

LESBIAN, GAY, BISEXUAL AND TRANSGENDER DOMESTIC VIOLENCE IN 2001

**A Report of the
National Coalition of Anti-Violence Programs**



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Introduction/Summary

This report describes incidents of domestic violence (DV) in the lesbian, gay, bisexual, and transgender (LGBT) community that were reported during the year 2001 to community-based anti-violence organizations in nine regions throughout the U.S. In addition this year's report also includes general information about LGBT DV as well as a unique section on legal protections for LGBT people against DV in each of the fifty states, the District of Columbia and Puerto Rico. The author of this annual report is the National Coalition of Anti-Violence Programs (NCAVP), a network of 26 community-based organizations responding to violence affecting LGBT and HIV-affected individuals.

Twelve organizations participated in collecting data for this report. They included eleven NCAVP members, and one other organization (Asian Woman's Shelter in San Francisco) with which NCAVP has developed cooperative relationships. The regions represented by all the contributors to this report are San Francisco, CA; Los Angeles, CA; Colorado; Chicago, IL; Boston, MA; Minnesota; New York, NY; Columbus, OH; and Cleveland, OH.

There were 5,046 reported incidents of domestic violence affecting LGBT individuals in 2001: a substantial increase (+25% *) over the 4,048 cases reported in the same regions throughout 2000. As in past years, the largest numbers of reported incidents continued to be to NCAVP members and affiliates in coastal metropolitan areas. Los Angeles (3,208, a 50% increase from 2,146 in 2000) lead the group in number of reports, San Francisco followed with 694 (a <1% increase from 691 in 2000) cases reported by three groups. New York City (428, a 9% decrease from 471 in 2000), and Boston (329 cases reported by two groups, a 17% decrease from 397 in 2000) filled out the top four reporting regions. In Chicago the number of reports virtually doubled (+84%) at 201 up from 109 in the previous year and in Colorado reports increased to 100 this year up from 88 reported in 2000 (+14%). Of the three remaining areas, Columbus reported a significant decrease in the number of reports with 44 this year down from 91 last year (-52%). Cleveland reported 12 down from 19 (-37%) and Minnesota documented 30 cases in 2001 down from 36 in 2000 (-17%).

While these findings reveal something of the magnitude and perhaps even the relative distribution of domestic violence affecting LGBT individuals in the United States, it is not possible to generalize them any further.

* All percentages have been rounded to the nearest whole number.

NCAVP MISSION STATEMENT

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

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

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

NCAVP MEMBER ORGANIZATIONS

Organizations whose names are in bold type contributed to this report.

ARIZONA

Wingspan DV Project
300 E. 6th Street
Tucson, AZ 85705
Phone: (520) 624-1779
Fax: (520) 624-0364
www.wingspanaz.org

ARKANSAS

Women's Project
2224 Main Street
Little Rock, AR 72206
Phone: (501) 372-5113
Fax: (501) 372-0009

NCAVP MEMBER ORGANIZATIONS (continued)

CALIFORNIA

Community United Against Violence

160 14th Street
San Francisco, CA 94103
Phone: (415) 777-5500
Fax: (415) 777-5565
Website: www.cuav.org

L.A. Gay & Lesbian Center/
Anti-Violence Project
1625 North Schrader Blvd.
Los Angeles, CA 90028
Phone: (800) 373-2227
(victims' line-southern California only)
Fax: (323) 993-7653
Phone: (323) 993-7674
Website: www.laglc.org

L.A. Gay & Lesbian Center/STOP Partner Abuse/Domestic Violence Program

1625 North Schrader Blvd.
Los Angeles, CA 90028
Phone: (323) 860-5806 (clients)
Fax: (323) 993-7699
Phone: (323) 993-7645 (office)
Website: www.laglc.org/domesticviolence

The Lesbian & Gay Men's Community Center, San Diego
P.O. Box 3357
San Diego, CA 92163
Phone 1: (619) 260-6380
Fax 1: (619) 260-3092

W.O.M.A.N., Inc.

