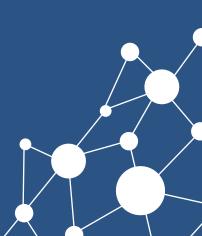


Lesbian, Gay, Bisexual, Transgender, Queer and HIV-Affected Hate and Intimate Partner Violence in 2017

A REPORT FROM THE NATIONAL COALITION OF ANTI-VIOLENCE PROGRAMS



This report was written by the National Coalition of Anti-Violence Programs.

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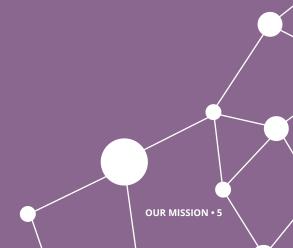
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Mission

The National Coalition of Anti-Violence Programs (NCAVP) works to prevent, respond to, and end all forms of violence against and within lesbian, gay, bisexual, transgender, queer, (LGBTQ), and HIV-affected communities.

NCAVP is a national coalition of local member programs and affiliate organizations who create systemic and social change. We strive to increase power, safety, and resources through data analysis, policy advocacy, education, and technical assistance.



Executive Summary

For the first time ever, NCAVP has opted to combine our two annual reports on intimate partner violence and hate violence.

For the first time ever, NCAVP has opted to combine our two annual reports on intimate partner violence and hate violence, to show more of the full impact of this current era of violence and to situate LGBTQ violence squarely within the context of efforts to address hate violence, sexual violence and harassment in this country. NCAVP's LGBTQ and HIV-Affected Intimate Partner Violence and Hate Violence in 2017 report looks at the experiences of survivors who reported to NCAVP member programs. This hate and intimate partner violence data, in combination with other recent research, is analyzed together in order to better grasp the causes, contexts, and consequences of violence that impacts LGBTQ and HIV-affected communities, and to provide insight on response and prevention strategies.

For the year of 2017, NCAVP collected data about 2,144 survivors of reports of intimate partner violence (IPV) and 825 reports of hate violence (HV).

Key Findings

HATE VIOLENCE REPORTING ON THE DECLINE

Reports of hate violence decreased 20% and have been on a gradual decline since 2010.

NCAVP does not believe this decrease in hate violence incidents reports to be reflective of an actual decrease of hate violence against LGBTQ and HIV-affected peoples. In fact, we have documented a 21-year high in the number of hate violence homicides and there has been an overall increase in reported hate violence to other data collection systems. Two factors have likely contributed to this multi-year decline: a decreased capacity of organizations to collect information due in part, to funding cuts; and the normalization of hate violence among LGBTQ and HIV-affected people.

RECORD NUMBERS OF HATE VIOLENCE HOMICIDES IN 2017

NCAVP recorded 52 reports of hate violence related homicides in 2017, the highest number ever recorded in the 21 years of collecting this data and an 86% increase in single incident reports compared to 2016.¹

Consistent with previous years, people of color and transgender or gender nonconforming (TGNC) people were most often victims of hate violence homicides (71% of victims were people of color, 52% were TGNC, 40% were transgender women of color.) This data marks a five year steady rise in recorded homicides of transgender women of color.

Thirty-eight percent of victims were cisgender men. In 2017, hate violence homicides of cisgender men increased 400% from 2016 (4 reported homicides in 2016 to 20 reported homicides in 2017). Forty-five percent of the homicides of cisgender men were related to hook-up violence, through online hooking up or through personal ads.

INCREASED SEVERITY OF REPORTED VIOLENCE IN 2017

Rates of violence involving weapons, injuries sustained and medical attention sought by survivors increased in 2017 for hate and intimate partner violence.

For survivors of IPV, 48% sustained an injury in 2017 compared to 28% in 2016, 45% reported seeking medical attention in 2017 compared to 20% in 2016, and 23% reported that weapons were used during the incidents of violence in 2017 compared to 12% in 2016. For HV survivors, 46% sustained an injury in 2017 compared to 31% in 2016, 42% reported seeking medical attention in 2017 compared to 23% in 2016, and 27% reported that weapons were used in 2017 compared to 13% in 2016.

HATE VIOLENCE COMMITTED BY PEOPLE WHOM SURVIVORS KNOW

A majority (57%) of hate violence survivors reported that they knew the person who harmed them and they were most often: an employer or co-worker (22%), a relative or family member (21%), and a landlord or neighbor (20%).

This continues a three year trend in which the majority of HV survivors have reported knowing the person who harmed them. In addition, the most common locations hate violence took place were in private residences (29%) or workplaces (24%).



POLICE VIOLENCE

LGBTQ survivors still face the real risk that interactions with the police will be violent or even deadly.

In three out of 52 or 6% of the hate violence homicides recorded in 2017, the victims were killed by police responding to incidents.

Additionally, 43% of hate violence survivors and 60% of intimate partner violence survivors reported interacting with law enforcement. Of the HV survivors, 55% reported that law enforcement was indifferent towards them and 20% reported that law enforcement was hostile. Of IPV survivors, 47% reported that law enforcement was indifferent towards them and 11% reported that law enforcement was hostile. Thirteen percent of HV survivors who reported about interactions with the police also reported police misconduct. Of these, 44% reported excessive force was used. Five percent of IPV survivors who interacted with the police reported experiencing police misconduct and of these, 20% reported excessive force was used.

ACCESSING SERVICES

The services and referrals survivors accessed through NCAVP member organizations point to their greatest needs: safety planning, legal services, mental health counseling, housing security and emergency shelter.

In 2017, 66% of all survivors of IPV and 63% of HV survivors who reported incidents to NCAVP members, accessed safety planning services. High rates of IPV survivors accessed referrals for legal services (30%), mental health counseling (16%), domestic violence (15%) and housing (13%) services. IPV survivors also accessed individual advocacy related to housing (25%), legal (24%) and mental health services (22%). The most common referrals given to HV survivors were for legal services (21%), mental health counseling (21%), housing (10%), shelter (10%) and medical services (10%). The most common types of individual advocacy sought after by HV survivors were related to mental health (17%), housing (15%) and legal services (15%).

Nearly half (43%) of IPV survivors who sought shelter, reported being denied access to shelter and of those, nearly one third (32%) were turned away because of their gender identity.

Key Recommendations

In order to address and prevent the violence that LGBTQ and HIV-affected survivors experience, we recommend the following actions to be taken.



ENCOURAGE REPORTING

Increase efforts to encourage reporting of hate violence, emphasizing multiple reasons and methods for reporting, and increase community-based reporting infrastructure.



INCREASE FUNDING FOR PROGRAMS

Expand state and local funding for LGBTQ-specific and affirming services for survivors of violence.



EXPAND & IMPROVE MEDIA COVERAGE

Increase media coverage of violence impacting LGBTQ and HIV-affected communities beyond hate violence homicides.



PUSH FOR SYSTEMIC CHANGE

Advocate for and implement comprehensive, long-term systemic change that includes affordable housing, non-discriminatory employment, living wage and anti-discrimination policies that transform LGBTQ survivors' access to basic needs.



PRACTICE ALTERNATIVE SOLUTIONS

Support models of creative, community-based solutions to violence that are designed by the most impacted people.

Hate Violence and Intimate Partner Violence: The Current Context

In 2017, LGBTQ and HIV-affected communities in the United States experienced significant backlash, threats and attacks from a newly elected President and a revitalized conservative base.

As soon as they took office, the new administration proceeded to strip away rights from LGBTQ, immigrant and other communities, turning the hateful rhetoric of the campaign trail into dangerous policies and proclamations. By July 2017, the foundation had already been laid for a massive rollback of protections through a series of administrative actions including:

- the Departments of Justice and Education (DOH and DOE) withdrawing guidance for how schools must protect transgender students;
- the Department of Health and Human Services (HHS) eliminating questions about LGBT people from important data collection tools;
- the Census bureau retracting a proposal to collect information about the LGBT people in the 2020 census;
- and the Department of Justice arguing that the Civil Rights Act does not prohibit discrimination based on sexual orientation or gender identity.

The administration's attacks on immigrants, Muslims and other marginalized communities also impacted the LGBTQ community, particularly those already most impacted by violence.

In the midst of a near-constant stream of anti-LGBTQ executive orders, memos, and more, violence against marginalized communities became commonplace. At least thirteen LGBTQ centers across the country, including some organizations that are members of NCAVP, were vandalized or attacked by arson or gunfire in early 2017. Racist and anti-LGBTQ hate groups such as neo-Nazis became increasingly emboldened throughout the year. In October 2017, a mass "Unite the Right" march of white supremacist groups in Charlottesville, NC resulted in the hate violence homicide of a young woman who was run over when a man plowed his car into a crowd of counter protesters. And our community watched and counted as the losses of LGBTQ people to hate violence mounted throughout the year. At the start of 2018, NCAVP released a special report, *Crisis of Hate*, to bring attention to the record-breaking number of LGBTQ hate violence related homicides in 2017.

For survivors of hate violence, being targeted because of who they are and how they express themselves has long-term emotional, social, financial, physical, and other consequences.

One study found that survivors of hate violence experience depression, anxiety, anger, and fear for up to five years after their experience, compared to only two years for survivors of non-bias motivated attacks.² LGBTQ and HIV-affected survivors experience higher rates of violence in employment and higher rates of housing discrimination, which contribute to higher rates of poverty, particularly for LGBTQ people of color, LGBTQ people with disabilities, and other marginalized identities. New

The conversation and activism around the #MeToo movement often left out members of the LGBTQ community, despite the fact that LGBTQ people face disproportionately high rates of intimate partner and sexual violence, as compared to cisgender, heterosexual people.

research is beginning to show higher levels of symptoms of trauma, including anxiety, isolation, and fear across LGBTQ communities, regardless of whether an individual has personally experienced a traumatic experience of hate violence.³ For example, one study found that repeated confrontation with daily forms of heterosexist oppression elicits post-traumatic stress disorder among lesbian, gay and bisexual community members who have not directly experienced physical trauma, but still suffer consequences of the threat of violence and the invalidation of their identities.

As hate and discrimination were being codified into policies and fueling violence against community members and safe spaces, violence in relationships in the LGBTQ and HIV-affected communities was on the rise in 2017. Anti-LGBTQ violence interacts with and exacerbates intimate partner violence in LGBTQ communities, yet the connections and interrelationship are rarely discussed. For example, a person who loses their job because of anti-trans bias may be more financially reliant on an unhealthy relationship. Or an abusive partner may use the violence that an LGBTQ person experiences from their family as a way of isolating that person even further. In this polarizing political climate, it is likely that one or more partners in an LGBTQ relationship have experienced some kind of bias, even if that bias did not escalate to the level that they would consider reporting it.

² Bell, J. G., & Perry, B. (2014). Outside Looking In: The Community Impacts of Anti-Lesbian, Gay, and Bisexual Hate Crime. *Journal of Homosexuality*, 62(1), 98-120. doi:10.1080/00918369.2014.957133.

³ Bandermann, K. M., & Szymanski, D. M. (2014). Exploring coping mediators between heterosexist oppression and posttraumatic stress symptoms among lesbian, gay, and bisexual persons. *Psychology of Sexual Orientation and Gender Diversity*, 1(3), 213-224. doi:10.1037/sgd0000044

One bright spot in 2017 was the national outcry and push to spotlight and end sexual violence and harassment. Reenergized by accusations of sexual violence against Donald Trump during the presidential campaign, and further fueled by accounts of sexual assault and violence by celebrities and other well-known figures, the #metoo movement, originally started by activist Tarana Burke, activated thousands of survivors, mainly cisgender women, to share their stories of sexual violence on social media platforms and demand accountability and prevention. This conversation and activism, however, often left out members of the LGBTQ community as sexual and intimate partner violence are generally seen only as cisgender men committing violence against cisgender women, despite the fact that LGBTQ people face disproprtionately high rates of intimate partner and sexual violence, as compared to cisgender, heterosexual people.

