# **New York**

# Lesbian, Gay, Transgender and Bisexual Domestic Violence Report

2003/2004



# A Report of the New York City Gay and Lesbian Anti-Violence Project (AVP)

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# Introduction

## **Agency Information and History**

Founded in 1980, the New York City Gay and Lesbian Anti-Violence Project (AVP) has 25 years of experience and expertise serving lesbian, gay, transgender, bisexual HIV-affected (LGTBH) and other victims of crime. AVP provides specialized services for victims of anti-LGTB bias and hate violence, intimate partner and domestic violence, police misconduct and abuse, HIV-related violence, rape and sexual assault as well as services for family and friends of those murdered in anti-LGTB hate crimes or as a result of domestic violence. Services for those affected by crime include 24-hour bilingual English/Spanish crisis intervention hotline, individual and group counseling, accompaniment, court monitoring, advocacy with police, medical, criminal justice personnel, mental health and social service providers, local city and state representatives and others. AVP is a New York State (NYS) Department of Health Rape Crisis Certified provider offering specialized services to victims/survivors of rape, incest and sexual assault. AVP provides NYS Crime Victims Board application and claim filing assistance to victims of all crimes.AVP works within and beyond the LGTB community providing training, education, outreach, advocacy with local and state agencies and others to address inadequacies or gaps in laws and services for LGTB people.

AVP began as an all grassroots response to anti-gay bias attacks in the Chelsea area of Manhattan to which the police were not responding. AVP began documenting same-sex domestic violence in 1983 when it was recognized that these cases comprised 30% of all cases handled by the agency. Nineteen years ago, in 1986, AVP began the first formalized program for survivors of same-sex domestic violence in New York and continues to be the only agency in the State with specialized services for LGTB victims of domestic violence.

## **About This Report**

This report encompasses incidents of LGTB domestic violence directly reported to AVP in 2003 and 2004. This report does not purport to document the actual number of domestic violence incidents among LGTB victims/survivors in the New York City area, but is an analysis of the information reported to AVP. In collecting data, AVP uses a standardized intake form, as well as definitions, and criteria

Highlight of Findings: New York Report on Lesbian, Gay, Transgender and Bisexual (LGTB) Intimate Partner and Domestic Violence for 2003-2004

Founded in 1980, the New York City Gay and Lesbian Anti-Violence Project (AVP) is a 25 year-old crime victims' service organization. AVP established a formal same sex domestic violence program in 1986, one of the first two nationally. AVP remains the only organization within the tristate area with specialized victims services for the LGTB community. The program currently serves those victimized in intimate partner violence as well as victims of intrafamilial domestic violence.

This highlight summarizes new incidents reported to AVP in 2003 and 2004 and does not purport to document the actual number of incidents of domestic violence experienced by LGTB victim/survivors in the New York City area.

#### Cases in 2003 and 2004

2003: AVP opened 423 new cases for 501 new victims/survivors; a 16% increase from 2002. Additionally, AVP continued to serve 94 on-going domestic violence clients who came prior to 2003. An additional 711 clients received one-time emergency hotline, walk-in counseling and other IPV related services.

2004: AVP opened 486 new cases for 607 new victims/survivors; a 21% increase from 2003. Additionally, AVP continued to serve 87 on-going domestic violence clients who came prior to 2004. An additional 345 clients received one-time emergency hotline, walk-in counseling and other domestic violence related services.

consistent with those approved in association with other National Coalition of Anti-Violence Program (NCAVP) member organizations. A copy of the Intake/Incident Form can be found at the end of this report.

# **Definitions and Overview**

The United States has come to understand domestic violence as a dynamic of power and control exerted by one partner, generally male, over another partner, generally female. Statistics of *heterosexual* domestic violence tend to bear out this apparent gender link for the majority of documented cases. Although heterosexual men do report as victims of domestic violence, women are overwhelmingly documented as victims in cases of heterosexual domestic violence. Many have used these statistics to theorize that within a patriarchal paradigm, gender forms the basis for the inequity of power in *all* intimate relationships. Hypotheses about the etiology of abuse based on gender however breakdown when applied to same-sex and LGTB domestic violence.

AVP defines domestic violence as:

any pattern of behavior

within an intimate relationship
that coerces, dominates or isolates.

It is the exertion of
any form of power that maintains control.

Fear tends to be a marked characteristic for victims of domestic violence. Forms of abuse may include but are not limited to emotional/psychological, physical, economic, sexual abuse and social isolation. (See Appendix for AVP's LGTB Power and Control Wheel) For LGTB victims of domestic violence, abusers may also use "outing" (the revealing or threat of revealing of someone's sexual orientation or gender identity, HIV or immigration status, etc., to government and local authorities, immigration, landlords, employers, friends, family, etc.), heterosexism, homophobia, transphobia or biphobia to control their victims. (See Bias/Motivations for definitions of these terms.)

The use of outing, heterosexism and phobias plays on the awareness of societal biases to convince victims of the very real possibility that they won't receive help from legal, social or medical providers just because of who they are. Abusers use these added weapons to exert greater control, lower self-esteem, and instill fear in their victims.

# About the Victims/Survivors Gender:

2003:

51% Males (including transgender female to male) total

47% Females (including transgender male to female)

2% Unspecified Gender

2004:

50% Males (including transgender female to male) total

45% Females (including transgender male to female)

5% Unspecified Gender

#### Sexual Orientation:

**2003**: 41% Gay Males

29% Lesbians 3% Bisexuals 12% Heterosexuals 16% Unspecified

**2004**: 36% Gay Males

23% Lesbians 6% Bisexuals 11% Heterosexuals 23% Unspecified

Age:

2003:

37% 30-44 years of age 11% Under 18 year of age 13% 45-64 years of age

2004:

33% 30-44 years of age 16% Under 18 years of age 12% 45-64 years of age Within the National Coalition of Anti-Violence Programs (NCAVP) it has been observed that agencies formed solely to address domestic violence primarily see female victims and agencies that were formed initially to address hate crimes and have an LGTB domestic violence program tend to see both male and female victims in almost equal proportions.

The occurrence of abuse within intimate partner relationships (25%-33% of all relationships involve violence--Renzetti, Claire M. and Charles Harvey Miley, eds.(1996) Violence in Gay and Lesbian Domestic Partnerships. New York: Harrington Press) in LGTB relationships has been demonstrated as similar to the rate of heterosexual domestic violence; about 1 in every 4 relationships experiences some form of abuse. Because the rate of domestic violence among same-sex and heterosexual relationships is so similar, as are the dynamics of power and control, it is reasonable to conclude that gender alone cannot form the basis for domestic violence theory.

