a total of 77% of all reported cases involved survivors between the ages of 23 and 64. People in the 18-22 category accounted for only 4% (130) of the cases, while minors (under 18) were only involved in 1% (43) of the reported cases. Less than 1% of reported victims (15 cases) were more than 65 years of age.

While the apparently low level of reporting among seniors and youth is clearly attributable at least partly to a lack of outreach, it may also be due to isolation felt both by LGTB seniors and young people, as well as an inherent difficulty in accessing services without assistance from others (e.g., a parent or guardian, caregiver, etc.). In addition, at this time, there is no way to determine how many youth and seniors may be victims of abuse at the hand of caregivers (parents, adult children, home health aids, foster parents or guardians, etc.) in ways that might qualify them to be considered survivors of domestic violence.

Race/Ethnicity

White individuals comprised the largest racial/ethnic group reporting domestic violence to NCAVP agencies in 1999, with 45% of all reports (1,404 cases). Latinos represented 17% (537) of all reports and African-Americans, 11% (349). Reports by these two communities of color declined as a percentage of cases overall. In 1998, by contrast, Latinos accounted for 23% of all reports and African-Americans 14%.

Race/Ethnicity of Domestic Violence Clients



Reports from Asian/Pacific Islanders remained at 4% (118), the same as was reported in 1998.

Reductions in reports from people of color may be indicative of several factors, including staffing changes, possible decreased outreach to these communities and/or reduced Spanish and other non-English language capacity at the reporting agencies. In addition, many victims of domestic violence in communities of color face additional barriers to reporting abuse. These barriers include fear of police and other authority figures, the experience of racism or discrimination at the agencies where they might turn for help, and a sense of invisibility within LGTB communities overall. It has been noted that all of these factors in turn has helped foster a reliance on informal support networks, whose experiences must obviously go uncaptured in this report. In 1999, reports from the racial/ethnic categories of Arab/Middle Eastern (14), multi-racial (40), Native American (26) and Jewish individuals (a category NCAVP tracks because of its vulnerability to bias-related violence) each made up less than one percent. The numbers of Jewish and multi-racial survivors are likely to be underreported, since many survivors will identify themselves under a different racial/ethnic category.

Extent of Injuries

Note: This section does not include reports from Los Angeles, and data from the Boston region reflects only statistics from Fenway and not from The Network for Battered Lesbians and Bisexual Women.

Domestic violence, or intimate partner violence, is a pattern of behaviors by one partner in an effort to exert and maintain control over

used to be a counselor. She knows exactly what she's doing. She tells me that there isn't a problem because she's attacked me only three times in the last year but, unless things change, I'm afraid that she will become even more violent.

Ted (from Los Angeles Gay & Lesbian Center)

Several years ago when I was 45, I met Joseph at a gay potluck dinner. He was so cute and charming and I was so flattered at the attention he paid me that I ignored all of the signs of possessiveness and alcoholism that I usually would have noticed. I took him home with me that night and he just never left.

Shortly thereafter, I had my first heart attack and Joseph was really there for me. He stayed with me at the hospital and took care of me when I returned home. I didn't like supporting him financially but he was so good to me during my recovery that I felt too guilty to complain. It seemed at times that he wanted me to be sick so I'd be dependent on him.

I eventually began to feel suffocated, and I hated his drinking, but every time I brought up either subject, he'd fly off the handle. I had two more heart attacks after that, very few friends and no family, so I put up with his drinking,

verbal abuse, jealous fits and physical abuse.

To make a long story short, his behavior escalated until I was terrified of him. I was sure that the stress was making my heart condition worse but Joseph refused to leave. It took the police to get him out which was really embarrassing. I'm pretty isolated again, on disability and not well enough to drive so it's hard to socialize. I'm also afraid to go out and meet people because I don't trust my own judgment anymore.

Serena (from Horizons Community Services, Chicago)

I'm a 32 year old African American mother. I lived with my ex-partner, Joan, for four years. She constantly belittled me and made me feel small. She made me clean, cook and take care of the house, go to work, and service her sexual needs with no regard for mine. We decided to adopt a baby that we thought would make us closer. I thought the baby would make Joan softer and warmer toward me. I immediately bonded with the baby when we brought him home but Joan became more distant and jealous. She told me that she was sick of coming second and slapped me across the face when I was holding him.

the other partner. Physical violence is a frequent means for an abuser to accomplish this end. However, not all abusive relationships are physically violent and physical violence is not the only mechanism of control utilized by abusive partners. Emotional, verbal and sexual abuse are other tools a batterer may employ to intimidate, isolate and hurt a victim and to maintain control.

The assessment by both domestic violence advocates and the police of the use of physical violence in same sex domestic violence situations requires a level of sophistication not always needed in the assessment of heterosexual domestic violence. For example, while a survivor may at some time strike back in an attempt at self-defense, these incidents do not comprise a "co-abusive" pattern of behavior. However, batterers themselves may present to the agency as victims, or be identified as victims by intervening law enforcement because the actual victim struck back. The most important characteristics to note in identifying the victim and the batterer and determining an abusive relationship is the pattern of behaviors utilized over time by one partner over the other to maintain an imbalance of power, control, resources, as well as any ability by one partner to act with agency to make change in a relationship without fearing a harmful consequence.

Of the cases where information on injury to the victim was recorded, 60% (719 of a total of 1,175) did not entail physical injury. It is important to note that these statistics are derived only from the particular incidents reported *at intake*, and may not reflect the level of physical violence or rate of injury resulting from prior (or successive) incidents. Of the remainder, 29% (339) reported minor injuries and 10% (117) sustained serious injuries. Of those with injuries, 57% required no medical attention, 12% needed medical attention but did not receive it (this may be due to a variety of unrecorded reasons such as lack of health insurance/resources, shame about the source of the injury, denial of treatment by the batterer, self-minimizing of the seriousness of the injuries, fear of revictimization, fear that a health care provider will recognize and report an instance of domestic violence, etc.), 13% received outpatient treatment, and 4% were hospitalized.