For the first time ever, NCAVP has opted to combine our two annual reports on intimate partner violence and hate violence.

This report highlights some of the specific ways that LGBTQ and HIV affected people are impacted by violence, how the systemic discrimination that LGBTQ people experience exacerbates the violence in relationships, and the importance of looking at violence holistically. NCAVP's *LGBTQ* and *HIV-Affected Hate and Intimate Partner Violence in 2017* report looks at the experiences of survivors who reported to NCAVP member programs. This hate and intimate partner violence data, in combination with other recent research, is analyzed together in order to:

- · show more of the full impact of this current era of violence;
- situate LGBTQ violence squarely within the context of efforts to address both hate violence and sexual violence and harassment in this country;
- and to provide insight on response and prevention strategies.

Findings

Homicides of LGBTQ People in 2017

NCAVP recorded 52 reports of hate violence related homicides and 15 reports of intimate partner related homicides in 2017, a record number of hate violence (HV) homicides and consistent reports of intimate partner (IPV) homicides over previous years.

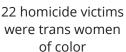
Consistent with previous years, people of color and TGNC people were most often victims of hate violence homicides. This data marks a five year steady rise in recorded homicides of transgender women of color.

In 2017, however, there was a sharp and stark increase in homicides of cisgender men. Hate violence homicides of cisgender men increased 400% from 2016 (4 reported homicides in 2016 to 20 reported homicides in 2017). Forty-five percent of the homicides of cisgender men were related to hook-up violence, and most of these were related to hooking up online or through personal ads.

Guns were used in 28 (59%) of the total number of homicides where information about cause of death is known, including three shootings by police.

Hate Violence Homicides in 2017







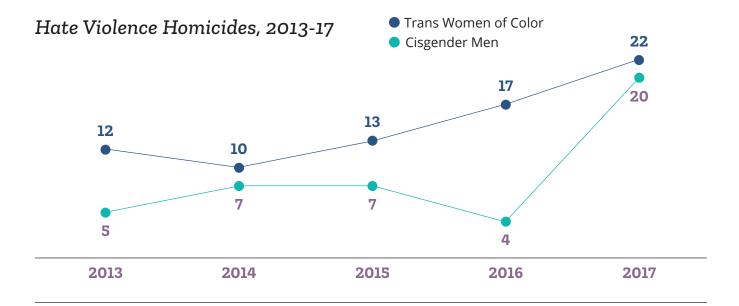
20 homicide victims were cisgender men

- 37 (71%) homicide victims were people of color
- 35 (67%) of victims were 35 years old or younger
- 27 (52%) were transgender or gender non-conforming

Individual Reports of Anti-LGBTQ Homicides, 2011-17



^{*}In 2016, the total number of reports of anti-LGBTQ homicides was 77, including the 49 lives taken during the shooting at Pulse Nightclub in Orlando, Florida. 28 listed here represent the total single-incident homicides.



The number of reports of intimate partner violence homicides in 2017 was slightly higher to the homicides recorded in 2016. Of the 16 IPV homicide reports:

- 9 victims (56%) were cisgender men
- 5 (31%) were cisgender women
- 1 victim (6%) was a transgender man

Neither homicide numbers for intimate partner violence nor for hate violence accurately represent the total numbers of these homicides of LGBTQ and HIV-affected people. Given that it is known that LGBTQ people experience similar if not higher rates of intimate partner violence compared to their cisgender or straight counterparts, it is likely that these numbers only represent a portion of the actual number of IPV related homicides of LGBTQ people.

Often the sexual orientation or gender identity of victims is not shared or is inaccurately cited in media or police reports. Transgender victims are frequently misgendered and deadnamed in media reports. Intimate partner relationships of same gender couples are often reduced to friendships or other relationships, (e.g. "roommates"), essentially making the LGBTQ identities of intimate partner violence homicide victims invisible. Bisexual, gender non-conforming, and other non-binary identities are rarely considered and may not be uncovered or reported. Until LGBTQ identities are counted and affirmed, it will be difficult to know exactly how many LGBTQ people are impacted by homicides related to hate and intimate partner violence. It is vital that data collection systems that track information about homicides take into account the systemic erasure of LGBTQ identities and attempt to create better systems for tracking and understanding both HV and IPV related homicides of LGBTQ people.

For more information on the hate violence related homicides of LGBTQ people in 2017, read the NCAVP Crisis of Hate report at avp.org/crisisofhate.

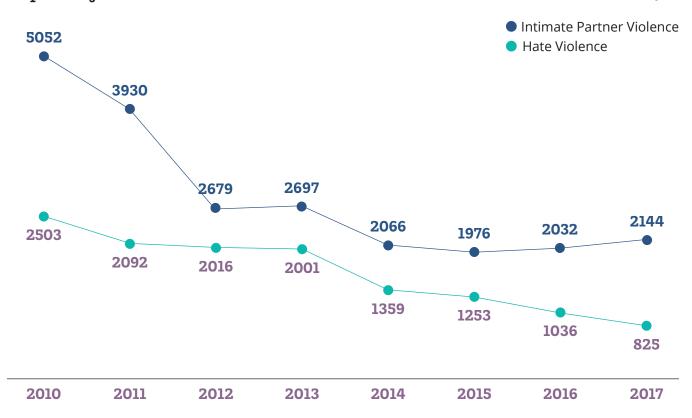
Reporting of Hate Violence to LGBTQ Service Providers Continues Multi-Year Decline, Reporting of Intimate Partner Violence Increasing

NCAVP received 825 reports of hate violence in 2017, a 20% decrease from 1,036 reports in 2016. This number also represents a steady decline in reports of incidents of hate violence since 2010 when NCAVP received 2,503 hate violence reports.

In contrast, the rate of reporting IPV rose almost 6% from 2,032 reports of IPV in 2016 to 2,144 reports of IPV in 2017.

NCAVP does not believe this decrease in hate violence homicides to be reflective of an actual decrease of hate violence against LGBTQ and HIV-affected peoples. In fact, these numbers have been recorded in a year in which we have documented a 21-year high in the number of hate violence homicides and there has been an overall increase in reported hate violence to other data collection systems. There are several factors that have likely contributed to this multi-year decline, including: a decreased capacity of organizations to collect information due in part to funding cuts; and the normalization of hate violence among LGBTQ and HIV-affected people.

Reports of Hate Violence and Intimate Partner Violence Incidents, 2010-17

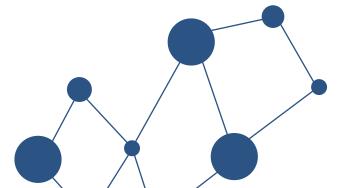


DECREASED CAPACITY OF ORGANIZATIONS

One important factor in the seven-year trend in decreased reporting of HV incidents to NCAVP member organizations is a decrease in number of organizations tracking and -reporting this data. In 2010, the 1036 reports of HV incidents were compiled from 17 reporting organizations, while this year's 825 reports are compiled from only 10 organizations. Over the years, less organizations have been able to sustain their ability to collect and report on hate violence due to lack of funding and other organizational resources. Data collection and reporting is staff and time-intensive, and when faced with the need to make difficult cuts, groups are more likely to reduce this work, rather than cutting direct services for survivors. Some groups have also experienced funding cuts that limit their ability to conduct the important outreach that notifies survivors of their services, thus reducing the number of survivors accessing services and reporting. There is also a link to accessing services and reporting incidents of violence. Funding cuts impact a group's ability to provide direct services to HV survivors. Without the opportunity to access services, survivors may have fewer interaction with NCAVP member organizations, and therefore do not report incidents to these groups.

NORMALIZATION OF HATE VIOLENCE

A second factor that may be impacting the number of hate violence reports is the normalization of hate violence, especially those incidents that are less severe and do not involve physical violence, require medical attention, or other support. Normalization refers to social processes through which ideas and actions come to be seen as 'normal' and become taken-for-granted or 'natural' in everyday life. There have been numerous articles written recently that point to the way hate speech, rhetoric, and hate-based policies of the Trump administration have contributed to the normalization of hate violence in the United States. One result of normalization can be that survivors come to expect and accept hate violence, making them less likely to report or seek services. NCAVP data shows that in 2017, a greater portion of HV incidents reported to member organizations were severe enough to result in physical injury to survivors. In 2017, nearly half (46%) of all HV incidents reported resulted in injury, compared to 31% of incidents reported in 2016 causing injuries. While this could mean that the severity of incidents overall has increased, it may also be due to normalization, making survivors less likely to report less severe incidents.



Types of Violence and Bias Experienced by Hate Violence and Intimate Partner Violence Survivors

Hate and intimate partner violence survivors who reported to NCAVP organizations experienced similar types of violence and bias.

TYPES OF VIOLENCE

In 2017, both hate and intimate partner violence survivors most commonly reported experiencing verbal harassment (17% of HV survivors and 19% of IPV survivors). Other types of violence frequently experienced by HV and IPV survivors included physical violence (10% of HV survivors, 16% of IPV survivors), threats and intimidation (13% of HV and 11% of IPV survivors) and harassment via a telephone or online (5% of HV survivors and 6% of IPV survivors). Additionally, hate violence survivors experienced significant rates of discrimination (10%) and bullying (9%). Both IPV and HV survivors often experienced more than one form of violence in the incident(s) they reported.

Some groups of survivors were disproportionately likely to experience particular types of violence:

- Transgender women who experienced IPV were nearly two and a half times more likely to experience sexual violence and nearly four times more likely to experience financial abuse than survivors who did not identify as transgender women.
- Black survivors of hate violence were three times as likely to experience sexual violence and twice as likely to experience threats and intimidation compared to non-black survivors.
- Additionally, cisgender men surviving hate violence were nearly four times more likely to report experiences of sexual violence than survivors who did not identify as cisgender men.

BIASES

NCAVP collects information on the types of social biases that are used in intimate partner violence relationships as well as in hate violence incidents. Survivors are able to choose more than one type of bias. Of the total 682 responses about social bias in IPV incidents, the most common bias used against survivors was heterosexist or anti-LGBTQ bias (37%). Other types of biases used against IPV survivors included anti-transgender bias (33%), HIV/ AIDs related bias (8%), anti-immigrant bias (7%), and anti-sex worker bias (4%). Survivors of hate violence also most commonly identified the bias used against them as heterosexist or anti-LGBTQ bias (60%), followed by anti-transgender bias (17%), religious bias (7%), racist bias (4%), and anti-sex worker bias (3%).

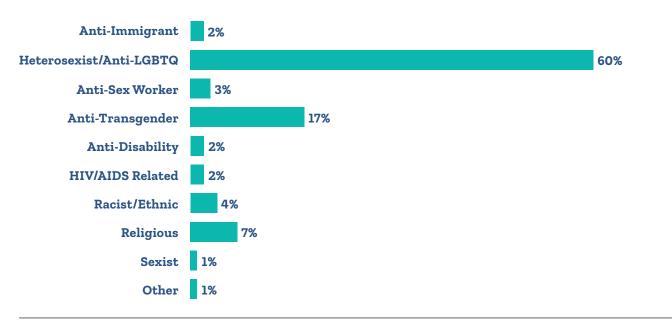
Type of Violence in Reported Hate Violence in 2017[†] Type of Violence in Reported Intimate Partner Violence in 2017[†]



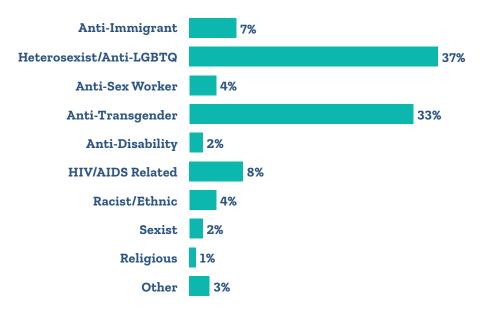
[†] For these variables, survivors were able to choose more than one answer choice. The numbers and percentages reflect the total number of responses to this variable rather than respondents.