333 Valencia Street
#251
San Francisco, CA 94103-3547
Phone: (415) 864-4722, Crisis Line
Fax: (415) 864-1082
TTY: (415) 864-4765
Website: www.womaninc.org

Specifically, changes in the number of domestic violence incidents reported to NCAVP are almost entirely the function of evolving program and organizational capacities, as well as outreach campaigns and program activity focus. The 25% increase in the total number of cases reported over those in the year 2000 is consistent with the year to year growth level of reporting recorded in 1999 and 2000.

91% of the growth in domestic violence cases reported nationally in 2001, for example, stemmed from a single large increase in Los Angeles, from 2,146 to 3,208 cases. This increase was at least partly attributable to the reporting organization's work with local police departments to compile information about their LGBT DV reports. The numbers received from these police contacts were integrated into the numbers reported from Los Angeles. For reasons this report will make clear, domestic violence affecting LGBT individuals continues to be grossly underreported throughout most of the country, even where there are some resources to help its victims.

In addition it is important to note that there are other community-based programs in some areas of the country addressing and documenting LGBT DV who, for a variety of reasons, including lack of knowledge of our mutual existence, discrepancies in data collection, lack of interest or time and staff resources, do not contribute to this report. However, NCAVP does maintain relationships with several of these agencies and is committed to an ongoing effort to include as much information as possible from the widest representation of service providers doing work in this area and hopes and expects that in future years the number of contributing programs and regions will increase. Nevertheless, these agencies are still few and while a handful are well known and longstanding within this movement, many more struggle with inconsistent capacity to maintain operations and services to LGBT individuals on an ongoing basis.

The purpose of this report is to give credence to the reality and voice to some of the stories of DV within the LGBT community. There is much lack of awareness and denial about the existence of this type of violence, both by those who are part of the LGBT community, as well as those in the "mainstream" anti-DV movement, where services are primarily oriented to heterosexual women. Conversely there are many who misuse and disproportionately exaggerate information about the existence of LGBT DV to further their own causes of blocking and curtailing the rights of LGBT people to equal protection under the law and within society. Both the exaggeration and denial of LGBT DV, and truly of any type of DV, only serves to exacerbate the isolation of survivors and assists to maintain an environ

ment in which intimate partner and family violence is able to flourish within all communities, across all demographic lines.

There is relatively little unique scientific or academic research that has been done on the topic of LGBT DV and its prevalence. However, as service providers and community members we speak with people living in these situations every day, and know that many more continue to suffer silently within abusive relationships. As a result of this gap between published documentation and the experience of many within the LGBT and anti-DV movements, NCAVP and contributors to this report have made a commitment to documenting and reporting the cases of DV we see each year. This report shows only a fraction of the LGBT intimate partner violence we extrapolate actually happens around the United States every year. We hope that our work to compile these stories and numbers will inspire other service providers, law enforcement, community leaders, families and friends to begin to pay attention to this vastly under reported and under addressed scourge of violence and to begin to work toward further research, development of programs, creation of funding opportunities and community-based solutions.

NCAVP and the contributors to this report look forward to a diminished need for its annual publication. This will result when more researchers, funders, service providers and community members take LGBT DV on and view it as equally important to other issues of violence that affect the LGBT community. This will happen when service providers and community leaders within the LGBT community and the anti-DV movements integrate appropriate and effective services for all DV survivors throughout the country. Until that time we hope that this report will provide the reader with a snapshot of the very real existence of LGBT DV, the experience of survivors, and the work being done in programs in various parts of the country to stop it.

NCAVP MEMBER ORGANIZATIONS (continued)

COLORADO

Colorado Anti-Violence Program
P.O. Box 181085
Denver, CO 80218
Phone: (303) 852-5094
(888) 557-4441, Crisis Lines
Fax: (303) 839-5205
Phone: (303) 839-5204, Office
Website: www.coavp.org

CONNECTICUT

Connecticut Womens' Education and Legal Fund
135 Broad Street
Hartford, CT 06105
Phone: 860-247-6090, x16
Fax: 860-524-0804
Website: www.cwealf.org

ILLINOIS

Horizons Anti-Violence Project
961 W. Montana
Chicago, IL 60614
Phone: (773) 871-CARE, Hotline
Phone: (773) 472-6469
Website: horizonsonline.org