In 1999, NCAVP agencies reported ten domestic violence-related deaths. Interesting to note is that six of these cases were reported in New York City, primarily as a result of the New York City AVP's closer examination throughout 1999 of media and police reports of homicides against LGTB individuals. Domestic violence-related deaths among LGTB individuals nationally are likely to be vastly underreported, since they are rarely identified or investigated as such by police.

CASE (INCIDENT) INFORMATION

Note: Analysis in this section does not include reports from Los Angeles, and data from the Boston region reflects only statistics from Fenway and not from The Network for Battered Lesbians and Bisexual Women.

Crimes and Offenses

A total of 2,197 distinct crimes and offenses were recorded in 1999. This total includes incidents where more than one crime or offense was committed. The classification of actions during an incident as specific crimes and offenses is based on information gathered from the victim at the time of his/her intake by an NCAVP agency. It is in no way based on the actual or potential classifications of criminal acts by law enforcement authorities, which vary by jurisdiction.

Since this report relies solely on the data gleaned from survivors at intake, it is also important to note that it is often the case that only as a trusting relationship is built between the counselor and survivor over time that more information is revealed as to the nature of the abuse perpetrated by the batterer. If reporting agencies had the capacity to provide longitudinal data three, six or 12 months into work on a particular case, then it is certain that all the numbers cited below would be increased.

In 1998, 16% (341) of reported cases involved assault without a weapon, 7% (148) incorporated assaults with a weapon (see next section on weapons used); 3% (68) were attempted assaults involving a weapon, 24% (535) involved intimidation; 26% (575) involved verbal and or sexual harassment; 1% (21) involved harassment by mail; and 5% (101) harassment by phone. Less than 1% (10) of reported incidents were murders; 2% (43) were sexual assaults; 1% (30) involved rapes; and fewer than 1% each involved abduction/kidnapping, extortion/blackmail, forced eviction from home and/or arson. 2% (49) included vandalism, and 1% (28) included robbery/burglary/theft.

Of the cases in which physical weapons (as opposed to verbal and emotional weapons) were used for assault or attempted assault, the most commonly reported items used included bats, clubs, other blunt objects, knives and sharp objects, bottles, bricks, rocks, and firearms. In a smaller number of cases ropes or other restraints, as well as vehicles were reported as weapons used.

I decided to stay until I could convince Joan to put my name on the baby's birth certificate and then I was going to take him and leave. I did everything she told me to do but it was never enough. She stopped hitting me but started screaming and calling me names. She started using my credit cards without my knowledge and ran them up to their limits while knowing that I couldn't pay for them. I stayed and continued to hope that she would add my name to the birth certificate.

One night she choked me in my sleep and told me that she'd kill me before she'd let me leave. She threatened that if I left, I'd never see the baby again and she might even hurt him. I left and moved in with my aunt; then Joan went to court and got a protection order against me! She also called Child and Family Services and said I abused the baby. I was in total shock when I went to court and learned that Joan falsified over twenty police reports reporting that I'd threatened to kill her and the baby. I haven't seen the baby in a year.

**Angela (from
Community United
Against Violence , San
Francisco)**

I had just started working at a social service agency when I met Elizabeth, a manager there. It was love at first sight and, after dating for a couple of months, we moved in together. For the first few weeks everything was fine but then one night she came home and started yelling at me for not cleaning the house. I was confused since we always shared the household chores. She started yelling at me and then, out of nowhere, grabbed an empty wine bottle and smashed it on top of my head. I was stunned and crumpled to the floor. I don't remember much that happened after that except that Elizabeth was crying, apologizing and saying how much she loved me. She promised she'd never do it again. I believed her but I was confused about what I must have done wrong to make her so angry. I feared that I was somehow not "enough" for her. I'm transsexual and am afraid of being alone...afraid that no one—especially a woman as intelligent and beautiful as Elizabeth—could ever love me. The fact that she did was a miracle and I felt special being her girlfriend.

Serial Cases

Domestic violence is by nature a serial crime. It nonetheless remains interesting to note how many previous incidents were reported by survivors at intake. A total of 665 reported cases provided information in this category. Of this total, 11% (75) of cases involved one previous incident of abuse, 36% (240) involved 2-5 previous incidents, 24% (164) reported 6-10 priors, and 29% (197) reported upward of 10 previous incidents of battering in the relationship.

These totals are also based on the definition of the victim of an abusive encounter . Many people will minimize certain incidents and not define them as abusive, especially if they feel they may be asked why they didn't take steps to get help sooner. Also, chronic histories of abuse may come to light only after extended encounters with a service provider, so that the extent of serial cases ultimately documented by NCAVP member agencies is likely to be larger than the figures cited above.

Relationship of Offenders to Survivors

Note: This section does not include reports from Los Angeles, and data from the Boston region reflects only statistics from Fenway and not from The Network for Battered Lesbians and Bisexual Women.

Data about offenders was not collected in all instances. In the majority of cases in which this information was obtained, 41% (607) of offenders were the lovers/partners of the survivors. The second largest offender category , 26% (393) , was comprised of the ex-lovers/partners of the victim. This is not a surprising statistic given that the most dangerous time for a victim is during the time she or he is attempting to end a relationship with an abuser. Abusers' interest in control does not end with the termination of the relationship by victims, and often this boundary is not accepted by the abuser, who will continue to act as though the relationship has not ended.