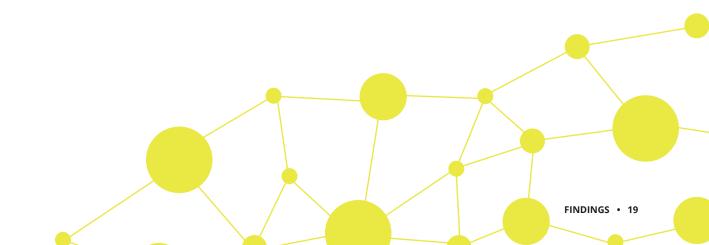
^{*} Violence types included a number of other types of violence that represented less than tone percent of the total responses, including but not limited to murder, attempted murder, blackmail, medical violence, and eviction.

Types of Bias in Reported Hate Violence in 2017



Types of Bias in Reported Intimate Partner Violence in 2017

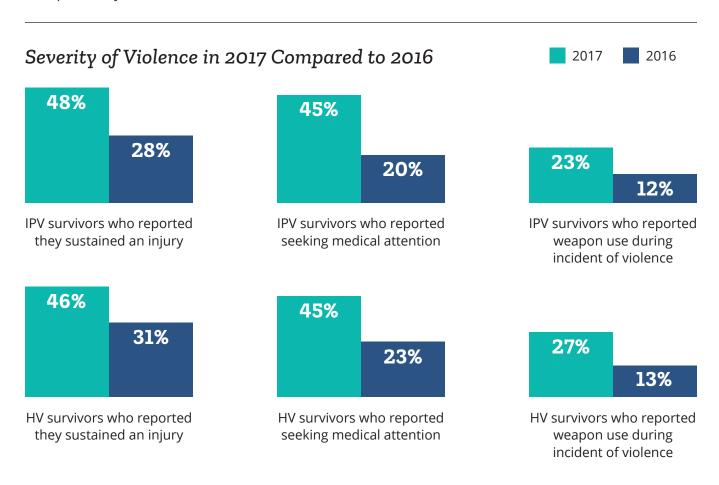




Severity of Violence Reported

Incidents of IPV and HV reported to NCAVP in 2017 appear to be more severe than those reported in 2016 as indicated by increased rates of injuries sustained, rates of survivors seeking medical attention, and higher rates of incidents in which weapons were used.

Of both HV and IPV survivors who reported information on whether or not they were injured, nearly half sustained some type of injury during the incident of violence and rates of reports of injuries were at the highest level recorded by NCAVP for several years. Reports of use of weapons in HV and IPV incidents and survivors seeking medical attention after incidents of violence were also higher than previous years.



Who Harms LGBTQ People, and Where Does Violence Happen?

Though it is obvious that in intimate partner violence incidents, the person doing the harm is known to the survivor, a majority of survivors of hate violence reported they knew the person who harmed them and the incidents occurred someplace they frequent, like at work or at home.

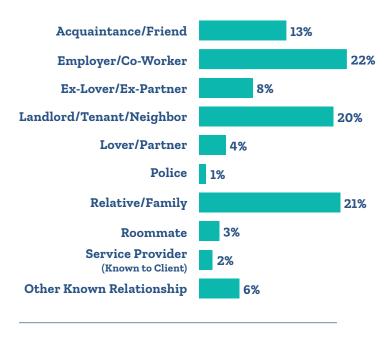
Of the 775 hate violence survivors who reported information about their relationship to the person or persons who perpetrated hate violence against them, 57% knew the person(s). This continues a three year trend in which the majority of HV survivors have reported knowing the person who harmed them. Consistent with previous reports, the most common known relationships were an employer or co-worker (22%), a relative or family member (21%) and a landlord or neighbor (20%).

- Survivors of color were three times more likely to experience violence by an employer or coworker compared to white survivors.
- Cisgender men were three times as likely to experience violence by strangers compared to survivors who did not identify as cisgender men.

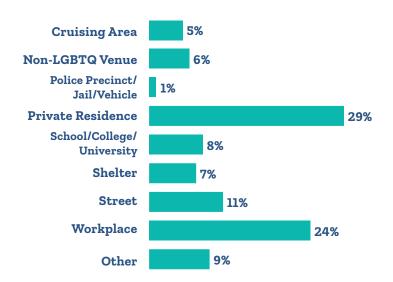
NCAVP reports consistently demonstrate that LGBTQ people experience hate violence in the everyday places where they live and work. The most common location was in private residences (29%) followed by the workplace (24%). Additionally, 11% of survivors reported experiencing hate violence on the street, 8% on a school or university campus, and 7% experienced violence in a shelter.

 Transgender women were nearly three times more likely to experience violence on the street compared to survivors who did not identify as transgender women.

Relationship Types of Known Offenders to Survivors of Hate Violence in 2017



Hate Violence Incident Locations in 2017



The most common relationship between an IPV survivor and the abusive person were ex-lover or ex partners (45%), followed by current lover or partner (31%). Other relationships between the survivor and abusive person included an acquaintance or friend (6%), relative or family member (6%) and landlord or neighbor (3%).

- Survivors who identified as lesbian were five times more likely to report experiencing violence by a current partner compared to survivors who identified with other sexual orientations.
- Native survivors were nearly two and a half times more likely to report experiencing violence from an ex-partner or lover compared to survivors of other races or ethnicities.
- Survivors with disabilities were twice as likely as survivors without disabilities to report experiencing violence by a landlord or neighbor.



In 2017, a significant percentage of all LGBTQ survivors reporting to NCAVP programs continue to report having negative interactions with law enforcement.

Of the survivors who shared information about their interactions with police to NCAVP member programs in 2017, 43% of hate violence survivors reported interacting with law enforcement in some way as a result of the violence that they had experienced. A majority of intimate partner violence survivors (60%) reported interacting with law enforcement in 2017, compared to 39% of IPV survivors in 2016. NCAVP members did not collect information on whether or not survivors actively called law enforcement.

In terms of reports of police misconduct, forty-seven (13%) HV survivors who reported on interactions with the police also reported police misconduct. Of these, 44% reported excessive force was used and 56% reported being unjustifiably arrested. Fifty-four (54%) of IPV survivors who interacted with the police reported experiencing police misconduct. Of these, 20% reported excessive force and 80% reported unjustifiable arrest.

It is important to note that in 6% of the documented hate violence related violence homicides (or 3 of 52), the victims were killed by police responding to incidents.



HV survivors who reported law enforcement was courteous



HV survivors who reported law enforcement was indifferent



HV survivors who reported law enforcement was hostile



IPV survivors who reported law enforcement was courteous



IPV survivors who reported law enforcement was indifferent



IPV survivors who reported law enforcement was hostile

Accessing Services

A majority of all survivors accessed safety planning services from NCAVP member organizations. The services and referrals survivors accessed through NCAVP member organizations point to their greatest needs: safety planning, legal services, mental health counseling, housing security and emergency shelter.

NCAVP collects information about the direct services, referrals, and advocacy support LGBTQ and HIV-affected survivors access through member organizations. Many of the services survivors need, such as domestic violence shelters, counseling, and legal services, have not historically been inclusive of, or accessible to, LGBTQ communities. The most common service that LGBTQ survivors of IPV and HV accessed from NCAVP member organizations was safety planning. A safety

plan is a personalized, practical plan that can help a survivor avoid and or navigate a dangerous situation. Often safety planning is accessed when a survivor is in immediate crisis. In 2017, 66% of all survivors of IPV and 63% of HV survivors who reported incidents to NCAVP members, accessed safety planning services.

Survivors also accessed referrals and individual advocacy support. The most common referrals for IPV survivors were for legal services (30%), mental health counseling (16%), domestic violence (15%), and housing (13%) services. And the most common types of individual advocacy received by survivors of

Housing and job instability are not only systemic forms of violence, but also make LGBTQ people more vulnerable to other forms of violence by limiting their choices and making them more likely to rely on precarious situations.

IPV were related to housing (25%), legal (24%), and mental health services (22%). The most common referrals given to HV survivors were for legal services (17%), mental health counseling (15%), housing (10%), shelter (10%), and medical services (10%). The most common types of individual advocacy sought after by HV survivors related to mental health (17%), housing (15%), and legal services (15%).

Thirteen percent of IPV survivors reported attempting to access shelter, yet nearly half (43%) of those survivors reported being denied access to shelter. Of IPV survivors who reported being denied shelter, nearly one third (32%) were turned away because of their gender identity. And for some survivors who did access shelter, they experienced violence and discrimination in those shelter programs.

- Bisexual IPV survivors were nearly two times as likely to report experiencing violence or discrimination in a shelter, compared to survivors who did not identify as bisexual.
- Transgender women who were IPV survivors were nearly two and a half times more likely to experience violence in a shelter, compared to survivors who did not identify as transgender women.

Recommendations and Discussion

In order to address and prevent the violence that LGBTQ and HIV-affected survivors experience, we need to take the following measures:

Increase efforts to encourage reporting of hate violence, emphasizing multiple reasons and methods for reporting and increase community-based reporting infrastructure.

NCAVP believes that reporting and documenting violence can help address violence and prevent future incidents. Reporting can help survivors get the support they need, like safety planning and counseling, to help break the cycle of violence. Reporting can help advocates notice trends that may lead to proposed solutions to prevent incidences of violence. Reporting gives us critical data than can help shape policy recommendations and influence policy makers. Reporting can tell critical stories that shape public opinion and encourage individuals to take action. And reporting can serve additional purposes for survivors and communities.

Despite an increasingly hostile environment for LGBTQ and HIV-affected communities in the United States and some evidence of increased hate violence nationally, NCAVP found that this year the number of reports to NCAVP mewmber programs of hate violence against LGBTQ people went down, continuing a five year decline. Hate violence homicides of LGBTQ people, however, hit a record high. And reports of LGBTQ intimate partner violence increased overall.

A significant factor in this decline has been the decrease of member organizations able to collect and compile this data pool. Only 10 NCAVP member organizations were able to contribute to this data set this year due to reduced resources and organizational capacity, as compared to 17 member organizations reporting in 2010.

As organizations are forced to respond to the increased needs of survivors in their communities with less, they are often forced to make the difficult decision to prioritize direct services over data collection. Because NCAVP is the only source for this degree of incident-level data on hate violence, more funding and support is needed to increase the infrastructure of anti-violence organizations so they can continue playing this vital role.

There also appears to be a degree of normalization of the hate violence that LGBTQ people experience. For example, LGBTQ survivors may not report a one-time experience of violence, but may wait until the violence reaches a certain level of severity that they deem as impactful enough. NCAVP found that of the incidents that were reported in 2017, more involved a weapon, resulted in an injury, or required medical attention, indicating that while reports decreased in number, the severity of the violence that people were reporting increased.