AVP's approach within the context of the available literature and AVP's history of experience is to view domestic violence within a context of oppressions and interpersonal relations. In an abusive relationship where one partner wields power and control over another, oppressions based on class, ethnicity, race, education, HIV status, socioeconomic status, disabilities, gender, etc. provide tools for power and control. Under this formulation, service provision models cannot presume an abuser/victim gender based paradigm. And violence between partners of any gender cannot be assumed to be mutual if there is a pattern of power and control by one partner over another. If mutual violence does appear to exist within any form of relationship, domestic violence needs to be ruled out first, to account for safety considerations, and should be distinguished from the presence of complicating issues of substance abuse, mental illness or other factors.

Victims who report domestic violence are regularly asked if the abuse may have included other biases/motivations on the part of the abuser. AVP defines biases in cases of domestic violence as added tools that abusers can use to maintain power and control and instill fear in their victims. These often represent aspects of added vulnerability, and may include someone's immigration or HIV status, disabilities, economic resources, race, ethnicity, religion, gender, etc. These added weapons are available to all abusers regardless of sexual orientation or gender identity.

LGTB abusers have some additional tools at their disposal; heterosexism, homophobia, transphobia and biphobia. Heterosexism refers to the presumption that heterosexual relationships are the 'right,' only

#### Race/Ethnicity:

2003: 29% Latinas/Latinos

28% African-Americans

24% Whites

3% Multi-Racial

2% Self -Identified as "Other"

2004: 28% Latinas/Latinos

29% African-Americans

17% Whites

4% Multi-Racial

1% Self -Identified

as "Other"

# Initial Contact Caller:

#### 2003:

80% Victims/Survivors of IPV

4% Lovers/Family/Friends

7% Perpetrators

7% Service Providers

#### 2004:

67% Victims/Survivors of IPV

9% Lovers/Family/Friends

9% Perpetrators

12% Service Providers

#### Incident Related--Geographic Location:

#### 2003:

13% Bronx

18% Brooklyn

31% Manhattan

11% Queens

2% Staten Island

6% Outside of

New York State (Including 4%

New Jersey)

#### 2004:

17% Bronx

17% Brooklyn

27% Manhattan

8% Queens

2% Staten Island

7% Outside of

New York State (Including 5%

New Jersey)

or preferred form of relationship. Homo/trans/bi-phobias refer to fear, ignorance and hatred of LGTB persons. Heterosexism, as well as the other phobias, can be exhibited or used by people of any sexual orientation or gender identity. LGTB abusers use these biases and stigmas to convince their victims that no one else will care about them, and that if victims seek assistance from others, they may be at risk for bias or even abuse, unfortunately not an unfounded concern.

LGTB abusers may also use these biases within relationships to control their victims' forms of self-expression or social contact with others. For instance an abusive partner that is closeted might prevent his partner from attending gay community events or dressing in a way that would be 'too obvious.' Another situation might involve an abusive partner who criticizes her partner for not looking gay enough. A transgender woman may be told that she is 'not a real woman' and the violence might be directed at destroying her female-identified clothing or physically targeting hormonally or surgically altered body parts such as the face or breasts. Another weapon is the use of outing-the revealing of vulnerable information-or threats of outing someone, e.g. revealing immigration or HIV status, sexual orientation or gender identity to governmental agencies, employers, family, landlords, etc.

Referred to earlier, 'outing' and the threat of 'outing', effectively instills fear in victims, and often delays or prevents a victim from seeking help. 'Outing' may result in severe repercussions for victims including deportation, vandalism or bias attacks from neighbors, homelessness, unemployment and in some cases removal of parental rights. Documenting the use of bias/motivations in domestic violence relationships confirms the understanding that abusers use deliberate tactics to manipulate and control their victims. AVP primarily serves victims of intimate partner domestic violence (IPV).

A significant portion of those under 18 and those between 18-22 seek services for intrafamilial domestic violence as well as intimate partner domestic violence.

While most young victims of intrafamilial domestic violence routinely witness violence and are abused emotionally, physically and sometimes sexually, LGTB adolescents and young adults encounter anti-LGTB bias/hate and abuse from family members based *solely* on their gender identity and sexual orientation. LGTB victims of intrafamilial domestic violence are often at greater risk of homelessness and are

#### Sites of Abuse:

#### 2003:

79% Private Residence 6% Street/Public Areas 1% Workplace

#### 2004:

79% Private Residence 5% Street/Public Areas 2% Workplace

#### Types of Crimes Committed:

2% Rape

#### 2003:

16% Assault without
a weapon
5% Assault with a
Weapon
30% Intimidation
30% Verbal Harassment
3% Sexual Harassment
3% Telephone Harassment

2% Sexual Assault

#### 2004:

17% Assault without
a weapon
4% Assault with a
Weapon
32% Intimidation
31% Verbal Harassment
2% Sexual Harassment
5% Telephone Harassment
1% Rape
1% Sexual Assault

#### Weapons Involved:

#### 2003:

41% Blunt Objects 5% Bottles/Bricks/Rocks 25% Sharp Objects 5% Firearms 1% Restraints

#### 2004:

31% Blunt Objects 12% Bottles/Bricks/Rocks 29% Sharp Objects 6% Firearms 4% Restraints subjected to increased abuse and physical violence, and even murder. As AVP has observed and documented, victims of physical violence and murder as a result of bias and hate are usually subjected to extreme and brutal force well above that required to injure or kill a victim. This appears to be true for victims of intrafamilial domestic violence involving anti-LGTB bias/hate as well. This was clearly exemplified in a 2000 case involving intrafamilial domestic violence and anti-gay bias and hate crime, when the dismembered and mutilated body of 19 year-old Steen Fenrich was found in a Queens park. The horrific remains included a foot, loose teeth, a pair of trousers and a bleached skull. The police determined that there had been a history of domestic disputes and that John Fenrich, 36, the stepfather of Steen Fenrich, had killed the bi-racial son of his wife in a homophobic rage.

# Family Court vs. Criminal Court Access

New York State is one of a handful of states where Criminal Court remains the only means of access to obtaining an Order of Protection for LGTB intimate partner domestic violence victims.

In incidents of intimate partner violence a victim is unable to secure an Order of Protection if no arrest is made. LGTB victims of intimate partner violence must sustain a felony level assault before they are entitled to access an Order of Protection. In contrast, domestic violence victims who are married, have a child in-common or are related by blood have access through New York Family Courts for Civil Orders of Protection which generally only require that a complaint be filed with the police and that the victim express fear for their safety. Unfortunately this limitation negatively impacts both heterosexual and LGTB victims of domestic violence who are not married and do not have a child in common. Legally, gay men and lesbians are not, as yet, permitted to marry in New York State, and it is only with rare exception that same-sex partners have been able to gain co-adoption of children. Victims of any sexual orientation or gender identity generally do not want their partner to be arrested, they just want the violence to stop, which can complicate victims access to Orders of Protection.