In addition to intimate partners, survivors defined their abusers as acquaintances/friends 3% of the time (44 cases), as a "pick-up" less than 1% of the time (this reinforces the truth that an abusive relationship is not a one time incident of violence but rather a prolonged pattern of behaviors and controls), a relative/family member 3% of the time (42), a roommate 2% (29) of the time, and in a single instance, a caregiver.. The actual extent of caregiver abuse is likely to be much higher however, since this category is not currently included on the standard NCAVP intake form. Also, given that caregiver abuse is likely to be higher in senior adult populations, and that NCAVP statistics reflect low report-

ing rates in that age category, information on this type of abuse may be limited. For more information on abuse by caregivers of LGTB people, contact Senior Action in a Gay Environment (SAGE) and/or other agencies that work with seniors, people with disabilities, and people living with chronic illness.

POLICE AND COURT RESPONSE

Note: This section does not include reports from Los Angeles, and data from the Boston region reflects only statistics from Fenway and not from The Network for Battered Lesbians and Bisexual Women.

Reporting and Arrests

Many lesbian, gay, transgender and bisexual people resist reporting domestic violence to the police. In addition to the common barriers to reporting domestic violence (shame, denial, concern for the reputation and safety of partner under arrest, disinterest in pressing criminal charges against a loved one while wanting to stop the abuse, etc.) LGTB people contend with poor histories of community/police relations and often fear homophobia or transphobia at the hands of law enforcement.

While some agencies have successfully begun to train and sensitize police, judicial system staff and medical personnel to the needs of LGTB domestic violence survivors, many police still do not respond appropriately to LGTB individuals who reach out for protection in a domestic violence situation. Police often minimize the abuse between two people of the same sex, or allow their own bias about the legitimacy of same sex relationships to obscure their better judgement. Additionally, police and other professionals often harbor stereotypes about who is most likely to be the abuser (i.e. the more 'butch' looking one, the physically larger one, the person with a darker complexion, the one who doesn't speak English, the older one, etc.) and spend little time trying to screen and assess the actual truth. These deficits together often result in inappropriate police behavior, such as arresting the victim, arresting both partners (and even placing them together in a single holding cell, where the abuse can continue), or ignoring the situation altogether. Despite these obstacles LGTB people do reach out to the police, and as a result of increased awareness and training, some are improving their responses.

Of the cases in which information about police response was collected, 304 were reported to the police. In 189 cases a complaint was taken but no arrest was made. In 144 cases a complaint was taken and

Several months later, Elizabeth arranged to become my supervisor. She often screamed, cursed at me and criticized my work. She also began to insult me with anti-transgender comments, said that I was ugly, that I embarrassed her in public, and that people could tell that I was transgender and thought I was a freak. She said things like, "You'll never amount to much. Trannies never do." I didn't know what to do. She demanded that I stop taking hormones. When I stood up for myself and refused, she smashed a vase of flowers against my chest and destroyed several of my belongings. When she ran out of energy, she asked me why I wanted to argue with her and why I made her do the things that she did to me. I tried staying off the hormones to keep her from getting angry but it didn't work. She knocked me down and punched me in the face with her fist more than once. She told me that it was my fault and that I'd made her do it. I never thought of calling the police. I didn't think they'd believe a transsexual.

I knew it was time to get out of the relationship even though I knew leaving her would cost me my job. I packed a bag, got in my car and left. I contacted

Community United Against Violence. They obtained emergency housing and a voice mailbox for me. My counselor and I made a safety plan. It hasn't been easy staying away from Elizabeth because I still love her but I no longer believe that she's sorry and I know now that it wasn't my fault.

Eric (from Lesbian & Gay Community Service Center of Greater Cleveland)

I'm a 36 year-old gay man and a friend suggested that I get help because he doesn't know how to help me. I broke up with my partner, Alan, because he was cheating on me but we still live together. I would really like to move out but I don't have enough money.

Alan is threatening to out me to my parents and my employer. I know I'll be fired if my employer finds out that I'm gay. I feel very isolated. After the break-up, our friends became his friends. He controls who I see and talk to and has alienated me from most of my friends. I don't feel that I can reach out to anyone because Alan seems to know where I am at all times. I think that he's following me around.

Although I haven't been seriously hurt, Alan has physically attacked me several times. The verbal

an arrest was made. In 37 cases the police refused to take a complaint. In 25 of the cases the victim was the one arrested.

In a category included within this report for the first time, 10 cases were identified (in San Francisco and Colorado) in which there was dual arrest at the time he police took a complaint. Again, since this is not currently a uniform piece of data on the NCAVP intake form, it is likely that this number is actually significantly higher. In the future NCAVP will attempt to collect this information from all regions of the country.

Victims declined to report incidents to the police in 632 cases. In an additional 50 cases there was some indication that the victim was planning to make a report. Again, because this report does not include any longitudinal data, there is no follow up information about how many of these planned reports actually occurred.

Police Attitude

In cases involving police, 26% (119) of survivors reported that the police were courteous; 21% (97) indicated an indifferent police attitude; and 7% (32) reported police were abusive including: verbally abusive (10 cases), verbally abusive with homophobic/transphobic slurs (13), physically abusive (1), and physically abusive with use of homophobic/transphobic slurs (8). The remainder of the cases reported to the police did not track police attitude.

Court Response

In an attempt to understand better what happens to LGTB domestic violence cases subsequent to the arrest of an offender, some agencies were able to track court responses. However, this is a new and experimental category of information, and thus data was provided from a very small number of agencies (CUAV in San Francisco, Horizons in Chicago, and Fenway in Boston). It should also be taken into consideration that many victims will drop charges before their cases come to court. This happens for any number of reasons (abuser pressure, abuser appears contrite and loving, community or family pressure, guilt, shame, fear of sending loved one to jail, etc.).