NCAVP members shared that although hate violence reports decreased, they have experienced an increase in overall number of hotline calls for general support, including emotional support around fear of experiencing discrimination and violence as well as legal advice, particularly for undocumented LGBTQ people. A national survey of 841 LGBT adults showed that almost two-thirds of respondents reported feeling less safe because

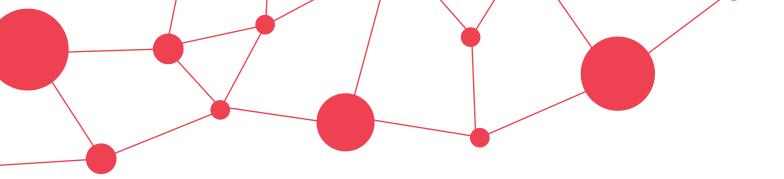
NCAVP members shared that although hate violence reports decreased, they have experienced an increase in overall number of hotline calls for general support, including emotional support around fear of experiencing discrimination and violence as well as legal advice, particularly for undocumented LGBTQ people.

of their sexual orientation or gender identity since Donald Trump has taken office.⁵

It is abundantly clear that the decreased hate violence numbers are not the result of an improved environment for LGBTQ and HIV-affected people, especially as providers report that many survivors come in seeking help around IPV and, after receiving services, later mention experiences of hate violence, such as housing or job discrimination. Rather, this data suggests that what is needed is greater education and emphasis on the importance of reporting hate violence and increased support for LGBTQ anti-violence organizations to improve their data collection tools

and increase capacity. One important message that needs to be conveyed is the importance of reporting incidents even if survivors do not need or want to access services or the criminal legal system. Educational efforts should also include allies and bystanders, encouraging them to actively report incidents they witness.

Organizations collecting data also need additional and consistent resources so that reporting and data collection can be maintained alongside their other work. Increased tools such a better use of technology such as simple online reporting and texting options can also make reporting more convenient and immediate.



Expand state and local funding for LGBTQ-specific and affirming services for survivors of violence.

Since President Trump took office in January 2017, there have been efforts to pass sweeping anti-LGBTQ bills and to rollback protections and funding for LGBTQ-affirming services and programs, leaving LGBTQ HIV-affected communities vulnerable to identity-based discrimination and sending the message that discriminating against LGBTQ people based on their identity and self-expression is both acceptable and legal.

An environment of violence and discrimination, as well as dwindling resources and support systems for LGBTQ people, has had an impact on the prevalence and severity of intimate partner violence in LGBTQ relationships. NCAVP found that the number of reports of LGBTQ IPV went up in 2017. We must acknowledge how this current political climate of stress and hostility has rendered our communities more vulnerable to multiple kinds of violence, including violence community

members enact on one another, with fewer support systems to recover from and prevent that violence. This has also had an effect on advocates and service providers, many of whom share impacted identities with their clients, are survivors themselves, and have reported experiencing more stress and less capacity to support survivors. Finally, the impact of the anti-LGBTQ bias coming from the federal government has also resulted in a loss of funding for many anti-violence programs.

When violence occurs, survivors must have access to culturally responsive, inclusive, and affirming reporting mechanisms, services, and healing spaces, to ensure that they can re-establish safety and move forward. While federal resources are being cut or eliminated, state and local municipalities must step up to help fill the void and provide additional resources to help address and prevent violence in the LGBTQ and HIV-affected communities.

⁶ Lopez, G. (2018, January 22). Trump promised to be LGBTQ-friendly. His first year in office proved it was a giant con. Retrieved from https://www.vox.com/identities/2018/1/22/16905658/trump-lgbtq-anniversary

Increase media coverage of violence impacting LGBTQ and HIV-affected communities beyond hate violence homicides.

We have seen over the past years the power the media can have in elevating the crisis of hate violence homicides of TGNC people, particularly transwomen of color. While we are still far from curbing this epidemic or even building a concerted national commitment to addressing this hate violence, the media spotlight has increased the attention paid to these homicides and the seriousness with which activists and advocates are taken, as we call for effective solutions.

The issues of violence in our country and the violence experienced by the LGBTQ and HIV-affected communities are complex and so must be our examination of the causes and solutions needed to curb and end violence. This first report combining data on hate violence and intimate partner violence shows the interrelationship between these forms of violence that happen both against and within the LGBTQ and HIV-affected communities.

In order to understand violence, it's important to recognize the context in which hate and intimate partner violence manifest. Both are compounded at the intersections of various forms of oppression such as homophobia, biphobia, transphobia, racism, ableism, ageism, sexism, classism, anti-immigrant bias, anti-sex worker bias, and anti-HIV bias, causing those who hold multiple marginalized identities to experience disproportionate rates of violence. Incidents of violence against LGBTQ communities occur within these systems of oppression, which are historical and institutional, and also manifest in interpersonal relationships. These forms

of oppression also create barriers which limit LGBTQ and HIV-affected survivors'—and IPV survivors'— access to necessary resources such as safety planning, crisis intervention, supportive counseling, health care, law enforcement support, legal remedies, shelter, and housing.

We challenge media professionals to find ways to more fully report on and explore these and other issues related to violence against and within LGBTQ and HIV-affected communities. By solely focusing on counting and recording hate violence homicides, we are not representing the extent to which violence impacts these communities.

Media professionals should report on nonfatal hate violence incidents in their communities and look for patterns of violence locally and nationally. They should also develop more indepth stories about intimate partner violence, state violence and other forms of violence and discrimination alongside and in addition to hate violence. They should develop relationships with local and national LGBTQ and HIV-affected activists, service providers and advocates to ensure that reports center survivors of violence, allow them to tell their own stories and discuss solutions, community strength, and resilience. And they should highlight the life-saving work being done across the country to support survivors, change policies and create safety for LGBTQ community members. In all of this, they should use affirming language to describe LGBTQ identities, using accurate names, pronouns, and identities when referencing survivors or victims. Misgendering and deadnaming survivors and victims compounds violence.

Advocate for and implement comprehensive, long term systemic change that includes affordable housing, a living wage and non-discrimination policies that transform LGBTQ survivors' access to basic needs.

NCAVP data shows that people with multiple marginalized identities are more vulnerable to violence, as well as people who are economically insecure. To end and prevent violence against LGBTQ people, we need to ensure that individuals are less vulnerable.

High rates of discrimination against LGBTQ and HIV-affected people in housing and employment has material effects on survivors' lives. Housing and job instability are not only systemic forms of violence, but also make LGBTQ people more vulnerable to hate violence.

Housing discrimination and underemployment also affect LGBTQ people's intimate partner relationships, and can exacerbate LGBTQ people's experience of IPV. LGBTQ people are particularly vulnerable to verbal harassment and financial abuse as power and control tactics in IPV, as they experience higher rates of bias motivated violence in other areas of their lives, such as in their families, workplaces, and schools. Because of housing and job insecurity, LGBTQ people may also be forced to rely on abusive partners financially, including for housing.

This dynamic does not affect all survivors equally. NCAVP found that transgender women were nearly four times more likely to experience financial abuse than survivors who did not identify as transgender. Furthermore, transgender women were nearly two and a half times more likely to experience violence in a shelter making them not only more vulnerable to experiencing sexual violence and financial abuse, but they also are more likely to experience violence even when seeking support.

NCAVP data points to the fact that solutions to violence must be comprehensive, long-term and systemic. Non-discrimination protections are crucial to the well-being and support of LGBTQ survivors of violence. In order to address both hate violence and intimate partner violence, advocates must seek to pass non-discrimination protections that ensure LGBTQ people easier access to housing and economic security. Governments must develop an interdisciplinary approach to responding to and preventing violence in order to meet the myriad of needs and ways multiple forms of violence and oppression affect and impede the healing of the most impacted LGBTQ survivors.

Many member organizations believe that enacting stiffer punishment for perpetrators of hate violence is not the key to healing communities impacted by bias-motivated violence.

Support models of creative, community-based solutions to violence that are designed by the most impacted people.

LGBTQ and HIV-affected communities have historically and continually experienced discriminatory policing and police violence, in fact, resistance to discriminatory policing was a major part of the birth of the modern-day LGBTQ rights movement. NCAVP data has consistently shown that of the portion of survivors who interact with police, many continue to report those interactions as negative and sometimes re-victimizing and retraumatizing. LGBTQ people experience high rates of violence and discrimination within all branches of the criminal legal system. This leads to mistrust in law enforcement, courts, and the prison system, and fewer survivors seeking help or accountability through the criminal legal system.

Pushing for recognition of incidents of hate violence as "hate crimes" and demanding enhanced penalties for hate violence was once a major focus of the LGBTQ anti-violence movement, because of the inherent injustices within the criminal legal system. Yet, many NCAVP member organizations' positions concerning hate crimes legislation and criminalization is evolving. There is a growing understanding that increasing criminal penalties

for hate crimes does not reduce anti-LGBTQ bias or violence. Many member organizations believe that enacting stiffer punishment for perpetrators of hate violence is not the key to healing communities impacted by bias-motivated violence. Furthermore, increased penalties are applied disproportionately for people of color and other people with marginalized identities.

While strides have been made in addressing biased policing, and it is imperative to continue to work towards reforming the criminal legal system, many groups are turning to other solutions to address violence that do not inflict more violence on individuals and communities. Additional community-based solutions to violence must be designed and supported. These solutions do not always rely on laws or elected officials to create safety, and often incorporate restorative and transformative justice practices to build safety and accountability. Efforts to envision, practice and evaluate these solutions, especially those led by survivors, need to be included in comprehensive prevention plans and must be resourced in order to build successful, replicable models.

Conclusion and 2018 Homicide Preview

This report highlights some of the unique ways that LGBTQ and HIV affected people are impacted by violence, how the systemic discrimination that LGBTQ people experience exacerbates violence in relationships, and the importance of looking at violence holistically.

While many of the tactics of IPV reported here are common in all IPV relationships, they have unique impacts on LGBTQ and HIV-affected survivors who experience systemic inequities and other forms of bias motivated violence. This is especially true for those who hold additional marginalized identities, such as LGBTQ people of color, LGBTQ people with disabilities, and LGBTQ immigrants. It is imperative that these broader social and cultural impacts are a part of the conversation when discussing and addressing hate violence and IPV impacting LGBTQ and HIV affected communities.

We cannot afford to ignore LGBTQ IPV, and the impact on these marginalized communities—rather, we must look to cultivate discussion around how hate violence and systemic discrimination impacts LGBTQ communities' ability to negotiate safety in relationships, to recognize unhealthy relationship dynamics, what healthy relationships can look like in LGBTQ communities, and how we can work to address LGBTQ IPV within and as a vibrant, diverse community.

Hate violence against LGBTQ and HIV-affected communities is complex and takes on many different forms. This year's findings once again show that LGBTQ people of color, transgender and gender nonconforming people, and cisgender men are severely impacted by hate violence. The 2017 findings highlight the importance of expanding the narrative of violence from singular acts of homicide and extreme physical violence to include the everyday and more insidious violence that occurs in workplaces, homes, and schools as well as the importance of reporting and collecting data on the wide range of types of violence that impact LGBTQ and HIV-affected communities.

Finally, as our conversation and analysis of violence expands and deepens, so must our strategies to address and end violence.

Comprehensive and community-based solutions that incorporate and are based in restorative and transformative justice need to be developed, invested in and evaluated.

While this report represents data from 2017, policy and other attacks on the LGBTQ and HIV-affected communities have continued in 2018, as have incidents of hate and intimate partner violence. Early data on homicides indicate a decrease in reported homicides in 2018, yet continued violence impacted LGBTQ people with multiple marginalized identities.

As of December 2018, NCAVP has recorded seven intimate partner violence related homicides and 33 hate violence related homicides. Of these, four of the IPV victims and 27 of the HV victims were people of color*, one IPV victim was transgender, 27 HV homicide victims were TGNC and 23 HV homicide victims were transgender women of color.

^{*} The racial identities of one IPV and two HV homicide victims remains unknown to NCAVP at this time.