Additionally, the history of criminalization of homosexuality makes LGTB victims reluctant to access protection through an institution

#### **Physical Injuries:**

#### 2003:

31% physically injured 63% required medical attention 7 deaths

#### 2004:

30% physically injured 73% required medical attention 12 deaths

#### **Medical Attention:**

#### 2003:

13% needed but did not receive8% out-patient care2% in-patient/hospital

#### 2004:

11% needed but did not receive7% out-patient care2% in-patient/hospital

#### Serial Offenses:

#### 2003:

88% experienced prior incidents of abuse 6% reported 1 prior incident of abuse 19% reported 2-5 prior incidents 30% reported 6-10 prior incidents 45% reported more than 10 prior incidents

#### 2004:

91% experienced prior incidents of abuse
7% reported 1 prior incident of abuse
31% reported 2-5 prior incidents
15% reported 6-10 prior incidents
47% reported more than 10 prior incidents

known to persecute and stigmatize them. These limitations effectively block lesbian and gay male victims, most transgender and bisexual victims as well as non-married heterosexual victims from receiving necessary protection under the law. Additionally, it is considerably more difficult for LGTB victims of intimate partner violence to obtain exclusionary Orders of Protection that ban the abuser from the home. For LGTB victims to obtain this added level of protection, multiple criminal charges or a charge for a more severe offense, usually involving a weapon or serious injury as a result of an assault, are often required.

Intimate partner violence
is typically understood to follow a pattern of
escalating violence over time
and can continue to
increase in frequency and intensity
even after a victim has reached out for assistance
or has attempted to leave.

Victims of IPV often seek ways to minimize or excuse abusive behavior before reaching out for help. The number of victims of IPV who reported having experienced prior incidents of abuse continues to constitute a majority of the overall new reports of IPV in 2003 and 2004.

Where no arrest is made, LGTB victims must continue to suffer further abuse and injury until the abuse reaches the level of 'criminal' proportions. There is no recognition nor are there legal protections for non-heterosexual families in New York. Unlike their heterosexual counterparts, LGTB victim/survivors of IPV have no access to protection through Family Court. There are some exceptions, but these are extremely rare, such as the cross adoption of children by both partners in a same sex relationship. Police protection therefore can only come after the level of violence has escalated to an arrestable offense. One regularly cited argument for not offering access to non-heterosexual families has been that to do so would result in the courts being flooded with cases. Of note the neighboring state of New Jersey provides full Family Court access for all victims of domestic violence regardless of orientation.

An increase in arrests made in 2003 and 2004 in LGTB domestic violence followed the long awaited anti-stalking law passed in New York State in 2000. Stalking involves unwanted contact-whether in-person or by other means of contact through telephone calls, letters, email etc.- that serves to intimidate, harass and threaten victims.

#### **Police Reporting**

2003: 36% reported to police

2004: 38% reported to police

#### Police Reports by Borough

**2003**: 13% Bronx

19% Brooklyn27% Manhattan12% Queens4% Staten Island

**2004**: 18% Bronx

15% Brooklyn 25% Manhattan 7% Queens 2% Staten Island

#### **Police Report Outcomes**

#### 2003:

17% complaint taken,
no arrest able
to be made
8% complaint taken;
perpetrator
was arrested
6% police refused to
take a complaint
4% victim/client
was arrested

#### 2004:

15% complaint taken,
no arrest able
to be made
16% complaint taken;
perpetrator
was arrested
5% police refused to
take a complaint
2% victim/client
was arrested

Unchecked, stalking frequently erupts into physical injury and even murder, as can be seen all too regularly in the media. Prior to 2000 LGTB and non-LGTB victims of stalking had little legal recourse unless they sustained an injury, could prove that a death threat was made or another crime had taken place.

Unfortunately the current political and social climate coupled with limited access to Orders of Protection through Family Court, results in victims not wanting to 'out' (reveal) their orientation let alone report violence in a same-sex relationship. There is a fear that in doing so, they risk their partner facing bias along with criminal charges. They also risk the cruel possibility that they will be ineligible for protection under the law because the *violence was not severe enough* to warrant a felony level offense. To the credit of the New York Police Department, the Department's internal policy and definition of family encompasses those in intimate relationships who reside or have resided together, offering at least some added support through Domestic Violence Police Officers who are specially trained and equipped to aid victims.

On a State level it has generally been acknowledged that preventing same-sex couples and LGTB people access to Family Court has been the dominant argument for refusing to open Family Court to all victims of domestic violence.

One politician recently expressed the fear that the Family Court system will be overrun. In New Jersey all victims of domestic violence are able to access Family Court without their system suffering the dire consequence of being overrun.

This type of anti-LGTB bias is used to stigmatize victims, prevent access to necessary services and protections, and once again *institutionalizes* bias and hate.

Within and beyond the LGTB community, outreach and education based on heterosexual relationships has too frequently served to obscure LGTB victims and same-sex domestic violence. Societal stereotypes of dysfunctional LGTB relationships serve to normalize or dismiss abuse, often making it difficult for victims or abusers to recognize abusive behaviors and relationships. Given this increased

#### **Perpetrators**

#### Relationship to Victim/Survivor:

#### 2003:

37% Lovers/Partners 37% Ex-lover 9% Relatives/Family 4% Roommate

#### 2004:

47% Lovers/Partners 34% Ex-lover 12% Relatives/Family 2% Roommate

#### **Bias/Motivations**

#### 2003:

24% AIDS/HIV-related28% Heterosexist20% Economic8% Anti-transgender

#### 2004:

24% AIDS/HIV-related25% Heterosexist24% Economic9% Anti-transgender

denial that abuse in LGTB relationships is domestic violence, as well as the increased barriers to service that LGTB people face generally, AVP recognizes that this report can only represent a sample of the actual number of LGTB victims of domestic violence.

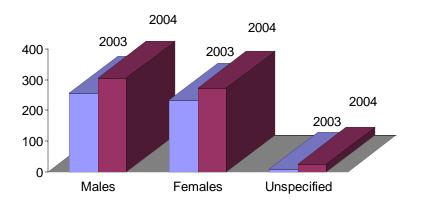
AVP uses the data collected to provide statistical analysis of LGTB domestic violence, for education and outreach, and to develop responsive and appropriate services.