Of the 538 cases tracked for court response, 77 cases resulted in a restraining order requested by the victim and granted by the court. In 8 cases, a restraining order was requested but denied by the court. In one case, an individual restraining order was requested and the court ordered a dual restraining order (this is common when a judge is insensitive to domestic violence and invalidates the reality of the experience

of the victim and the severity of the behavior of the abuser). In most of the cases, 368, no restraining order was sought or granted. In 84 cases court response was not known.

MONTHLY INCIDENT TRENDS

Note: This section does not include information from Los Angeles, which therefore reduces the total considered by a significant amount (1,356).

The largest number of cases of domestic violence were reported during June of 1999 (151 cases reported, slightly higher than the average of 120 per month). This is not surprising, as June is celebrated as LGTB Pride Month in many cities and towns across the country. Social and relationship pressures around Pride Month, as well as increased alcohol and drug consumption, may increase the likelihood of violence by abusive individuals. It is also true that during Pride Month, outreach activities from anti-violence and other LGTB agencies are at their peak visibility, and therefore more people may become aware of and decide to access services. By contrast, the lowest number of cases were reported in May (74) and February (92). The remainder of the months showed a fairly consistent level of reporting.

LOCAL SUMMARIES

The following local summary reports were provided by the participating agencies themselves, and are not uniform in content or presentation. They instead represent each agency's independent interpretations of its data, and most highlight additional information about domestic violence reporting trends and services within each region.

Chicago

Horizons has a growing Anti-Violence Crisis line. Survivors call the line to have someone to talk with or get referrals for help. In 1998, there were no calls from members of the transgender community who self-identified, nor were there any such calls in 1999. Horizons has begun to focus on how to meet the needs of the transgender community and make it safe for all of our community members to call the Anti-Violence Crisis line.

The number of domestic violence cases reported increased from 28 cases in 1998 to 46 cases in 1999. Horizons links the increase to major strides in publicizing its services, specifically the Crisis line. Also, the

abuse is constant. He tells me—and I'm starting to believe it—that no one else will ever want me again because he's going to stay in my life and make it miserable. Because he's a visible figure in the local gay community, I think he could ruin my life.

I'm afraid to attend a support group right now. I can't let anyone know this is happening. Between my family, my job and Alan's prominence in the community, I have to protect my identity from everyone.

Dorothy (from NYC Gay & Lesbian Anti-Violence Project)

I call myself Dorothy because I used to be living as if I was in the Land of Oz. I wasn't facing reality in my first serious relationship. I met Mike in a bar. We got drunk and then went to my apartment. On the way there, I told him that I was a person of transgender experience. He got angry and said, "You're a man!" then began to choke me. Afterward he smiled and said, "What the hell! You look like a woman! I'll try it!"

We began dating and I fell in love. Eventually a pattern emerged—Mike got drunk, verbally and physically hurt me then made love to me. After a while, I stopped seeing my friends

because he was jealous and because I was always covered in bruises. Once he hit me so hard that I fell, hit my head and passed out. I didn't call the police for fear of being victimized by them because I'm transgender. Also, Mike always apologized and promised that it would never happen again. By then, I was drinking as heavily as he was.

When I learned that I tested HIV positive, I could no longer keep my feelings inside. I cried and told my counselor the whole story. She referred me to the New York City Gay and Lesbian Anti-Violence Project (AVP) where the counselor there taught me about domestic violence and the dynamics of power and control. For the first time, I saw myself and the situation clearly—I realized that I loved Mike more than I cared about myself. I found the strength to tell him that what I was getting from him was abuse—not love—and that I didn't want any part of it. I also had to face reality. I knew it was time to face my alcohol problem. My AVP counselor referred me to a 30 day detox program where I was housed with a group of straight men and women. It was hard, and I sometimes felt like packing my bags and running out of there, but I was deter-

number of presentations Horizons made to organizations in Chicago about LGTB domestic violence tripled between 1998 to 1999.

It is difficult to assess precisely how these factors may have influenced the growth in the number of reports. What is significant is that the number of gay male survivors of domestic violence doubled between 1998 to 1999, from 15 in 1998 to 30 last year. Also, in the age range of 30-44, the number of survivors more than doubled (from 7 to 17), and so did requests for help from both African American and white individuals.

There were no deaths reported, nor major hospitalizations attributable to domestic violence in 1998. The majority of the 21 injuries reported were incurred by direct physical contact between the perpetrator and the survivor, meaning no weapons were involved. Horizons finds that most people call after several incidents involving a partner, ex-lover, or friend. There were no calls in 1999 regarding caregivers or roommates. This may be due to the lack of knowledge that domestic violence includes these categories. Horizons has incorporated education on these issues in its outreach program on domestic violence.

Twenty incidents out of 46 were reported to the police. A major emphasis for 1999 has been placed on roll call training of police officers, and building better relationships with the Chicago Police Department to ensure that community members are being protected and served equally. The hope is that this work will increase the number of domestic violence survivors who choose to involve the Police. There were 9 people out of 46 in 1999 who reported that the Police were either indifferent or verbally abusive to them, with or without slurs.

Horizons recently secured funding for a Domestic Violence Counselor/Care Manager, who began in December of 1999. It also secured funding to increase a Victim Advocate position from part-time to full-time. The expanded position was filled in January 2000 and supervises the crisis line. Horizons expects that its report for the year 2000 will reflect these enhancements, as well as intensified community, police and service provider outreach and training programs.