Overall Demographics of Survivors

Sexual Orientation

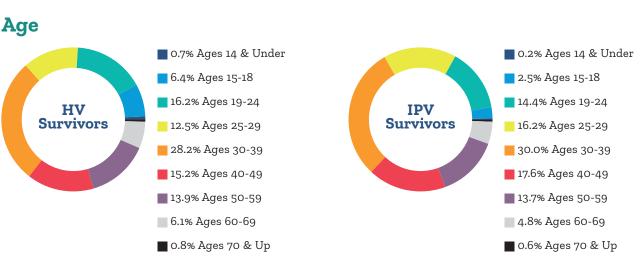
The largest group reporting HV or IPV to NCAVP member organizations identify as gay.



Gender Identity

Cisgender men remain the largest group reporting hate violence or intimate partner violence to NCAVP member organizations.





Race and Ethnicity

A majority of all survivors reporting intimate partner violence or hate violence identified as people of color. Survivors were able to choose more than one racial or ethnic identity. For example, a survivor could choose both Black/African American and Latinx. Of the survivors who reported experiencing intimate partner violence, 59% identified as people of color and 39% identified as white. For identities of color, the most commonly selected identity was Latinx (27%) and Black (21%). Of the survivors who reported experiencing hate violence, 57% chose identities of color and 35% identified as white. Of those people of color, 22% identified as Black and 21% identified as Latinx. Of those survivors who reported information on their citizenship status, 7% of those who reported experiencing intimate partner violence and 11% of those who reported hate violence were undocumented.



Disability and HIV Status

In 2017, 44% of the survivors of intimate partner violence and 38% of the survivors of hate violence reported having a disability. Of the survivors who reported experiencing intimate partner violence and reported living with a disability, 48% reported having a mental health disability, 37% had a physical disability, and 12% had a learning disability. Of the survivors who experienced hate violence and reported living with a disability, 52% had a mental health disability, 29% had a physical disability, and 14% had a learning disability. Of those who reported information on HIV status, 38% of those who reported experiencing intimate partner violence and 35% of those who experienced hate violence reported being HIV positive.



Immigration Status

In 2017, 77% of the survivors of hate violence identified as United States citizens, 17% identified as undocumented and 2% identified as permanent residents. Of IPV survivors, 78% identified as United States' citizens, 7% were undocumented and 4% identified as permanent residents.

Methodology

Data Collection

NCAVP collected both aggregate and incident level data from local member organizations for this report. Organizations collected this information either directly from survivors or public sources. Survivors contacted LGBTQ and HIV-affected anti-violence programs by contacting a program or hotline, filling out surveys, connecting through community outreach or organizing, or making a report online. Most NCAVP member programs used NCAVP's Uniform Incident Reporting Form (see Appendix 1) to document the demographics of survivors and the details of the violence that occurred. Some

organizations have adapted and incorporated the form into other data collection systems.

Incident level data allowed NCAVP to anonymously analyze multiple variables about one victim or survivor in connection to their specific race, gender identity, sexual orientation, or age subcategory.

NCAVP collected data on 825 incidents of hate violence against LGBTQ and HIV-affected people from 10 local NCAVP member organizations in 10 states and 2144 incidents of intimate partner violence affecting LGBTQ and HIV-affected people from 14 local NCAVP member organizations in 11 states.

Data Compilation and Analysis

The majority of the information in this report was analyzed in Microsoft® Excel by aggregating the totals of each category across member organizations. In some instances, survivors were allowed to select more than one answer to a question so as to best represent their identities and experiences. For example, NCAVP allowed individuals to select more than one category when identifying their race. For these categories, the n value, or total, represents the number of

responses, rather than the number of respondents for each question, with unknowns or undisclosed responses removed unless stated otherwise.

NCAVP selected statistics for publication based upon their relevance and with 95% confidence intervals, listed with the odds ratios. Additional data not included in the report may be available upon request by contacting NCAVP. In order to protect survivor confidentiality, not all information is available to the public.

Limitations of the Findings

This report uses a convenience sample of LGBTQ and HIV-affected survivors of hate and/or intimate partner violence who sought support from NCAVP member programs, as well as information collected from public records. Since NCAVP only analyzes data collected from individuals who self-reported and from other public sources, the information presented is not representative of the experiences of all LGBTQ and HIV-affected survivors of hate violence or intimate partner violence in the United States. NCAVP's data may omit populations such as incarcerated people, people in rural communities, people who may not know about their local NCAVP member organization, people where the closest NCAVP member organization is too far away to reach, and people who face other barriers to accessing services or reporting. Therefore, while the information contained in this report provides a detailed picture of the individual survivors who reported to NCAVP member programs, it cannot and should not be extrapolated to represent the overall LGBTQ and HIV-affected communities in the United States.

NCAVP members' capacity for data collection varied based upon the program's resources, staffing, available technology, and other factors. These considerations resulted in some programs submitting partial information in some categories, which creates incomplete and dissimilar amounts of data for different variables within the 2017 data set. Moreover, because of the nature of crisis intervention and direct service work that is done, as data is collected through NCAVP's incident form, missing values are common. Missing values do not affect the accuracy of the data and data analysis as long as individuals are omitting information at random. This can, however, affect the accuracy

of the data if certain survivors are uncomfortable with disclosing information on race, gender identity, or other characteristics because they belong to a specific subcategory of interest (i.e. if gender nonconforming individuals consistently left their gender identity blank) and therefore are not omitting information at random. Bias can also be introduced if individuals who completed the incident forms had different definitions and protocols for the same categories. These variations can exist between staff at the same program or staff at different organizations.

In addition, not all NCAVP member organizations can collect data in the same way. NCAVP member organizations receive instructions on data collection and technical assistance to help ensure that data is both accurate and reliable. Some NCAVP members have more capacity (i.e., staff, volunteers, and time) to collect aggregate and person-level data, as well as conduct outreach to educate and inform LGBTO and HIV-affected survivors of their services, thereby increasing reporting. Some organizations have less capacity and are unable to submit both aggregate and person-level data. This disparity reflects the historic lack of funding, resources and capacitybuilding for LGBTQ and HIV-specific organizations, particularly those outside of urban areas. NCAVP is working to increase the capacity to report for all member programs throughout the United States and to increase funding and capacity-building support for these programs. NCAVP's efforts to improve and increase data collection among member programs and affiliates are ongoing. Despite these limitations, this report contains some of the most detailed and comprehensive data on LGBTQ and HIV-affected hate violence and intimate partner violence nationally

Definitions in This Report

BISEXUAL

Those who are sexually and/or romantically attracted to two or more genders.

CISGENDER

Used to describe an individual whose self-perception of their gender matches the sex they were assigned at birth.

DEADNAME

The act of using the birth name of a person who no longer uses that name (can also be used as a noun).

GAY

describes a person who is sexually and/or romantically attracted to people of the same gender identity. Increasingly, the term is used to describe someone who identifies as a man who is primarily or exclusively attracted to other people who identify as men. It is also sometimes used as an umbrella term to describe LGBTQ communities.

GENDER IDENTITY

Describes how a person identifies their gender. A person's gender identity may be different than social norms and/ or stereotypes of the sex they were assigned at birth. There are a wide range of gender identities, including identifying as a man, woman, transgender, genderqueer, and/ or identifying as gender nonconforming. Gender identity is not static and can change over time.

GENDER NON-CONFORMING

Describes a person whose gender expression is different from the societal expectations based on their assigned sex at birth.

HATE VIOLENCE

What defines hate violence, in comparison to other forms of violence, is that hate violence explicitly targets people and groups based on their actual or perceived identities. Many LGBTQ and HIV-affected people hold multiple marginalized identities, such as LGBTQ and HIV – affected people who are immigrants, are people of color, or have disabilities, and are at risk of multiple and unique forms and consequences of hate violence. The identity-based nature of hate violence contributes to the severity of the attacks and their aftermath.

HETERONORMATIVE

A viewpoint that expresses heterosexuality as a given instead of being one of many possibilities for a person's sexual orientation.

HIV-AFFECTED

Describes HIV positive people, people living with HIV/AIDS, partners, friends, lovers, family members, and communities that are impacted by HIV/AIDS.

HOOK UP VIOLENCE

Violence that occurs in the context of dating or hooking up for sex, through personal ads, meeting up at LGBTQ venues, or increasingly through apps or online dating sites. This can include people targeting LGBTQ people through false profiles, then robbing them and/or harming them through physical or sexual violence.

INTIMATE PARTNER VIOLENCE

A pattern of behavior where one intimate partner coerces, dominates, or isolates another intimate partner to maintain power and control over the partner and the relationship." IPV may be perpetrated in many different ways, including: psychological/emotional abuse, economic abuse, physical abuse, verbal abuse, sexual abuse, cultural abuse, isolation, and intimidation.

LESBIAN

Describes a person who identifies as a woman who is primarily or exclusively sexually and/or romantically attracted to other people who identify as women.

MISGENDER

Intentionally or unintentionally using incorrect pronouns when referring to a person.

QUEER

A political and sometimes controversial term that some LGBTQ people have reclaimed. Used frequently by younger LGBTQ people, activists, and academics, the term is broadly inclusive, and can refer either to gender identity, sexual orientation or both. It is also sometimes used as an umbrella term to describe LGBTQ communities.

NON-BINARY

Describes a person who identifies outside a binary gender context, who identifies as neither a man nor a woman.

RESTORATIVE JUSTICE

A theory of justice that emphasizes repairing the harm inflicted on individuals or communities by violent behavior. It is best accomplished through cooperative processes that allow all willing stakeholders to meet, although other approaches are available when that is impossible. This can lead to the ransformation of people, relationships and communities (via restorativejustice.org).

SEXUAL ORIENTATION

Describes a person's sexual and/or romantic attraction to people of a specific gender or multiple genders. It is the culturally defined set of meanings through which people describe their attractions. Sexual orientation is not static and can change over time.

TRANSGENDER

A term used to describe individuals whose gender identity and how it is expressed, to varying degrees, is different than the sex assigned at birth. Transgender identity relates to a person's gender identity.

TRANSFORMATIVE JUSTICE

A liberatory approach to justice which seeks safety and accountability without relying on alienation, punishment, State or systemic violence, including incarceration or policing. (via usprisonculture.com).

SAFETY PLANNING

A safety plan is a personalized, practical plan that can help a survivor avoid and or navigate a dangerous situation.

Homicide Narratives

Every year as NCAVP documents LGBTQ and HIV-affected lives lost to hate or intimate partner violence we attempt to honor and remember those lives as the whole person they were.

The following pages list the recorded victims lost to hate or intimate partner violence related homicides. NCAVP recognizes this list is not exhaustive.

These narratives were included because they were either captured by NCAVP members through reporting or media reports. They were selected due to the strong likelihood that hate or intimate partner violence was the motivation, or contributing factor, to the homicide. It can sometimes be difficult to determine victim's racial, ethnic, gender, or sexual orientation, still NCAVP attempts to collect as much information that is available and confirmed about the victims as possible.

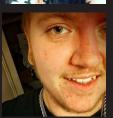
NCAVP wrote these narratives using information from media outlets, family and friends, and local NCAVP members. NCAVP is not responsible for the complete accuracy of these narratives and the specific details pertinent to allegations, police investigations, and criminal trials.

These narratives show the need for the existence and expansion of LGBTQ and HIV-affected anti-violence programs. If you are interested in starting an anti-violence program, becoming a member of the National Coalition of Anti-Violence Programs, or if you would like more information, contact NCAVP at info@ncavp. org or 212.714.1184.

















MARK J. MORRISON

52, White Cisgender Man, Oneonta, NY

Mark Morrison died of blunt force trauma by a bodybuilding weight on Jan 1, 2017.