# Summary of Demographic and Statistical Trends

#### **Gender Related**

In 2003 47% of reports came from females and 51% from males. In 2004 there was a slight shift with 45% of reports coming from females and 50% from males. Four percent of all reports in 2004 came from transgender identified clients who self-defined as female (25) and one who self-defined as male. Another five percent were of unknown/unspecified gender.

#### Reports by Gender for 2003 and 2004



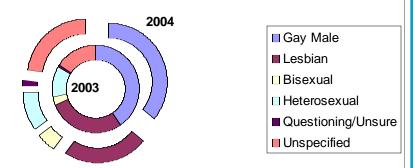
AVP's commitment to staff diversity and outreach within and beyond the LGTB community may relate to a significant increase in victims/survivors identifying as unkown/unspecified. Victims/survivors who identify their gender identity beyond binary gender categories may also have felt more comfortable or a greater sense of safety accessing AVP's services.

# Survivors' Stories\*

-- My name's Anthony, I was with my partner for five years. He used to get drunk and pick fights with me, calling me ugly, like my mother used to, and telling me that my own family didn't want me. I'm a 40 year-old black man, but when he would threaten to beat me up I felt no bigger than when I got beaten as a child. He told me that if I ever called the police on him, it would be the last call I ever made. One day we had a fight over a pair of pants that I bought and he put a gun to my head. I stayed and did what he told me to because I thought he would kill me. A friend told me about AVP a short time later and I called them. I didn't know what else to do. I talked to a counselor over the phone and scheduled an appointment. Once it was safe I grabbed a garbage bag full of my stuff and left. After I went through intake and assessment, AVP helped me find safe shelter in a space they have with Safe Horizon. I had already been receiving SSI for major depression and posttraumatic stress disorder because of the abuse I had gone through with my family. When I got to AVP, I was totally lost and I had nothing but the bag of stuff I'd brought. AVP gave me emergency funds for travel and food. With the shelter's assistance I applied for Medicaid, food stamps and a bank account to deposit my SSI check into. I've been doing weekly counseling sessions. AVP arranged for me to get a Community Voicemail account through Coalition for the Homeless so that I could

#### **Sexual Orientation**

# Sexual Orientation of Victims/Survivors 2003 and 2004



As can be seen, there was an increase among most categories of sexual orientation in 2003 and 2004. Gay males represented nearly half of all victim/survivors reporting domestic violence in 2003 and over a third in 2004. Lesbians represented nearly a third of victim/survivor reports in 2003 and just under a third in 2004. Interestingly, there was a significant rise in reports among heterosexuals in 2003. This may be related to the significant rise in transgender clients. It has been AVP's experience that the majority of transgender clients seeking services have identified as heterosexual. However, this should not be taken as representative of the overall composition of the transgender community, but more likely speaks to who chose to access the agency's services.

In 2004, the number of victims/survivors identifying as bisexual nearly tripled from the previous year. Interestingly, in 2004 AVP also saw an increase in the number of bisexual and heterosexual identified staff members employed at the agency. Having a staff representative of the range of sexual orientations may have made it more comfortable for bisexual victims/survivors of domestic violence to access our services. Staff diversity in terms of sexual orientation might also relate to a significant increase in victim/survivors identifying as questioning/unsure and unspecified. Victims/survivors who identify their sexual orientation outside of the categories of sexual orientation that AVP currently uses may have also felt more comfortable accessing AVP's services.

# Age Related

Looking at the chart there were clearly increases in almost every age range. Of note there was a 73% increase in reports from those under

get messages about jobs and housing. I'm now looking for my own place.

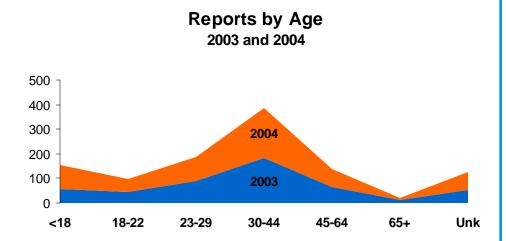
## Œ

--I'm Anna, a 34 year-old white lesbian. Our relationship was great in the beginning but over the years my partner and I began fighting. She was jealous of my friends and family and tried to push them away. She would get so angry with me for no reason and sometimes she hit me. I didn't want my kids to see us like that so I knew I had to get away from her. I told her it was over but she didn't want to let go. She started calling me constantly and even followed my kids on their way home from school. I knew I had to do something to protect my family but I didn't know what to do. I found an AVP pamphlet at a community center and decided to call. With AVP's support, I was able to file a police report with a domestic violence police officer. Police arrested my ex-partner and I got an order of protection. AVP advocated with the District Attorney's office to get my children included in the order of protection. I went for counseling at AVP. When I started to have doubts before the trial I would call AVP's hotline and walk-in for counseling. It helped me to get through. I recently got a promotion at work and I've even begun to date again.

# OB

--I'm Hector, a 21 yearold Nuyorican. My boyfriend had a bad temper and he was 18 and a 26% increase in those between the ages of 18-22. Increases in reports among youth and young adults may reflect a shift in our community to empower youth enabling them to more safely identify their sexual orientation or gender identity and to access LGTB services. There has been a concerted effort to raise awareness of dating violence and domestic violence among youth through AVP Anti-Violence Youth Inititiative. The Initiative provides eduction and outreach to schools, youth based organizations and peer youth groups in order to reach a wide range of youth and to access some of the most vulnerable youth populations.

Increases in youth may reflect a rising trend in reporting intrafamilial as well as youth dating violence. Increases in all other categories more likely reflect the overall 21% rise in reports of domestic violence. The decrease in reports from those 65 and over requires further study. AVP is currently working toward developing greater outreach to LGTB seniors and linkages with organizations serving older adults and the elderly.



# Race/Ethnicity

Reports of race/ethnicity by percentage in 2003 and 2004 were proportionately consistent. In 2004 reports included African American 29%, Latina/Latino 28%, white 18%, multi-racial 4%, Asian Pacific Islander 2%, other 2% and African Americans, a 20% increase in reports from Latinas/Latinos. There was also a slight increase in reports from those identified as Asian Pacific/Islander and a slight decrease in reports from those identified as white.