Cleveland

In 1999, The Lesbian/Gay Community Service Center of Greater Cleveland's outreach programming and the formation of a professionally facilitated LGTB domestic violence survivor's support group, resulted in an increase from zero domestic violence cases reported in 1998 to 10 cases in 1999. The Center began its domestic violence programming by holding three workshops for the community on issues

centering on relationships. An article written by the various workshop facilitators appeared in the Gay People's Chronicle, Ohio's LGTB newspaper, following the workshops. Flyers providing information on violence in same gender relationships were circulated in the community.

The Center entered into a collaboration with the Cleveland Chapter of the YWCA to form a professionally facilitated LGTB domestic violence survivor's support group. The support group is mixed gender and has a male and female facilitator. The large increase in the number of reports demonstrates to The Center that the outreach and community education efforts were successful in responding to a community need. The Center will continue to do outreach and education in the community, with service providers, health care organizations and the police and criminal justice system.

Colorado

Colorado reported 81 incidents of domestic violence in 1999, a 19% increase over the total (68) reported for 1998. It should be noted that these figures are representative only of domestic violence incidents reported to or brought to the attention of the Anti-Violence Program (AVP) of Equality Colorado. There is no common intake form for service providers in this state, and only a few organizations and agencies actually track gay, lesbian, bisexual, and transgender domestic violence. However, there is good reason to believe that incidents reported to AVP are representative across service providers in Colorado.

In 1999, 36 of the victims were female (44%) and 42 were male (52%), as compared to 35 (51%) and 26 (38%), respectively, in 1998. While the number of reports coming from females remained virtually the same, Colorado saw a 61% increase in reports from males. AVP also saw an increase in reports coming from African-Americans (3 in 1999, 1 in 1998), Native Americans (2 in 1999, 0 in 1998), and whites/Caucasians (44 in 1999, 29 in 1998).

The majority of reports, 35 (43%), came from people who did not disclose their age at the time of reporting. The second and third highest number of reports came from people age 23-29 (19 reports, 23%) and age 30-44 (18 reports, 22%). Colorado also saw notable increases in reports coming from people under the age of 18 (3 in 1999, 1 in 1998), people age 18-22 (3 in 1999, 0 in 1998), and people age 23-29 (19 in 1999, 10 in 1998), probably as a result of our youth-based anti-violence initiative which began in 1999.

mined not to return to Mike. I learned how to educate the other people in the detox program about myself and to refer to me as "she." Things began to get easier. A month later, I clicked my heels out of detox, returned to reality and began to learn how to love myself.

Tiffany (from Equality Colorado)

I'm nineteen years old and my mother is in a relationship with another woman who lives with us. My mother's partner is very abusive and she and my mom fight all the time. My mother was just hospitalized and my sisters and I don't feel safe because my mom's partner warned us not to go to sleep and threatened to hurt us. I'd like to get a restraining order to protect us but I may not be able to because I'm not the legal guardian of my two sisters who are ten and twelve years old.

Maria (from Community United Against Violence, San Francisco)

I am a 22 year-old Latina dyke. When I was nineteen, I became extremely close with a woman who eventually became my girlfriend. Her name was Nicole. We started dating when I was twenty. She told me that she was in

love with me during our first week together. A couple of weeks later, she made me promise to marry her. I was shocked and uncomfortable at how fast things were moving. When I said so, she became enraged. She didn't allow me to have my own opinions or feelings about anything. She made me feel guilty and treated me horribly until I finally agreed to make commitment to her. A pattern emerged in which she would insult, demean, neglect and yell at me whenever I disagreed with her. I soon stopped voicing any disagreement.

Nicole decided to move from the Bay Area back to her hometown. She knew that it would be difficult for me to move because I was in school, but she cried and pressured me until I dropped out and moved with her. Once we moved, our relationship fell apart. She began to date another woman and continued to criticize, humiliate, insult and lie to me. She made me feel stupid, useless and unloved. When I asked her to spend time with me, she yelled and said that I wasn't giving her any space. I became so isolated and upset that I told her I wanted to break up. She told me that she loved me and would be lost without me. She promised to work

Colorado saw a significant increase in reporting of physical injuries. There were 29 minor injury reports, more than triple the 1998 figure of 9. Reports of serious injury doubled, from 4 in 1998 to 8 in 1999. Correspondingly, Colorado had notable increases in reports about medical attention for physical injuries. 6 reports were made that medical attention was needed, but not received (up from 0 in 1998). And, 12 reports were made that out-patient care was received (up from 1 in 1998).

Increases from 1998 were also found in the reporting of serial domestic violence cases. There was a slight increase in reports with one previous incident (13 in 1998 to 14 in 1999). But, reports in which there had been 2-5 previous incidents more than doubled from the 1998 figures (7 in 1998 to 15 in 1999). Reports in which there had been 6-10 previous incidents more than tripled (4 in 1998 to 13 in 1999). Although there was a slight decrease in reports with 10 or more previous incidents (12 in 1998 to 10 in 1999), the overall statistics show a 44% increase in serial case reports.

Finally, Colorado found significant increases in incident reporting to the police. The 1999 figure (29) is almost double the 1998 figure (15). In reports where there was a complaint taken/arrest, Colorado experienced more than a tripling of reports (6 in 1998 to 21 in 1999).

Columbus

Columbus reported 87 incidents of domestic violence in 1999, 7% more than the 81 reports collected in 1998. 41 reports came from females, 45 from males, and there was one report by a M-F Transgender person. 83 reports came from people who identify as lesbian or gay, three victims were bisexual, and one report came from a heterosexual-identified person.