MESHA CALDWELL

41, Black Transgender Woman, Canton, MS

Mesha Caldwell was killed and her body was found along a rural roadside in Canton, Mississippi on January 4, 2017.

SAYVON ZABAR

54, Cisgender Man, New York, NY

Savyon Zabar was found strangled in his Upper West Side New York apartment on January 4, 2017.

JAMIE LEE WOUNDED ARROW

28, Native Transgender/Two Spirit Woman, Sioux Falls, SD

Jamie Lee Wounded Arrow was found dead in Sioux Falls, South Dakota, on January 6, 2017.

SEAN RYAN HAKE

23, White Transgender Man, Sharon, PA

Sean Ryan Hake was fatally shot by police responding to a call about a domestic incident at Hake's home on January 6, 2017.

BILL DENHAM

53, White Cisgender Man, Tampa, FL

Bill Denham was beaten to death on January 14, 2017 while he was out taking a walk in Tampa, Florida, where he lived.

DONTAE LAMPKINS

25, Black Cisgender Man, Tampa, FL.

Dontae Lampkins was found dead in an alley in Tampa, Florida on January 26, 2017.

JOJO STRIKER

23, Black Transgender Woman, Toledo, OH

JoJo Striker was killed in Toledo, Ohio on February 8, 2017.

JAQUARRIUS HOLLAND

18, Black Transgender Woman, Monroe, LA

Jaquarrius Holland was shot during a verbal altercation on February 19, 2017.

KEKE COLLIER/ TIARA RICHMOND

24, Black Transgender Woman, Chicago, IL

Keke Collier, also known to friends as Tiara Richmond, was shot while walking near her home on February 22, 2017.















SAMARA ROUTENBERG & LISA DAWN FUILLERAT

39, White Cisgender Woman, Brandon, FL & 51, White Cisgender Woman, Brandon, FL Samara Routenberg and her partner Lisa Dawn Fuillerat died by gun violence at the hand's of Lisa's ex husband on February 24, 2017.

CHYNA GIBSON/ CHYNA DOLL DUPREE

31, Black Transgender Woman, New Orleans, LA Chyna Gibson, also known by her performing name, Chyna Doll Dupree, was killed in New Orleans, Louisiana on February 25, 2017.

GLENSER SOLIMAN

44, Asian Cisgender Man, Harris, TX

Glenser Soliman is believed to have been lured to his death while using a dating or hook up app and found dead on February 25, 2017.

CIARA MCELVEEN

25, **Black Transgender Woman**, **New Orleans**, **LA** Ciara McElveen was stabbed to death on February 27, 2017.

ALPHONZA WATSON

38, Black Transgender Woman, Baltimore, MD Alphonza Watson was shot to death on March 22, 2017.

ANDREW NESBI

46, White Cisgender Man, Madison, WI

Andrew Nesbi was found stabbed to death in his apartment in Madison, Wisconsin on March 27, 2017.

AN VINH NGUYEN

26, Asian Cisgender Man, Harris County, TXAn Vinh Nguyen was last seen on March 31, 2017 and is presumed dead.

KENNE MCFADDEN

27, Black Transgender Woman, San Antonio, TX Kenne McFadden was killed in San Antonio, Texas on April 8, 2017.

JAMES JOHNSON

41, Cisgender Man, Brooklyn, NY

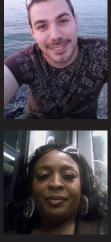
James Johnson died after being stabbed on April 9, 2017.















BRUCE GARNETT

67, White Cisgender Man, Chesterfield, VA

Bruce Garnett was found stabbed to death in his home on April 21, 2017.

CHAY REED

28, Black Transgender Woman, Miami, FL

Chay Reed was shot in Miami, Florida on April 21, 2017.

MX. BOSTICK

59, Black Transgender Person, New York, NY

Mx. Bostick was found unconscious with head trauma on April 25, 2017 on a street corner in Manhattan.

EARL ENGLISH

28, Black Cisgender Man, DeKalb, GA

Earl English was found shot and killed inside his home in DeKalb, Georgia on May 16, 2017.

IMER ALVARADO

34, Latinx Cisgender Man, Fresno, CA

Imer Alvarado was killed on the night of May 16, 2017 in Fresno, California.

SHERRELL FAULKNER

46, Black Transgender Woman, Charlotte, NC

Sherrell Faulkner was killed in Charlotte, North Carolina. She was found beside a dumpster on November 30, 2016 with trauma from an assault. She passed away from injuries related to that assault on May 16, 2017.

KEVIN WIRTH

27, White Cisgender Man, Lansing, MI

Kevin Wirth was found beaten and stabbed to death inside his home in Lansing, Michigan on May 21, 2017.

DAVID SWARTLEY

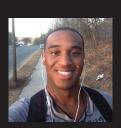
66, White Cisgender Man, Elkhart County, IN

David Swartley was killed on May 25, 2017 in Elkhart County, Indiana by a person who responded to the personal ad he placed for "casual encounters."

RAFAEL (RALFIE) REYES

Unknown age, Houston, TX

Rafael Reyes, known by friends and family as Ralfie, died by gunshot on May 29, 2017



















MATTHEW MURREY

26, Black Cisgender Man, Hyattsville, MD

Matthew Murrey was found was found stabbed to death in his Hyattsville apartment on May 30, 2017.

JOSIE BERRIOS / KENDRA ADAMS

28, Latinx Transgender Woman. Ithaca, NY

Josie Berrios was killed in Ithaca, New York on June 13, 2017.

NEIL RODNEY SMITH

57, White Cisgender Man, Brooklyn, NY

Neil Rodney Smith was found dead of apparent suffocation in his apartment on June 19, 2017.

RICHELLE HORSLEY

47, Cisgender Woman, Salt Lake City, UT

Richelle Horsley died by gunshot on June 22, 2017.

GERALD MOORE

52, Black Cisgender Man, Madison, WI

Gerald Moore was stabbed and died on June 24, 2017.

AVA LE'RAY BARRIN

17, Black Transgender Woman, Athens, GA

Ava Le'Ray Barrin was shot after an argument in Athens, Georgia on June 25, 2017.

MICHAEL "CHRIS" JONES

Black Cisgender Man, Mount Vernon, NY

Michael Jones, known to friends and family as Chris, died after his head struck the pavement during a fight on June 27, 2017.

EBONY MORGAN

28, Black Transgender Woman, Lynchburg, VA

Ebony Morgan was killed in Lynchburg, Virginia on July 2, 2017.

ROBERT LEE COVINGTON

54, White Cisgender Man, Dallas, TX

Robert Lee Covington was found suffocated to death in his home in Dallas on July 7, 2017.

RODRIGUEZ MONTEZ BURKS

23, Black Cisgender Man, Munising, MI

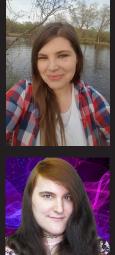
Rodriguez Montez Burks was killed by a fellow inmate in his cell at the Alger County Correctional Facility on July 20, 2017 in Munising, Michigan.













TRENTON CORNELL-DURANLEAU

26, White Cisgender Man, Chicago, IL

Trenton Cornell-Duranleau was stabbed and died on July 27, 2017.

TEETEE DANGERFIELD

32, Black Transgender Woman, Atlanta, GA

TeeTee Dangerfield was fatally shot while parked in her vehicle on the morning of July 31, 2017 in Atlanta, Georgia.

JOHN JOLLY

55, Black Cisgender Man, New York, NY

John Jolly was stabbed to death on a street corner in Manha an on August 2, 2017.

JAYLOW MC

29, Black Transgender Woman, Alexandria, LA

Jaylow MC was killed in a residence on August 4, 2017 in Alexandria, Louisiana.

JUAN JAVIER CRUZ

22, Latinx Cisgender Man, Lake Worth, FL

Juan Javier Cruz was fatally shot after defending his group of friends against homophobic slurs on August 6, 2017 in Lake Worth, Florida.

FELICIA DORMANS

29, White Cisgender Woman, Mount Holly, NJ

Felicia Dormans died by gunshot on August 6, 2017.

GWYNEVERE RIVER SONG

26, White Transgender Person, Waxahachie, TX

Gwynevere River Song was fatally shot on August 12, 2017, after an argument at home escalated into fatal violence.

MARK BRANN

67, Cisgender Man, Key West, FL

Mark Brann was stabbed and died on August 15, 2017.

RYAN D. THOMPSON

35, White Cisgender Man, Portland, OR

Ryan D. Thompson was strangled and stabbed on August 21, 2017.

MIKE COLLINS

46, White Cisgender Man, St. Clair County, AL

Mike Collins was found dead in his apartment on August 21, 2017.















KIWI HERRING

30, Black Transgender Woman, St. Louis, MO Kiwi Herring was killed in St. Louis, Missouri on August 22, 2017.

CARZELLA LITTLE

20, **Black Cisgender Woman**, **Huntsville**, **AL** Carzella Little was fatally shot on August 26, 2017.

KASHMIRE REDD

28, **Black Transgender Man**, **Gates**, **NY** Kashmire Redd was stabbed and died on September 4, 2017.

ALLY LEE STEINFELD

17, White Transgender Woman, Texas County, MO

Ally Lee Steinfeld was killed in Texas County, Missouri, on September 5, 2017.

ANTHONY TORRES (BUBBLES)

44, Cisgender Man, San Francisco, CA

Anthony Torres, also known as Bubbles, was fatally shot on the sidewalk in the Tenderloin neighborhood of San Francisco on September 10, 2017.

DERRICKA BANNER

26, **Black Transgender Woman**, **Charlotte**, **NC**Derricka Banner was shot and killed in a vehicle on September 12, 2017 in Charlotte, North Carolina.

ARIEL GONZALEZ

50, Latinx Cisgender Man, Broward County, FL Ariel Gonzalez was found dead in his apartment on September 13, 2017.

SCOUT SCHULTZ, 21

White Nonbinary & Intersex Person, Atlanta, GA Scout Schultz was shot and killed on September 16, 2017 by Georgia Tech Campus Police in Atlanta, Georgia.

GIOVANNI MELTON

14, Black Cisgender Man, Henderson, NV Giovanni Melton was was fatally shot by his father, Wendell Melton, on October 2, 2017.

ELIZABETH STEPHANIE MONTEZ

47, Latinx Transgender Woman, Robstown, TX Elizabeth Stephanie Montez was fatally shot on October 21, 2017 near Robstown, Texas.













CANDACE TOWNS

30, Black Transgender Woman, Macon, GACandace Towns was fatally shot on October 31, 2017 in Macon, Georgia.

SYDNEY LOOFE

24, White Cisgender Woman, Lincoln, NE

Sydney Loofe was reported missing on November 16, 2017 after meeting up with a woman she met on a dating app.

BROOKLYN BREYANNA STEVENSON

31, Black Transgender Woman, Oklahoma City, OK Brooklyn BreYanna Stevenson was fatally shot on November 27, 2017 in Oklahoma City, Oklahoma.

DEVON WADE

Black Cisgender Man, Houston, TX

Devon Wade was fatally shot early on the morning of November 27, 2017.

BRANDI SEALS

26, **Black Transgender Woman**, **Houston**, **TX** Brandi Seals was fatally shot on December 13, 2017 in Houston, Texas.

SHANTA MYERS & BRANDI MELLS

36, Black Cisgender Woman, Troy, NY &22, Black Cisgender Woman, Troy, NY

Shanta Myers and her partner, along with two of their children, **Jeremiah** and **Shanise**, were bound and killed on December 26, 2017 in Troy, New York.

KERRICE LEWIS

23, **Black Cisgender Woman**, **Washington**, **D.C**. Kerrice Lewis was killed in Washington, D.C. on December 28, 2017 after being shot and locked in

the trunk of a car, which was then set on fire.