KENTUCKY

Gay & Lesbian Services Organization
Box 11471
Lexington, KY 40575-1471
Phone: (606) 257-8462, work
Fax: (606) 257-5592

NAACP MEMBER ORGANIZATIONS (continued)

LOUISIANA

Lesbian & Gay Community Center of
New Orleans
2114 Decatur Street
New Orleans, LA 70116
Phone: 504-945-1103
Fax: 504-945-1102
Website: www.lgccno.org

MASSACHUSETTS

Fenway Community Health Center

Violence Recovery Program

7 Haviland Street
Boston, MA 02115
Phone: 1-800-834-3242 (intake line)
Fax: (617) 536-7211
Website: www.fchc.org

The Network/La Red

PO Box 6011
Boston, MA 02114
Phone: (617) 695-0877

MICHIGAN

Triangle Foundation
19641 West Seven Mile Road
Detroit, MI 48219
Phone: (313) 537-3323
Fax: (313) 537-3379
Website: <http://tri.org>

MINNESOTA

Out Front Minnesota

310 East 38th Street
Suite 204
Minneapolis, MN 55409
Phone: (800) 800-0127, Hotline
Fax: (612) 822-8786
Phone: (612) 822-0127

DOMESTIC VIOLENCE & LGBT INDIVIDUALS

An Inclusive Definition of Domestic Violence

Our society has become increasingly cognizant of domestic violence and its social, economic and human costs. This recognition has helped spur many needed responses, including public education campaigns; new and amended laws; police and judicial reforms; and a wide range of victims' services (though recent dramatic government funding cuts have resulted in a roll-back of much of this progress by causing education, outreach and services to be curtailed and some programs to be defunded).

Most of the activity in recent years that has brought attention to DV and the subsequent responses to it have been designed to benefit women in heterosexual relationships, and it is not unusual to encounter definitions of domestic violence that characterize it more or less exclusively as a heterosexual women's problem. Certainly, women in heterosexual relationships account for a very large proportion of the individuals victimized by domestic violence in the world today, for reasons that clearly stem from the long-standing subjugation of women in male-dominated societies.

Still, the patterns of abusive behavior observed in many types of relationships, including those in which partners share the same gender, very often exhibit the same dynamics as those present in abusive intimate heterosexual relationships. We now recognize that in addition to the sexist controls created and perpetuated in the larger patriarchal culture, there is also a multitude of ways our society (and the LGBT community) bestows entitlements and control to some people based on various aspects of identity and that this manner of privilege is often used as a means to oppress and maintain control within an abusive relationship.

Domestic violence is defined as a pattern of behaviors utilized by one partner (the abuser or batterer) to exert and maintain control over another person (the survivor or victim) where there exists an intimate, loving and dependent relationship. There is abuse of the relationship and the survivor by the batterer through the use of coercive and abusive behaviors that result in the batterer's having all, or virtually all of the control over the resources and decision-making for both parties and for the relationship. It is defined by the lack of ability of the survivor to make independent decisions or utilize agency without harmful consequences from the batterer. This is often marked by the survivor's having feelings of fear and dread much of the time in relation to the anticipated reactions and actions of the batterer. The

appearance of abusive relationships can vary depending upon the types of actions used by the abuser to limit and control the survivor and the relationship.

Nothing specific is implied by this definition about the marital status, sexual orientation, gender or gender identity, cohabitation, sexual behavior or other attributes of the partners and/or their relationship. Nor does the definition suggest anything about the specific nature of the controlling behaviors, other than their purpose to limit the freedom of action or expression of another. Even the word "relationship" need not signify that the perpetrators and victims are romantically involved, since domestic violence (as defined by NCAVP) may also occur between family members, roommates, caregivers, adult children, or even those who are merely acquaintances (as in some cases of stalking and harassment).