AVP has made an effort to be a presence at events that serve specific ethnic groups as well as maintaining its efforts to engage the white community. The success of these efforts is apparent in the rise of reports from African-Americans and Latinas/Latinos. While there

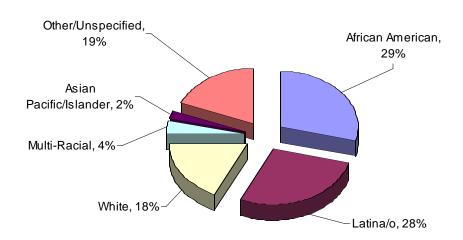
always accusing me of cheating on him. He would get angry and start yelling. He would throw things around the apartment and sometimes he would throw things at me. One night I went out with some friends and when I came home he was waiting for me. He called me a slut and threw a chair at me. I had to go to the hospital because my head was bleeding. I decided in the hospital that I couldn't go back to him this time. The hospital social worker gave me the number to AVP. I went to their office after I was discharged from the hospital and met with a counselor. After completing an intake, AVP was able to help me get emergency shelter at a hotel for two nights and emergency funds for food. After I went through an intake and assessment, AVP was able to help me find a safe place to stay with Safe Horizon. I was never much of a talker, but I started going for weekly individual counseling and eventually a weekly support group for other LGTB survivors of IPV at AVP that really helped. I'm looking for a job and my own apartment and I'll soon be enrolling in college.



--My name is Gabriella and I live in a New York City Housing Authority (NYCHA) senior citizen complex. I'm a 66 year-old Latina of Puerto Rican descent. My lover was living with me for three years and was using drugs on and off the whole time. He was always asking for money to buy drugs and when I wouldn't give it to him we would fight. The fighting got worse this last year but I could-

appears to be a decrease in the percentage of reports made by those identifying as white, the actual number of those reporting has remained relatively consistent since 2001. The apparent rise in reports by Asian/Pacific Islanders is consistent in actual numbers with previous reporting years and so does not represent a substantive change. This pattern is also true for reports by Native Americans which in this year decreased by nearly one-third.

#### Reports by Race/Ethnicity 2004



Significantly, reports from Arab/Middle Easterners fell nearly two-thirds from 2002 and reports from individuals identifying as Multi-Racial decreased by nearly one-third. It is reasonable to surmise that those of Arab/Middle Eastern descent or those who might be misidentified as such may be less comfortable accessing services beyond local community resources or may not seeking any assistance at all.

There were more individuals identifying as "unspecified" in 2004 and 2003, possibly reflecting a growing number of clients reluctant to be placed in a category that may not be fully representative of their identity. AVP is working to develop more inclusive reporting categories.

#### Incident Related

#### Sites of Abuse

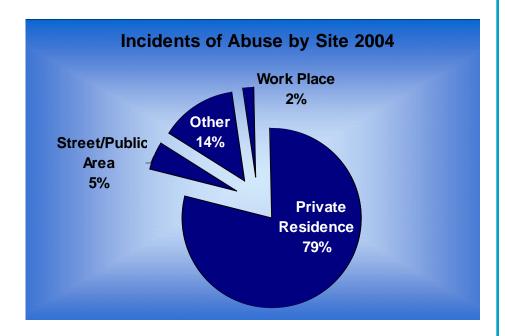
The site of abuse in intimate partner and intrafamilial domestic violence is frequently the home, which accounted for nearly 80% of reports in 2004 and 2003. There was a 125% increase in incidents occurring at the workplace in 2004 after a decline in 2003. There was

n't call the police because I was afraid to lose my housing. I was also afraid that if I reported him, he would tell people that I was transgender. After a really bad fight, I thought I should go stay with family in Puerto Rico for a while. I changed the locks and left but he broke in while I was away and threatened to kill me when I returned. I went to the police to report him when I got back to New York but the police didn't take me seriously. I saw a flyer for AVP and I called. I completed an intake and AVP advocated for me with NYCHA management. That same day, management put gates and new locks on my windows and door. AVP made an appointment for me with the Public Housing Domestic Violence Unit where I was able to file a complaint against my ex. I suffer from rheumatoid arthritis so AVP helped me to enroll in Access-A-Ride services to so it would be easier for me to get around the city. My ex did return to the apartment and he attempted to assault me but I was able to get to out and get to the management office for help. Because they knew about my situation, management called 911 and they arrested my ex. I've been going for counseling from AVP. I really thought he loved me, but I realized I was in love with a dream. I've decided to move to Florida to be closer to my family. AVP's helped connect me to a Florida LGTB Community Center for support after I move.



--No one in my family knew that I was HIV+. My

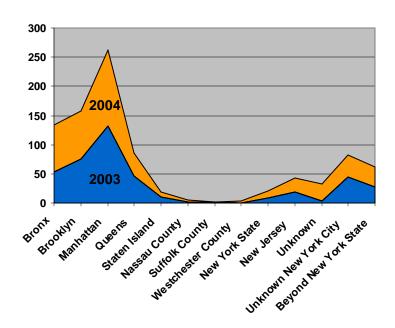
a two-year rise in reports of incidents occurring in other areas beyond the private residence and public streets such as: public accommodations-restaurants, theatres, etc.; in and around LGTB establishments; and on public transportation-that accounted for 14% of all incident sites.



#### **Geographic Location**

Incidents reported in 2004 for the boroughs of the Bronx and Brooklyn rose by 53% and 8% respectively from incidents reported in 2003.

# Reports by Geographic Location 2003 and 2004



name's Irene I'm 32 years old, heterosexual and a mother of a 6 year old girl. I felt alone keeping my status a secret so I decided to tell my mother. She told my brother and my uncles and they started harassing me. One time my brother came after me with a bat and threatened to beat me. I was so scared that I called the police and reported him. My mother threatened to put me and my daughter out on the street. I dropped the charges to keep the peace but the threats didn't stop and the stress was making me sick. I had applied for housing but I was on a waiting list. I called AVP hoping that they could help me to get faster housing through the HIV/AIDS Service Administration (HASA). After completing an intake and assessment AVP advocated for me with a HASA worker to speed up my housing application. AVP assigned me a counselor to help me deal with what I'd been through with my family. One month after contacting AVP, me and my daughter moved our own HASA sponsored apartment and I've just started a new job as a health aid worker.

\*Stories are based on actual events. Names and other identifying information have been changed to protect the identity of survivors.

**WWW** 

Nearly a third of all reported incidents in 2004 and 2003 came from Manhattan where AVP is located. Reporting from other locations was consistent with previous years. See chart for breakout by location.

#### **Serial Offenses**

In 2004, 91% of all new cases victim/survivors reported experiencing incidents of abuse prior to coming to AVP, a 13% increase over those reporting similarly in 2003.

In 2004 nearly half of all victims/survivors reported experiencing more than ten prior incidents of abuse. Encouragingly, in 2003 and 2004 AVP saw a significant rise in reports from those who sought earlier intervention in their abusive relationships. There was an appreciable rise in 2004 from those seeking services after one, and 2 to 5, prior incidents.

#### Police Related

In 2004 91% of LGTB victims/survivors of domestic violence experienced prior incidents of abuse. Of these, only 30% had ever previously sought assistance from the police.