KALADAA CROWELL

36, Black Cisgender Woman, West Palm Beach, FL Kaladaa Crowell and her daughter, **Kyra Inglett**, were fatally shot on December 28, 2017.

NCAVP is aware of the homicides below, however, little information is known about the circumstances of these cases. NCAVP lists their names here in remembrance, and in the hope that their loved ones can find some peace.

ALEJANDRO SOLARTE

THEODORE MOORE

ARIEL GONZALEZ

GEORGE YUREK

National Coalition	Your Na	me:					_
of Anti-Violence Programs Case Intake/		/ /			Time of Intake:	AM/PM	1
Incident Reporting Form		 □ Volunte			Location of Intake		
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Location of intarco		
CALLER INFORMA	NOITA	Intake Type		Entered	d Into Database	/ /	
		Hotilne/P		Call Ba	ck Needed □ Yes □ I	No	_
Case Number:		_			/ Language		_
Case Type(s)					er Violence H: HIV-		ne
(select all that apply):					nce Z : Pick-	-up violence	
Caller's Name:		Caller presen	Its as (check	cone): □ Lo	ver/Partner □ C	Offender	
Caller's Address:					☐ Service provid		
		□ Survivor/Vic			□ Other		
Phone: () Ok Alt Phone: () Ok	to call?	(specify):				D) (
		□ Family	sea as (For □ Friend	IPV cases, o	complete after using li	P <i>V Assessment For</i> Offender	m):
Caller's E-mail:		☐ Organization	nal Survivor/	Victim .	□ Service provid		
OK to email?		☐ Survivor/Vic	tim 🗆	Witness	□ Other		
Caller Was Referred By (Check of	no)	(specify):					
□ AVP Publicity □ Court □ Fa	mily 🗆 Fr	iend □ Hospital			□ Internet □ LGBTQ	Org	
☐ Media ☐ Non-							
SURVIVOR/VICTIN	1 #1	9	HDVIV		TIM INFORM	ATION	
Number of Survivors/Victims:			AGE:				
(Attach 'Additional Survivor/Victims Form' to	o document ot	ther survivor/victims)	AGE. □ < 14	□ 40-49	primary gender identity):	one that best fits the person	r's
Survivor/Victim is: ☐ Person ☐	Organizat	ion	□ 15-18	□ 50-59	☐ Transgender Wo		
Name:			□ 19-10	□ 60-69	☐ Transgender Ma		
Address:			□ 25-29	□ 70-79	☐ Transgender Noi ☐ Cisgender Man	n-Binary	
			□ 30-39	□ > 80	☐ Cisgender Woma	an	
Phone:				1	☐ Genderqueer	of a marker of	
Email:			□ Not disc	losed	□ Gender Non-Cor□ Gender fluid	norming	
			Age (if kno	own):	□ Self-Identified/Ot	her (specify):	
Prefers contact via: ☐ Phor OK to say 'AVP?' ☐ Yes	ne □Em □No	na⊪ □ Unk.		_/			
OK to leave message? Yes		□ Unk.			□ Unknown		
OK to email 'AVP?' ☐ Yes		□ Unk.					
OK to receive mail?' ☐ Yes	□ No	□ Unk.			INTERSEX:	- 11 / 12 /	
RACE/ETHNICITY (check all that a	nn/u):	EXUAL	IMMIGRA	TION	☐ Yes ☐ No ☐ HIV STATUS:	□ Not disclosed	
□ Arab/Middle Eastern		RIENTATION:	STATUS:	TION .	Survivor/victim is h	HV+?	
☐ Asian/Pacific Islander		Bisexual	□ U.S. citi:	zen	□ Yes □ No	☐ Not disclosed	
☐ Black/African American/		Gay	□ Perman	ent resident	DISABILITY:		
African Descent		Heterosexual	Undocu	mented	Survivor/victim has	a disability?	
☐ Indigenous/First People/		Lesbian Queer	☐ Other☐ Not disc	losed		Not disclosed	
Native American/ American I	าดเลก เ	Questioning/			If yes, check all the	at apply and specify	<i>r</i> .
□ Latina/o		Unsure	INCOME	<u></u>		at apply and specify paired:	
☐ White		Self-Identified/ Other (specify):	Yearly Monthly		☐ Deaf/Hard of hea	aring:	
☐ Self-Identified/Other (specify):		Caron (openny).		eceive any	☐ Learning disabili	ty:	
□ South Asian	_		form of g	overnment	☐ Mental health:	_	
□ Not disclosed		Not disclosed	assistand		□ Physical:		

SURVIVOR/VICTIM USE OF ALCO	OHOL/DRUGS			
Alcohol involved? ☐ Yes ☐ No ☐	Not disclosed Dr	ugs involved?	s □ No □ Not disclosed	
If yes, describe:				
C	ASE/INCIDEN	IT INFORMAT	ION	2
Date of Incident:/_/ Time of I	ncident::_am/pm	Location/ Address of		
Precinct where incident occurred:		Incident:		
				ZIP
		_		
Is this a Serial Incident? ☐ Yes ☐ N	No □ Unk.	Previous police	ce report filed? ☐ Yes ☐ No	□ Unk.
If Yes: Number of Previous Incident	ts □1 □2-5 □6-10 □11+	F ☐ Unk. Ongoing since	e://	
TYPE(S) OF VIO	LENCE (check all that	fannly):	SITE TYPE (chec	ck one):
	IST PERSON (check all th	act apply):	·	K one).
U VIOLENCE AGAIN		іат арріу).	☐ Cruising area	fied venue
□ Physical violence against	☐ Other violence ag	ainst person (check all	☐ In or near LGBTQ-identif	led veriue
person (check all that apply):	that apply):	•	☐ Media	
☐ Forced use of alcohol/drugs	□ Blackmail		□ Non-LGBTQ-identified ve	enue (bar,
☐ Murder	□ Bullying		restaurant, etc.) Online/Internet	
☐ Attempted murder	□ Discrimination		☐ Police precinct/ jail/ vehice	cla
□ Physical violence	□ Eviction		☐ Public Transportation	
☐ Attempted physical violence	□ False police rep	orting	☐ Private residence	
□ Robbery	□ Financial		☐ School/college/university	,
☐ Attempted robbery	☐ Harassment (NO	T in person: mail, email, tel. etc)	☐ Shelter	,
□ Sexual violence	□ Isolation			
☐ Attempted sexual violence	□ Limiting/restricti	ng bathroom access	□ Non-DV/IPV	
□ Self-injury	□ Medical		☐ Street/public area	
□ Suicide	□ Psychological/E	motional abuse	<u>-</u>	
☐ Attempted suicide	□ Sexual harassm	nent	☐ Other (specify):	
☐ Other self-harming	□ Stalking		☐ Workplace (place where survivise is employed)	or or abusive partner
behavior (cutting, etc.)	□ Threats/Intimida	ation	□ Not disclosed	
Donation (outling, oter)	☐ Use of children	(threats, outing, etc.)	= 1 tot dississed	
Was a weapon involved?	☐ Use of immigrat	ion status	Was this incident related to	
☐ Yes ☐ No ☐ Unknown	□ Verbal harassm	ent in person	violence? ☐ Yes ☐ No	□ Unknown
List weapon:	□ Violence agains	t pet	If yes, did survivor/victim &	offender meet
	□ Pet injured		through cruising website or	
Did the person die?	□ Pet killed		□ Yes □ No □ Unknow	
☐ Yes ☐ No ☐ Unknown	☐ Other (specify):			
Was the person injured?			If yes, specify website/app	
☐ Yes ☐ No ☐ Unknown			☐ Adam4adam ☐ Craigslis	
If yes, severity of injury:	_		☐ Grindr ☐ Manhunt ☐	,
☐ No injuries requiring medical			☐ Other website/app (specify)):
attention	□ Police violence/	misconduct (check all that	NOTIVE	
☐ Injuries requiring medical	apply):		MOTIVE (check all that apply):	
attention (specify):	☐ Excessive fo		☐ Intimate partner violence	!
□ Needed but not received	☐ Police entrar		□ Economic	
☐ Outpatient (Clinic/MD/ER)	☐ Police haras	sment	☐ Pick-up violence	
☐ Hospitalization/Inpatient	□ Police raid		☐ Police violence	
□ Not disclosed	☐ Unjustified a		☐ Sexual violence	
LINUL GIBCIOSEG	⊔ Use of condo	oms as evidence	☐ Bias violence	
Type of injury (specify):			☐ Anti-Homelessness/C	lassism
	Reported to in:	ternal/external police	□ Anti-Immigrant	
	monitor?	torrial/exterrial police	□ Anti-LGBQ/Homopho	bia/
		No Will Report	Biphobia	
		complaint not taken	□ Anti-Sex worker	
	□ Not available	•	□ Anti-Transgender/Tra	nsphobia
	☐ Other (specify):		□ Disability	
	Specify):	 	☐ HIV/AIDS-related	

_ \/IOI	FNOE ACAINOT PROPERTY		□ Da aia4//	A matication in
	ENCE AGAINST PROPERTY (check all that apply):		Anti-ethnic
□ Arson			⊔ Religiou	JS (specify perceived
☐ Theft				
□ Vandalism			□ Sexist	
☐ Other (specify):			☐ Other (s	pecify):
*Est. stolen/damage	nd proporty value:		□ Unknown	
\$	ed property value.		Ulikilowii	
Ψ				
	OFFEND	ER INFORMATIO	N	3
	OTTEND	ER INI ORMATIO		
Total Number of Offenders:	Is offender a member of ider	ntifiable hate group? □ Yes □	No □ Unk.	Hate group's name(s):
Vehicle used in case	e/incident? ☐ Yes ☐ No If yes	, describe vehicle:	Lic	cense #:
Note: If there is n	nore than one offender, <u>CR</u>	EATE A DESIGNATION F	OR EACH C	OFFENDER for use in the
	ach demographic category			
	Offender E		Offender (C
Name:				
OFFENDER(S) KI	NOWN TO SURVIVOR?	☐ Yes ☐ No If YES, fi	ll out 1), belo	ow. If NO, fill out 2).
1) KNOWN OFFEN	DER(S): RELATIONSHIP TO S	URVIVOR/VICTIM:		
□ Acquaintance/Frie	end Employer/Co-Worker	□ Ex-Lover/Partner (□ Liv	e-in 🗆 Non L	.ive-In) □ Landlord
	Live-in □ Non Live-In) □ Pick-			
	der (EMT, Court personnel, etc.)			
☐ Tenant/Neighbor	□ Other (specify):		iown	
2) UNKNOWN OFF	ENDER: RELATIONSHIP TO S	URVIVOR/VICTIM:		
•	w enforcement (FBI, ICE, etc.)		T Court ners	connel etc.)
	ger Other (specify):	□ Unk	•	ormer, etc.)
AGE:	GENDER ID (check all that apply):	RACE/ETHNICITY		ORIENTATION:
☐ 14 or under		(check all that apply):		
		□ Arab/Middle Eastern	□ Heterose	exual 🗆 Lesbian
□ 15-18	□ Woman	Arab/Madic Lastern		Questioning/Unsure
□ 19-24	□ Non-Transgender	—— ☐ Asian/Pacific Islander		atified/Other
□ 25-29			(specify):	
□ 30-39	☐ Transgender	☐ Black/African American/ African Descent		osed □ Unknown
□ 40-49 <u> </u>	☐ Self-Identified /Other			
□ 50-59 <u> </u>	(specify):	☐ Indigenous/First People/		R USE OF
□ 60-69	□ Not Disclosed	Native American/ American Indian	ALCOHOL	_/DRUGS
			Alcohol inv	olved?
□ 70-79	☐ Unknown	□ Latina/o		o □ Not disclosed □ Unk.
□ 80 or over	INTERSEX:	□ White	Drugs invo	
☐ Not disclosed		☐ Self-Identified /Other		o □ Not disclosed □ Unk.
Age (if known)	☐ Yes ☐ No	(specify):	If yes, desc	cribe:
D.O.B:	☐ Not disclosed ☐ Unknown	□ South Asian		
//		☐ Not disclosed		
		☐ Unknown		
	POLICE	COURT RESPON	SE	
Dio	l survivor/victim interact wi	th police in any way?	Yes □ No	□ Unknown
POLICE RESPONS	E	POLICE REPORTING		
What was police att	itude toward survivor/victim?	Did survivor/victim report in	cident to poli	ce?
	ndifferent Hostile Unk.	□ Yes □ No □ Unknowr	•	
Did police do any of	following to survivor/victim?	Did the police take a compl	aint? □ Yes □	No Complaint#
(check all that apply):	-	Did the police arrest the off	ender(s)? 🗆 Y	/es □ No □ Unknown
☐ Arrest survivor/vic	tim	Police involved (check all that ap	• •	
□ Verbal abuse		☐ City/Muni. ☐ County		ederal (specify):
☐ Use slurs or bias I	anguage	Sity/ividin.		Caciai (specify).