Young people are more likely to report domestic violence in Columbus than in many other NCAVP reporting regions. In 1999, 22% of reports (19 victims) in Columbus came from people aged 22 years or younger, whereas 5% of the NCAVP total reports came from this age group. It is also significant that nationally, 45 % of victims were 30-44 years old, while in Columbus, only 29% (26 victims) were in this age range.

The race/ethnicity of victims in 1999 was similar to that we reported in 1998. 18 victims (21%) were African-American, 48 victims (55%) were white, 4 victims were Latina/o (5%), and all other races and ethnicities totaled 6%.

From 1998 to 1999, victims reporting no injuries were consistent (65% and 59%, respectively), but there was a 10% increase in victims reporting serious injuries: 6 people (7%) in 1998 vs. 15 people (17%) in 1999. Columbus continued to report a high number of rapes among domestic violence survivors. Of the 30 rapes reported nationwide, 15 were reported to BRAVO. This high number can be attributed to a strong history of collaboration between BRAVO and local sexual assault service providers.

59 Offenders (68%) were the lovers or partners of the victims; 22 (25%) were ex-lovers; 5 offenders (6%) were relatives or family members of the victim; one victim reported violence perpetrated by a caregiver.

23 incidents were reported to law enforcement in 1999, a 4% increase over 1998, when 18 incidents were reported. An arrest was made in 12 cases, up from 10 cases in 1998. The officer refused to take a complaint in 6 cases in 1999.

The low number of reports in Columbus reflects a continuing reluctance in LGTB communities to report domestic violence. This reluctance can be attributed to barriers to accessing services, including a lack of support from mainstream service providers, lack of services for male domestic violence survivors and the overall invisibility of domestic violence in LGTB communities.

Los Angeles

Los Angeles reported a total of 1356 incidents in 1999. It should be noted that these figures are representative only of domestic violence reported to, assessed by, or brought to the attention of the STOP Partner Abuse/Domestic Violence Program, the Mental Health Services Department, or the Anti-Violence Project of the L.A. Gay & Lesbian Center. Because the STOP Partner Abuse/Domestic Violence Program and the Mental Health Services Department utilize an assessment form that is substantially different than the standard intake form utilized by NCAVP Anti-Violence Program members, data in various categories was not reported by Los Angeles.

Since 1996, the L.A. Gay & Lesbian Center's STOP Partner Abuse/Domestic Violence Program has seen a consistent increase in the number of clients who report violence or are assessed with it. The increases can be attributed to expanded programming, including a court-approved batterers treatment program, extensive outreach, community education, increased media coverage including a press conference with Denise Brown, and service provider trainings throughout the

on our relationship but when the abuse started again, I realized that she said what she did to get me to stay. After that, she stopped speaking to me. I eventually dropped out of school and my parents stopped speaking to me, too. She kicked me out, knowing I had nowhere to go because I'd lost the support of my family and contact with all of my Bay Area friends.

When I did move back to the Bay Area, Nicole began calling me every week. When I told her that I didn't want contact with her, she started calling several times a day. I also got numerous hang-up calls and messages. I was frightened that she would find and hurt me. I stopped answering my phone and told our mutual friends not to reveal any information about my home, job or life. The calls eventually decreased. The day that I began answering my phone again, Nicole called. I told her not to call anymore. For the time being, at least, she has stopped harassing me. We've had no contact for a month and I finally feel that I can begin to heal.

Adam (from Los Angeles Gay & Lesbian Center)

I am a 34 year-old Korean-American man. I was with Tim for 8 months before I

got arrested. We met at a party, spent the night together, and didn't spend another night apart until I went to jail. Tim didn't have many friends so I introduced him to mine. When we went out together, he'd always drink too much and disappear into the bathroom to do bumps of crystal. When I'd dance with my friends or talk to them, he'd get jealous and accuse me of having sex with them. He said they were a bad influence on me and that he didn't want me to hang out with them anymore. He'd call me a whore and whisper in my ear that I would "pay" when we got home. Once we'd had sex, everything would be okay

One night, Tim and I ran into an old friend of mine at a party. Kevin and I hadn't seen each other in years so we spent a long time talking. Tim eventually got bored and walked off. Later that evening, Tim and I went to a West Hollywood club. When we arrived, I went to the restroom and Tim followed me in. He grabbed my arm, twisted it behind my back, and shoved my face into the mirror. He called me a "slut" and accused me of coming on to Kevin. I started to cry and assured him that Kevin and I were just friends. He screamed that I was a liar and demanded that I admit

Southern California area. Because of these efforts, the number of domestic violence programs and social service organizations requesting training on LGTN domestic violence as well as those willing to consider expansion of services to all members of the LGTB community increased during the 1999 calendar year. However, the majority of those organizations do not yet track or differentiate same-gender data. Additionally, the organized domestic violence service provider community in Southern California has begun to consistently address the problem in collaboration with STOP. Strong collaborative agreements between STOP and the L.A. County Domestic Violence Council—the oldest continuously operating Domestic Violence Council in the United States—as well as the City of West Hollywood's Partner Abuse Education Task Force have resulted in a LGTB specific domestic violence prevention campaign utilizing posters and bumper stickers, and the development and distribution of a comprehensive county-wide service provider needs assessment survey. The latter will enable STOP to assess the ability of social service and domestic violence service providers throughout Los Angeles County to effectively intervene with all members of the LGTB community experiencing domestic violence.