For 38% of victims/survivors who contacted AVP and sought police assistance in 2004, 16% reported that their batterers were arrested. This was a striking and encouraging 126% increase from 2003.

Unfortunately for another 15% of LGTB victims who also sought police protection, no arrest was made. Where no arrest is made, LGTB victims must suffer further abuse and injury until the abuse reaches the level of 'criminal' proportions. There is no recognition under the law nor are there legal protections for non-heterosexual families in New York. Unlike many of thier heterosexual counterparts, LGTB victim/survivors of IPV have no access to protection through Family Court. There are some exceptions, but these are extremely rare, and include the cross adoption of children by both partners in a same sex relationship. Police protection therefore can only come after the level of violence has escalated to an arrestable offense. There was an encouraging surge in arrests in 2004 for 16% of victims, a 126% increase over 2003.

AVP noticed a drop in reports made to police after the terrorist attacks of 2001. While officers sought to protect the City, interpersonal interactions with police and police responsiveness to individual

# Letters from Our Clients

"I want to thank you for your generous support, guidance, and for all the help you've given me over the last few months. You and your organization have been very instrumental in my healing process. I can finally say I'm okay and mean it. All the best to you. I will always hold a special place for you in my heart.

Peace be with you."

-Name withheld

Quotation included in the card from the client:

Everything will be okay in the end. If it's not okay, it's not the end. (unknown)



"I am a 48-year-old male who recently ended an abusive relationship. After blaming myself, losing my identity and fearing for the safety of loved ones and myself, I turned to your agency on the advice of a good friend. Initially, I was embarrassed, angry and a bit scared. Over a period of time I found the experience at AVP to be overwhelmingly positive. Specifically, I found my counselor to be professional, understanding, informative and very proactive on my behalf. She made me feel comfortable with the course I so obviously had to take in this matter. Within two weks of our first meeting, my ex was arrested and subsequently he pleaded

crime victims suffered in the end of that year and into 2002. On a positive note, following a 16% rise in 2003, in 2004 there was a 21% rise in reporting within the five boroughs of New York City. This reflects a greater proficiency on the part of the New York Police Department to balance service needs at both an individual and citywide scale.

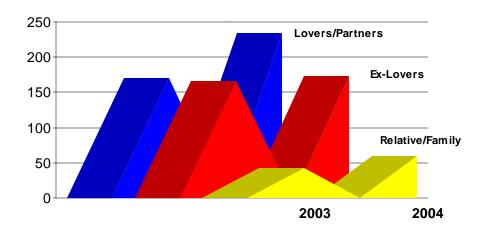
Consistent with this improvement 2004 saw a 54% rise in police attitude reported as courteous in contrast to the lower reports for 2003 and 2002.

## Perpetrator

There was a 38% rise in reports of abuse from current lovers and partners in 2004, accounting for 47% of all reported perpetrators. Ex-lovers were the abusers in 34% of cases.

In 2004 relatives were reported to be the abusers in 12% of cases, a 40% rise from 2003. This likely represents the increasing trend in reports of intrafamilial domestic violence.

#### **Perpetrators**



Perpetrators can and do involve friends, family, and others (landlords, employers, etc.) in the abuse of their victims. Reports of roommates as abusers more likely reflect perpetrators in situations of intimate partner violence. Cases initially identified through the media where same sex relationships are frequently identified in this way account for a portion of this category. However AVP sees this category used regularly by older LGTB IPV victims/survivors of various ethnicities who are more comfortable identifying their relationship in this way.

guilty to aggregated harassment.

Now, months later I'm feeling like myself again. I feel safer. I'm laughing again. In short, I've regained my life. I'm grateful your agency exists. I would not hesitate to recommend AVP to others. Again, thank you so very much."

-Name withheld



"Thank you so much for Everything so far! For your true insights, compassion and love! I very much enjoyed the group also."

-Name withheld



"I would like to express my gratitude to you people and especially to my counselor. Since the first session with her to the day my case was closed, she was supportive, professional and extremely efficient. She helped me to go through this horrible and painful experience. I thought it was never going to end.

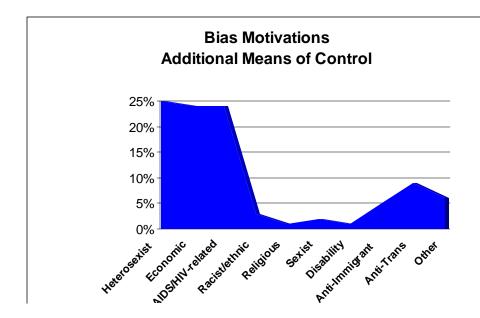
My counselor listened to me and most importantly she believed in me. She was great dealing with all the legal matters. She is also a fantastic counselor who helped me to overcome the negative impact this situation had in my life.

Today I am back on track and I am doing very well in my professional and personal life. Thank you!"

-Name withheld



#### **Bias/Motivation**



Since the founding of its LGTB Domestic Violence Program, AVP has observed and recorded forms of abuse in addition to power and control with specific biases and motivations. In 2004 economic motivations were reported in 24% of cases. AIDS/HIV-related bias was reported in 24% of cases and heterosexist bias was reported in 25% of cases.

Heterosexism is the belief that heterosexuality is the only preferred or right form of relationship. Heterosexism may result in anti-gay discrimination or hate violence from those who are not gay-identified. Same sex batterers employ heterosexism as a means to control their partners' choices of clothing, self-expression and even who the victim can socialize with. Batterers exploit the potential for heterosexist discrimination and homophobic bias to convince their victims that no one will help them and that going outside of the relationship will result in abuse and injury by neighbors, family, police, medical providers and others.

# **Crimes and Injuries**

Intimidation and harassment are intrinsic to all relationships involving intimate partner violence. As the pattern of abuse escalates, intimidation and harassment often lead to other forms of violence. Statistically cases in 2004 included intimidation in 32% of incidents, up 14% from 2003 and harassment in 31% of incidents, up 15% from 2003. Physical assaults occurred in 17% of cases in 2004, up 14% over 2003. Assaults involving weapons in 2004 occurred in 4%

# How You Can Help

Call us when you or someone you know in the LGTBH community experiences intimate partner or intrafamilial domestic violence, bias, discrimination, hate violence, police misconduct, rape, sexual assault, pick-up crimes or any other form of violence. AVP is New York's only 24-hour bilingual English and Spanish crisis intervention hotline. All services are free and confidential.

Report incidents to help AVP track what is happening in the LGTB community. This enables us to advocate for needed services and legal protections and to do outreach and education in an effort to avert potential or further victimization. This information also helps us to identify and address gaps in policy and legislation.