☐ Physical violend	e	☐ Other (p	olease specify):	Police Badge #
☐ Police refused to		PROTEC	TIVE ORDERS	
☐ Sexual violence☐ Other negative I		•	otective order sought by surv □ No □ Unknown	rivor/victim?
- If police violence/	misconduct, reported to		orotective order granted? □ No □ Unknown	
internal/external p			e order obtained (check all that ap	
□ Yes □ No	□ Will Report		ivor/victim By offender	☐ Both survivor/victim &
☐ Attempted, com		offender	Crimainal DV Dan D	V - Tamparam - Damagaan
□ Not available	□ Unknown	□ Unknow	vn	V □ Temporary □ Permanent
	POLICE/COUF		SPONSE (continued)	4
DOMESTIC VIOL N/A	ENCE CLASSIFICATION	BIAS I N/A	NCIDENT CLASSIFICATION	N 🗆
Did the survivor/	victim identify the case/incident	Did th	e survivor/victim describe	the incident as hate-
	ence? ☐ Yes ☐ No ☐ Unknown	motiva		
-	assify the case/incident as		□ No □ Unknown	
domestic violend			e police classify the incide	ent as hate-motivated?
	was the case/incident classified ence by prosecutors?		□ No □ Unknown he incident classified as a	hate crime by prosecutors?
	process Unknown		□ No □ In process □ Unkn	* *
		ICES F	PROVIDED	
GENERAL	ADVOCACY (check all types that apply):		REFERRALS	FOLLOW-UP NEEDED?
SERVICES			(check all that apply):	
□ Counseling	☐ Housing ☐ Legal		☐ Housing	☐ Agency follow-up
□ Safety	☐ Medical ☐ Mental	health	□ Legal	☐ Caller follow-up
planning			□ Shelter	
	□ Police		□ DV	
	☐ Public benefits		☐ Homeless	
	□ Disability/SSD		□ Medical	
	☐ Medicaid/Medicare		□ Police	
	□ Public Assistance/Food Star	nps	☐ Other (specify):	
	☐ Shelter/Housing☐ Unemployment			
CASE STATUS &	□ Other (specify): MANAGEMENT (Staff Only)			
☐ Case Opened	Assigned to:			Case Closed
	ment Reassigned to:			Case Data Update
	sed Case Assigned to:			Quality Status Review
☐ Case Conference	e Presentation			
			\\	
		NARRA	ATIVE	
	of the case/incident, please make sific anti-LGBTQ words used (if any)			plence, including the use of
	me anti-EGBT Q words used (ii arry)	, and exter	it of injuries.	
	 -			
				

Total Aggregate Figures

Description of IPV Survivors Who Reported to NCAVP

Age	Count	% of Total
18 and younger	39	2%
19-29 years old	449	30%
30-39 years old	441	30%
40-49 years old	259	18%
50-59 years old	201	14%
60-69 years old	70	5%
70 years old and older	9	1%
Gender Identity	Count	% of Total
Transgender Women	191	11%
Transgender Man	70	4%
Cisgender Woman	580	34%
Cisgender Man	754	45%
Transgender Non-Binary	13	1%
Gender Non-Conforming	15	3%
Gender Fluid	5	<1%
Gender Queer	12	1%
Self-identified/Other	48	3%
Gender	Count	% of Total
Bisexual	196	13%
Gay	648	44%
Heterosexual	208	14%
Lesbian	202	14%
Queer	129	9%
Questioning/Unsure	21	1%
Self-Identified	71	5%

Race & Ethnicity*	Count	% of Total
Arab/Middle Eastern	18	1%
Asian/Pacific Islander	54	4%
Black/African American	327	21%
Native American/ American Indian	12	1%
Latino/a/@	417	27%
Multiracial	70	5%
White	598	39%
Self-Identified/Other	38	2%
Disability Status	Count	% of Total
Disability reported	278	44%
Disability not reported	355	56%
Type of Disability	Count	% of Total
Blind	3	1%
Deaf	4	2%
Learning disability	25	12%
Mental Health Disability	103	48%
Physical Disability	41	37%
HIV Status	Count	% of Total
HIV Positive	236	38%
HIV Negative	390	62%
Immigration Status	Count	% of Total
US Citizen	740	78%
Permanent Resident	34	4%
Undocumented	70	7%
Other	106	11%

^{*} For these variables, survivors were able to choose more than one answer choice. The numbers and percentages reflect the total number of responses to this variable rather than respondents.

Description of HV Survivors Who Reported to NCAVP

Age	Count	% of Total
18 and younger	42	7%
19-29 years old	170	16%
30-39 years old	167	28%
40-49 years old	90	15%
50-59 years old	82	14%
60-69 years old	36	6%
70 years old and older	5	1%
Gender Identity	Count	% of Total
Transgender Women	147	22%
Transgender Man	56	8%
Cisgender Woman	100	15%
Cisgender Man	272	41%
Transgender Non-Binary	13	2%
Gender Non-Conforming	32	5%
Gender Fluid	5	1%
Gender Queer	7	1%
Self-identified/Other	35	5%
Gender	Count	% of Total
Bisexual	84	14%
Gay	275	45%
Heterosexual	72	12%
Lesbian	94	15%
Queer	36	6%
Questioning/Unsure	24	4%
Self-Identified	28	5%

Race & Ethnicity*	Count	% of Total
Arab/Middle Eastern	15	2%
Asian/Pacific Islander	19	3%
Black/African American	139	22%
Native American/ American Indian	9	1%
Latino/a/@	129	21%
Multiracial	49	8%
White	221	35%
Self-Identified/Other	44	7%
Disability Status	Count	% of Total
Disability reported	162	38%
Disability not reported	259t	62%
Type of Disability	Count	% of Total
Blind	6	4%
Deaf	1	1%
Learning disability	20	14%
Mental Health Disability	74	52%
Physical Disability	41	29%
HIV Status	Count	% of Total
HIV Positive	93	35%
HIV Negative	176	65%
Immigration Status	Count	% of Total
		80%
US Citizen	425	8070
US Citizen Permanent Resident	425 21	4%

^{*} For these variables, survivors were able to choose more than one answer choice. The numbers and percentages reflect the total number of responses to this variable rather than respondents.

Information About Incidents of Hate Violence

Violence Type* ^{\$}	Count	% of Total
Physical Violence	187	10%
Attempted Physical Violence	45	3%
Financial (Economic Violence)	45	3%
Sexual Violence	64	4%
Bullying	154	9%
Discrimination	187	10%
Harassment (online, telephone, and mail)	98	5%
Isolation	34	2%
Sexual Harassment	18	1%
Stalking	60	3%
Threats/Intimidation	225	13%
Verbal Harassment in Person	312	17%
Vandalism	34	2%
Police Violence	16	1%
Survivor Injured?	Count	% of Total
Yes	175	46%
No	207	54%
Medical Attention Sought?	Count	% of Total
Yes	138	42%
No	192	58%

Underlying Bias*†	Count	% of Total
Anti-Immigrant	16	2%
Heterosexist/Anti-LGBTQ	495	60%
Anti-Sex Worker	21	3%
Anti-Transgender	142	17%
Anti-Disability	14	2%
HIV/AIDs Related	16	2%
Racist/Ethnic	29	4%
Sexist	15	1%
Religious	61	7%
Other	13	1%
Site Type	Count	% of Total
Site Type Cruising Area	Count 30	% of Total 5%
Cruising Area	30	5%
Cruising Area LGBTQ Venue	30 2	5% <1%
Cruising Area LGBTQ Venue Non-LGBTQ Venue Police Precinct, Jail,	30 2 34	5% <1% 6%
Cruising Area LGBTQ Venue Non-LGBTQ Venue Police Precinct, Jail, Vehicle	30 2 34 8	5% <1% 6% 1%
Cruising Area LGBTQ Venue Non-LGBTQ Venue Police Precinct, Jail, Vehicle Private Residence School, College,	30 2 34 8	5% <1% 6% 1% 29%
Cruising Area LGBTQ Venue Non-LGBTQ Venue Police Precinct, Jail, Vehicle Private Residence School, College, University	30 2 34 8 168 45	5% <1% 6% 1% 29% 8%
Cruising Area LGBTQ Venue Non-LGBTQ Venue Police Precinct, Jail, Vehicle Private Residence School, College, University Shelter	30 2 34 8 168 45	5% <1% 6% 1% 29% 8%

^{*} For these variables, survivors were able to choose more than one answer choice. The numbers and percentages reflect the total number of responses to this variable rather than respondents.

[§] Violence types included a number of other types of violence that represented less than one percent of the total responses, including but not limited to murder, attempted murder, blackmail, medical violence, and eviction.

[†] Anti-religious bias was another type of bias but equaled less than 1%.

Information About Police Responses to Survivors of Hate Violence

Survivor Interacted with Police?	Count	% of Total
Yes	200	44%
No	265	57%
Police Attitudes When Reporting	Count	% of Total
Courteous	41	24%
Indifferent	93	55%
Hostile	34	20%
Police Misconduct	Count	% of Total
Any Misconduct	47	13%
No Misconduct	315	87%
Type of Misconduct Reported	Count	% of Total
Excessive Force	16	44%
Entrapment	0	0%
Police Raid	0	0%
Unjustified Arrest	20	56%
Police Behavior	Count	% of Total
Arrest Survivor	19	25%
Verbal Abuse	12	16%
Slurs or Bias Language	24	32%
Physical Violence	6	8%
Sexual Violence	1	1%
Other Negative	14	18%

Services Provided to HV Survivors

Referrals	Count	% of Total
Counseling	355	21%
Housing	174	10%
Legal	350	21%
Shelter	171	10%
Domestic Violence	114	7%
Homeless	86	5%
Medical	175	10%
Police	46	3%
Other	226	13%
Other	220	1370
Advocacy	Count	% of Total
Advocacy	Count	% of Total
Advocacy Housing	Count 193	% of Total
Advocacy Housing Legal	Count 193 276	% of Total 15% 15%
Advocacy Housing Legal Medical	Count 193 276 146	% of Total 15% 15% 4%
Advocacy Housing Legal Medical Mental Health	Count 193 276 146 174	% of Total 15% 15% 4% 17%
Advocacy Housing Legal Medical Mental Health Public Benefits	Count 193 276 146 174 87	% of Total 15% 15% 4% 17% 4%

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