Historically, the courts have not consistently mandated LGTB batterers to the standard 52 weeks of mandatory treatment in California. However, last year's NCAVP Report indicated that they were beginning to standardize expectations for batterers' attendance in treatment programs. While the standardization of treatment expectations increased in Los Angeles County during 1999, criminal justice personnel continued making inadequate assessments of LGTB domestic violence and, in many cases, were unable to differentiate victim from perpetrator. In addition to experiencing an increase in the number of clients seeking court-mandated treatment, we subsequently experienced an increase in the number of primary victims mandated to batterers treatment. In fact, approximately one third of our court-mandated clients had been inaccurately assessed and referred by the criminal justice system into an inappropriate treatment modality.

STOP also noted a trend involving alcohol and drugs in domestic violence incidents during the 1999 calendar year. While the number of mandated and self-referred batterers who reported drug and alcohol use remained high, as few as 10% of the reported domestic violence incidents involved substance use.

Massachusetts

Massachusetts had two participating programs in 1999, the Violence Recovery Program (VRP) at Fenway Community Health and the Network for Battered Lesbians and Bisexual Women (NBLBW). A total of 289 cases were reported between the two agencies, with the majority of reports (approximately 75%) coming from the Network for Battered Lesbians and Bisexual Women.

Reports of same-sex domestic violence in Massachusetts increased from 193 in 1998. The rise in cases is explained by increases in funding for outreach and staff. NBLBW received funding to begin its Safehomes program in 1999, and more cases were documented due to the presence of this new service. There was also a significant amount of media attention due to the new Safehomes program, further increasing visibility of the program.

Further, both NBLBW and the VRP increased their outreach and education in 1999, providing for increased awareness of domestic violence in LGTB relationships among criminal justice professionals, mainstream domestic violence programs, health centers, and other community groups. NBLBW also increased its hotline hours, increasing the capacity to work with survivors, and received a grant to begin advertising its services through paid advertisements in newspapers and magazines.

Another possible factor contributing to the increase in cases is the increase in staffing at both programs. NBLBW added one and a half new staff, and VRP added several new interns.

The gender breakdown of cases in Massachusetts is overwhelmingly female (85%). However, this is likely not because of a greater frequency of domestic violence in woman to woman relationships, but probably because one of the reporting agencies serves only woman-identified victims, while the other agency serves both male- and female-identified victims.

It is important to note that the cases reported here are only representative of those victims who have come forward to report their abuse. This is probably a significantly lower figure than the number of total incidents of abuse, as many LGTB victims of domestic violence do not report the abuse or talk to service providers. In Massachusetts, the majority of reports are from the Boston area. This is most likely due to the fact that the majority of resources are centered in the Boston area, and also to the fact that people in rural communities tend to be more isolated and less aware of resources to help them.

that I wanted Kevin sexually. I denied it and he got even angrier. When I told him that he was hurting me, he twisted my arm even harder then he put his arm around my throat and began choking me. I couldn't breathe so I bit his arm. His arm began to bleed so he backhanded me across the face and ran out of the restroom.

When I came out of the restroom, the police were there. They asked me what happened and I told them the whole story. Since Tim is smaller than I am, I guess they believed his side of the story. I spent five days in jail, was convicted of spousal abuse with three years probation and have to go to batterers' counseling for a year.

Kelley (from Equality Colorado)

I live in Southern Colorado with my girlfriend. We're both lesbians and I'm underage. She beats me regularly— so badly once that I threw up blood. The police were called to our house but I was on a crystal meth high and didn't want to cooperate. They arrested me but I was released and the case was dropped because I'm under eighteen. We break up and get back together a lot. Because I'm so young and we're sharing a house, it's hard for me to leave.

Albert (from Los Angeles Gay & Lesbian Center)

I'm 69 years old and consider myself to be bisexual even though I left my wife 24 years ago for Mark and haven't been with anyone else since. Although I've been monogamous, I know Mark hasn't been. He is sixteen years younger than I am and he still works. I'm retired.

Mark's been diagnosed with a manic depressive disorder. I guess that's why he is so out of control at times. I try to be understanding but I get tired of worrying about what mood he'll be in when he gets home from work, whether he'll take it out on me and—ironically enough— whether we'll make it to our 25th anniversary. I also worry about whether he'll go off his medication again because he is often violent when he does.

Mostly I worry about whether Mark will fall in love with one of the men he goes out with and then leave me. I also worry about whether he'll bring home a disease. My ex-wife thinks I'd be better off if he left. Although I'm tired of his verbal and physical abuse, I try to be realistic. I'm not as young as I used to be and I'm not as attractive as I was when

Of the 289 cases reported in Massachusetts, 153 (53%) were from people who describe their race as white. This is most likely due to the fact that there has not been sufficient outreach in communities of color, and thus it is important that programs do specific targeted outreach to communities of color, as well as creating culturally competent materials for cultural and linguistic communities.

It continues to be the case that people who are transgender are less likely to access resources designed for the broader LGTB community, and are therefore less likely to report domestic violence. To correct these disparities, it is necessary to expand outreach efforts targeted to the transgender community.

New York City

The New York City Gay and Lesbian Anti-Violence Project (AVP) serves lesbian, gay, transgender, bisexual and HIV-affected victims of crime, with specialized services for those affected by bias, same sex domestic violence, pick-up crimes, sexual assault and HIV-related violence. Domestic violence accounts for nearly half of all of AVP's clients. The following is a summary of 1999's highlights.

Most strikingly, there were six (6) same-sex domestic violence related murders reported, compared to none reported in 1998. It is likely that this increase does not indicate higher levels of violence but rather increased awareness by social and legal service providers as well as media, as they were the primary reporters of these murders.

In 1999, there were 510 victims of domestic violence and 481 perpetrators reported. Abusers may use others to help them perpetrate violence, and may also target someone close to the victim, such as friends/family, landlord, employer, new lover, etc. Perpetrators included: 47.2% partners, 32% ex-lovers, 5% family, 14.6% other relationship and 1.2% unspecified. A total of 1,090 crimes and offenses were committed against the 510 victims.