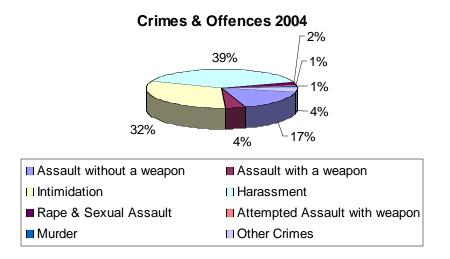
Volunteer AVP encourages volunteer participation in nearly all aspects of our work from hotline counseling, community activism and outreach to internal agency assistance and development. AVP welcomes the opportunity to host a range of internship positions whenever possible.

Donate Consider making a taxdeductable gift to AVP. Your contribution will help fund our 24-hour hotline and our free couseling services for victims as well as help us to get the word out about AVP.

Call AVP for more information at 212.714.1141

of cases, an apparent drop of 11% from 2003. In striking contrast, 30% experienced minor to serious injuries including with 12 incidents resulting in the death or murder of the victim-a 71% increase over 2003.

Serious injury took place in 8% of cases in 2004, a 35% rise over 2003. In 2004 there was a 71% rise in deaths/murders in reported domestic violence cases.



AVP has noted both statistically, and anecdotally from clients, that the level of violence in abusive relationships has continued an upward trend. Minor injuries occurred in 20% of cases in 2004, a 9% increase over 2003. Of those that were injured in 2004, 63% required medical attention that was either obtained through an out-patient or hospital/in-patient setting, or was needed but not received.

# Service Related

#### **Initial Contact**

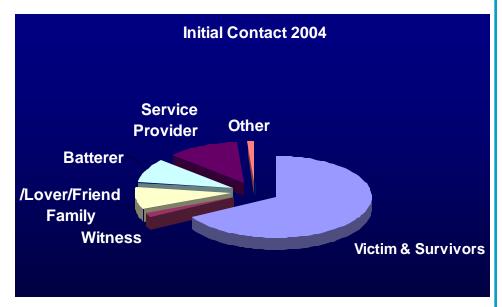
Initial requests for service are most often made by victims/survivors (67%), service providers (12%), and lovers/friends/family (9%).

Batterers (9%) also call AVP. Some of these calls come from those who are seeking services for their behavior. As a crime victim's organization, AVP cannot directly serve batterers, however to break the cycle of domestic violence, it is essential to address both victims and batterers. To this end AVP has developed SNAP: Seeking Non-Violent Alternatives Program. SNAP is the first New York-based program (and one of only two such programs nationally) which addresses same sex batterers, and batterers in relationship with trans-

# Where to Find Your Nearest AVP

AVP is a member of the National Coalition of Anti-Violence Programs (NCAVP); a 26 member nationwide coalition of anti-violence programs. AVP hosts the New York State Lesbian, Gay, Transgender and Bisexual Domestic Violence Network; a coalition of LGTB and mainstream organizations throughout New York State that serve LGTB victims and survivors of domestic violence. You can find a listing of these organizations and other information on the web at www.avp.org.

gender partners. Because of the loss of a host site and limited resources, this program is on hiatus. Unlike their heterosexual counterparts, while SNAP was active, generally every two out of three SNAP group participants were self-motivated and not mandated by the court to attend.



#### **Referral Sources**

In 2004 service providers accounted for nearly half of all referrals to AVP's LGTB domestic violence program (41%). Word of mouth accounted for the next largest source of referrals (22%). 2004 reflected a significant rise in referrals from AVP's public service advertising, up 200% from 2003.

#### Services Provided

AVP provides services annually to new domestic violence victims/survivors and on-going services to clients who contacted AVP before 2004. Additionally AVP annually assists consumers who may make a one-time only contact with the agency, usually in crisis, as well as provides expert consultation and support to other service providers across the spectrum of social, medical and criminal justice fields. If there is insufficient information to open a case activity in these instances, they are counted as "non-case clients."

In 2004 AVP served a total of 1,039 domestic violence clients with 19,363 units of service. Of these 345 were non-case clients. In 2003 AVP served a total of 1,306 clients with 14,071 units of service. During 2003 there were 711 non-case clients.

#### We're Here for You

- 24/7 365 days a year.
   Call our bilingual English and Spanish Crisis Hotline at 212.714.1141
- Crisis intervention and emergency walk-in services
- Information and referrals
- □ Counseling: individual and group
- Advocacy with social, medical, criminal justice and other service providers
- □ Accompaniment
- □ Court monitoring
- Crime Victims Board compensation claim filing assistance and advocacy

All services are free and confidential.

At this time services for non-case clients remain under represented. Only one service per contact is able to be counted under AVP's current data collection format. The difference in volume of non-case clients for 2004 and 2003 correlates with the lower levels of service activity in 2003 despite the overall larger number of clients. Due to the yearly volume of these client contacts, AVP is seeking to incorporate these contacts with AVP's computerized client database system to permit a more accurate reporting of actual activity.

# **Appendix**

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Casa Interval	Case: om/pm 3 Intern one 2- Office/walk-in 3- Mail 4- Media  Case Type: b-Bias d-Domestic violence s-S-Staff use enly case (other)  CALLER WAS REFERRED BY (check one): CALLER IS (check one):				
Caller's Telephone Number: ( )	4- Hospital	8- Telephone	Unknown	friend/ In family 7- 0t	stitutional Victim
VICTIM INFORMATION  VICTIM #1  Victim is: 1- Client 2- Other Victim 3- Institution/Org  Name:  Address:  Phone: ()  Can receive mail?   Yes   No	AGE:  1-	GENDER IDENTITY:  1- Female 2- Male 3- Transgendered - M-F 4- Transgendered - F-M 5- Unknown  SEXUAL ORIENTATION:  1- Lesbian/Gay 2- Bisexual 3- Heterosexual 4- Questioning/unsure 5- Unknown	RACE/ETHNICITY:  1- African-American 2- Arab/Middle-Eastern 3- Asian/Pacific Islander 4- Latina/o 5- Multi-racial 6- Native American 7- White 8- Jewish 9- Other (specify)  10- Unknown	4- □ Death* 5- □ Unknown *detail injuries in narrative	_
VICTIM #2  Victim is: 1	AGE:  1-	GENDER IDENTITY:  1- Female 2- Male 3- Transgendered - M-F 4- Transgendered - F-M 5- Unknown  SEXUAL ORIENTATION:  1- Lesbian/Gay 2- Bisexual 3- Heterosexual 4- Questioning/unsure 5- Unknown	RACE/ETHINICITY:  1- African-American 2- Arab/Middle-Eastern 3- Asian/Pacific Islander 4- Latina/o 5- Multi-racial 6- Native American 7- White 8- Jewish 9- Other (specify)  10- Unknown	in narrative	
VICTIM #3  Victim is: 1- Client 2- Other Victim 3- Institution/Org  Name:	AGE: 1-		RACE/ETHNICITY:  1- African-American 2- Arab/Middle-Eastern 3- Asian/Pacific Islander 4- Latina/o 5- Multi-racial 6- Native American 7- White 8- Jewish 9- Other (specify)  10- Unknown	in narrative	
VICTIM #4  Victim is: 1- Client 2- Other Victim 3- Institution/Org  Name:  Address:  Phone: ( )	AGE:	GENDER IDENTITY:  1- Female 2- Male 3- Transgendered - M-F 4- Transgendered - F-M 5- Unknown  SEXUAL ORIENTATION  1- Lesbian/Gay 2- Bisexual 3- Heterosexual  4- Questioning/unsure 5- Unknown	RACE/ETHINICITY  1- African-American 2- Arab/Middle-Eastern 3- Asian/Pacific Islander 4- Latino/o 5- Multi-racial 6- Native American 7- White 8- Jewish 9- Other (specify)  10- Unknown	EXTENT OF INJU  1  No injuries 2  Minor injury* 3  Serious injury 4  Death* 5  Unknown  *detail injuries in narrative	

New York City
Gay + Lesbian
Anti-Violence Project
Case Intake/
Incident Report Form

# INCIDENT INFORMATION

Date of incident:	Time of incident::	am/pm	Street address	s of incident:	
Precinct where incident occur	red :				Zip
LOCATION (check one):  1-	SITE (check one):  1- Police precinct/jail/police car 2- Private residence 3- Public transportation 4- Street/public area 5- Workplace 6- Public accommodation (store/restaurant) 7- Cruising area (includes public toilet) 8- School/college 9- GLBT Institution (non-bar/club) 10- In/around GLBT bar, club, sex club, bookstore 11- GLBT event/parade/rally 12- Other (specify): 13- Unknown	CRIMES + OFFEI	out a weapon a weapon* soult with a weapon jects thrown)* (verbal, sexual) re harassment urassment olt/rape idnapping ackmail	*List weapons, if any:	BIAS/MOTIVES (check all that apply)  1- AIDS/HIV-related 2- Domestic Violence 3- Heterosexist 4- Pick-up (specify pick-up site): 5- Economic 6- Racist/ethnic 7- Religious 8- Sexist 9- Disability 10- Anti-immigrant 11- Anti-transgendered 12- No apparent bias 13- Other (specify):
If YES, complete the If NO, skip to OFFE INFORMATION section  Number of previous  1. 1 3. 6-1  2. 2-5 4. 10- Previous police rep	NDER  5. Workplace  6. Public accommendation  7. (nuising area of the properties of	I that apply):  t/jail/police car  nce  protation  area  modation (store/  (includes public toilet)  je on (non-bar/club)  BT bar, club, sex re parade/rally	CRIMES + OF  1- Assault w 2- Assault w 3- Attempted (includes 4- Intimidat 5- Harassme	FENSES (check all that apprinted a weapon ith a weapon to sobjects thrown)*  Id Assoult with a weapon sobjects thrown)*  In the through the horassment to ho	gal eviction ice entrapment ustified arrest ice raid crimination on dalism stolen/ damaged glary/ \$ your of stolen/ damaged property
Is offender a memb	INFORMATION  Der of an identifiable hate go categories in this section, WRITE THE ENTITY:  RACE/ETHNICITY:  African-American  Arab/Middle-Eastern  Indered - M-F Indered - F-M  Indered - F-M  Indered - F-M  Indered - F-M	Top of the Head Selection	fenders next	Unknown Vehius If ye	Relative/family Roommate Security force/bouncer

New York City Gay + Lesbian Anti-Violence Project Case Intake/ Incident Report Form

# **POLICE RESPONSE**

PORTED   1-   Complaint taken   no arrest*   2-   Complaint taken   offender arrested*   3-   Police refused to take complaint   Police   Will report to police   Will report to police   Unknown   Complaint #		bias assification lassification	POLICE INVOLVED:  1- City/Municipal Police  2- County Police  3- State Police  4- Federal Police  5- Other (specify)  Police shield/ID No.		1- Cour 2- Indif 3- Verb no s 4 Verb slurs 5- Physi	ferent ally abusive/ lurs ally abusive/ scally abusive/ lurs ically abusive/	REPORTED TO POLICE INTERNAL MONITORING AGENCY?  1- Yes 2- No 3- Will report 4- Attempted, not taken 5- Not Available 4- Unknown	
COUNSELING:  1- Hotline counseling 2- Peer counseling 3- Short-term professional counseling 4- Support group	ADVOCACY:  5- CVB advocacy  6- Housing advocacy  7- Legal advocacy  8- Medical/hospital advocacy  9- Police advocacy  10- Other advocacy	14  Hospit 15  Police	y follow-up follow-up	COMMUNITY OR  16 Letter writing, phone zap  17 March/demo  18 Court presence 19 Seeking assists elected official	petitions/	22- Emery 23- Medic 24- Statis 25- Refer 26- Other	claim filing monitor Court Date: gency AVP funds a contact/advocacy stics only	
AVP counseling  AVP peer counseling  AVP Safe Bar Project  AVP support group  AIDS service organization  Brooklyn Women's Martial Arts  CCRB/Police Internal Affairs  Community Health Project	DA's L/G liaison Bara:  Division of AIDS Services  DOH/Office of Lesbian + Gay Health  DV Hotline/shelter  GLAAD  GOAL (Gay Officers Action League)  Hetrick Martin Institute  Hospital ER/healthcare facility  Housing advocacy  Identity House		Institute for Human Identity  Karate School for Women  Lambda Legal Defense  Lesbian + gay community groups  Lesbian + Gay Community Center  Lesbian + Gay Lawyers Assoc.  Lesbian + Gay Switchboard  Lesbian Switchboard  Local police precinct  Media involvement		NYC Co NYPD B NYS Div Orders SAGE Victims D.A. W	Mental health agency NYC Commission on Human Rights NYPD Bias Unit NYS Division of Human Rights Orders of protection SAGE Victims Services Agency D.A. Witness Aide Service Unit Other (specify)		
CASE STATUS  1- Case open Assigned to: 2- Case closed 3- Case data update—information be 4- Quality status review 5- Case conference presentation 6- Case reassignment Re-assigned to 7- Re-open closed case	elow	MENT	(Staff only)					



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