Overwhelmingly, 78% of incidents of domestic violence occurred in victims' homes. The remainder of incidents occurred in public areas, on transportation systems, at victims' places of employment and even in and around jails, precincts and courts. Nearly three quarters of victims (74%) reported a history of previous incidents of abuse. 1999 saw an increase in victims reporting to AVP after fewer incidents of violence.

Only 32% of victims reported their experiences to the police, while 4% said that the police had refused to take their complaint. In 1% of cases, the victim was arrested. Police were reported as courteous by 39% of victims who had contact with them, while 24% said that police were

indifferent. 6% of victims experienced verbal abuse and 4% experienced verbal abuse with bias slurs.

8,003 service units were provided to LGTB domestic violence victims by AVP in 1999, including bi-lingual English/Spanish hotline and in-person counseling, support groups, referrals, advocacy, accompaniment, court monitoring, crime victims' compensation filing, etc. Victims ranged in age from under 18 to over 65. The majority of AVP's clients, however, were 30-44 years of age. In 1999 there was some shift in ages served: 18 and under clients rose from 1% in 1998 to 5% in 1999, and clients in the 45-64 range also rose, from 11% in 1998 to 14% in 1999. The race/ethnicity of the victims served by AVP were identified as 33% white, 26% Latina/o, 19% African American, 2 % multi-racial, .8% Asian/Pacific Islander, .1% Native Americans, and .1% Arab/Middle Eastern. Victims whose race/ethnicity was unspecified comprised 19%.

AVP primarily serves the New York City (NYC) area. In 1999, 84% of domestic violence incidents reported to AVP occurred in New York City. Of the remaining reports, 1% came from the outer counties of Westchester, Suffolk and Nassau, 1% came from other parts of the greater metropolitan area, 7% came from other areas of the state, and the location of 7% of incidents was unspecified.

San Francisco

San Francisco service providers documented 741 cases of LGTB domestic violence in 1999. Female survivors accounted for 422 of the incidents and these findings were gathered by a collaborative effort between W.O.M.A.N. Inc., Asian Women's Shelter and Community United Against Violence. Community United Against Violence alone documented 263 incidents from male domestic violence survivors. Transgender survivors accounted for 52 reports and there were 4 cases where the gender identity of the victim was unknown.

San Francisco mirrored the national trend of increased reporting from women of color and immigrant communities and again had the highest number of cases from Asian Pacific Islander and multi-racial survivors. There was also a significant increase in African-American survivors, with 75 cases in 1999, up from 44 in 1998. Programs increased their language capacities by utilizing the MultiLingual Access Model (MLAM), developed by Asian Women's Shelter, and agencies could access a language bank of multi-lingual advocates and translators trained in domestic violence. Thus a mono-lingual non-English speaking survivor could speak to an advocate fluent in their language. With

I was younger, so I put up with him.

I found a counselor who I can talk to at the L.A. Gay & Lesbian Center and she has been helping me identify ways to increase my safety. It hasn't been easy admitting that I'm a victim of domestic violence but I've learned that I'm not the only one. I also know now that Mark's psychiatric diagnosis does not excuse his abusive behavior. I even get small glimpses every now and then of a happier future.

Roberto (from Horizons Community Services in Chicago)

I was in the U.S. only three days when I met Alex. He was a perfect gentleman. He opened doors for me, paid for my meals and even gave me flowers. He said he wanted to take care of me and be my lover forever. I was excited because I was having trouble finding a job and an apartment without being a citizen. I was in love. I moved in with Alex after a week of dating.

A week later he got me a job working illegally. He told me to give him my paycheck and said he'd put it in his bank account and give me money. When I gave him my first check, he gave me an allowance for train fare. He said it was better for me not to spend money. I then start-

ed to think more about whether I should continue to live with him. When I told him that I was going to look for an apartment, he punched me in the face and said, "You aren't going to leave me faggot!" He threatened to call the INS and get me deported. He said he'd tell my employer that I am HIV positive and would spread AIDS at work. I decided then that I'd better stay with him. I've been with Alex for two years now.

I am HIV positive because Alex insisted that we have sex without a condom. He told me, "If you love me, you'll do this," even though he knew he could easily infect me. I've been going to a counselor for about six months and I've thought about leaving him but I feel trapped because I'm HIV positive and because I don't know English well, I'm not sure that I can survive without him. He doesn't abuse me physically frequently— just a punch here and a shove there—but the names that he calls me ("pussy", "maricon", "faggot" & "stupid") are tearing me apart. I might leave him soon.

dedicated Spanish speaking staff, more Latino survivors also reported in 1999. Lastly, W.O.M.A.N. Inc., made inroads into providing services to the deaf and hearing impaired communities.

Overall community need still exceeded provider staffing and resources in 1999, and this was felt acutely in locating housing and shelter for survivors. Limited emergency shelter is available for LGTB survivors, through a network of hotel vouchers. There exist no fixed shelter of transitional housing specifically for this population. The ongoing gentrification process in San Francisco continued to make housing unavailable, and thus many survivors leave the area as the only option when leaving a partner. For LGTB survivors this often means moving to a location with a less visible LGTB community and fewer service options. Also some judges were hesitant to grant restraining orders if the net effect would be to evict a perpetrator from a residence, even if there were ample evidence of abuse.

The range of tactics used by offenders was also tracked closely in 1999. Survivors told of physical, emotional and economic abuse. Some of the weapons used were guns, razors, knives, fists, boots, shattered glass, car jacks, dousing with lighter fluid, and household objects.