Tools that are used by the batterer to gain and maintain control are often highly individualized to the situation, relationship and people involved. It is important in any given situation of DV to investigate the way the survivor defines the abuse and understand the ways that behaviors which we may not traditionally see as typically "abusive" can be utilized as such in a context where DV already exists. However, there are several common ways in which perpetrators of DV abuse and control their victims. These behaviors include:

- ~ Calling a partner names, or engaging in other verbal abuse or emotional manipulation
- ~ Isolation, including limiting or prohibiting a partner's contact with family or friends
- ~ Stealing, limiting access to or destroying a partner's property
- ~ Withholding or otherwise controlling or restricting access to finances
- ~ Depriving partner of shelter, food, clothing, sleep, medication or any other life sustaining" mechanism
- ~ Limiting or prohibiting a partner from obtaining or keeping employment, housing or any other station, benefit or service
- ~ Harming or attempting to harm a partner physically
- ~ Harming a partner's family, friends, children and/or pets
- ~ Sexually assaulting or raping a partner
- ~ Using intentional exposure to sexually-transmitted and other diseases
- ~ Threatening suicide or harm to self, if a partner tries to end a relationship or does not comply with an abuser's demands
- ~ Stalking or harassing a partner
- ~ Using of facets of abuser or survivor's identity including race, gender, class, sexual orientation, national origin, physical ability, religion, level of education, occupation, or legal immigration status, etc., to demean, insult, endanger, isolate, or otherwise oppress

NCAVP MEMBER ORGANIZATIONS (continued)

NEW YORK

New York City Gay and Lesbian Anti-Violence Project

240 West 35th Street, Suite 200
New York, NY 10001
Phone: (212) 714-1141, hotline
Fax: (212) 714-2627
Phone: (212) 714-1184, office phone
TTY: (212) 714-1134
Website: www.avp.org

OHIO

Buckeye Region Anti-Violence Organization

P.O. Box 82068
Columbus, OH 43202
Phone: (614) 268-9622
Fax: (614) 262-9264

The Lesbian & Gay Community Service Center of Greater Cleveland

6600 Detroit Avenue
Cleveland, Ohio 44102
Phone: (216) 651-5428
Fax: (216) 651-6439
Website: www.lgscs.org

Stonewall Cincinnati

PO Box 954
Cincinnati, OH 45201
Phone: (513) 651-2500
Fax: (513) 651-3044
Website: www.stonewallcincinnati.org

OKLAHOMA

Tulsa Oklahomans for Human Rights
4021 South Harvard Avenue
Suite 210
Tulsa, OK 74135-4600
Phone: (918) 743-GAYS (4297)
Fax: (918) 747-5499

NAACP MEMBER ORGANIZATIONS (continued)

PENNSYLVANIA

The Center for Lesbian & Gay Civil Rights

1211 Chestnut Street
6th Floor
Philadelphia, PA 19107
Phone: (215) 731-1447
Fax: (215) 731-1544
Website: www.center4civilrights.org

RHODE ISLAND

Rhode Island Alliance for Lesbian and Gay Civil Rights

41 12th Street
Providence, RI 02906
Phone: (401) 331-6671
Fax: (401) 272-4374

TEXAS

Montrose Counseling Center

701 Richmond Avenue
Houston, TX 77006
Phone: (713) 529-0037
Fax: (713) 526-4367
Website: www.neosoft.com/~mcc/hate-crim.htm
www.neosoft.com/~mcc/intpartv.htm

VERMONT

SafeSpace

P.O. Box 158
Burlington, VT 05402
Phone: (802) 863-0003
Fax: (802) 863-0004
Website: www.SafeSpaceVT.org

VIRGINIA

Virginians for Justice

P.O. Box 342
Richmond, VA 23218
Phone: (800) 2-Justice, Hotline
Fax: (804) 643-2050

- ~ Threatening to engage in any of the above behaviors, including threats to do these things to a partner's family, friends, children and/or pets
- ~ Intimidating a partner in any other way

It is important to note that while many abusive relationships exist within the context of co-habitation, such a living arrangement is not an intrinsic element of DV. The commonly used term "domestic violence" (and one that is used in this report) implies violence within a shared "domicile," however more attention has been focused in recent years on violent dating relationships in which the parties do not, in fact, co-habitate or share any legally binding property, relationship or obligations. This further supports the earlier statement about the need to view each abusive relationship within its own context in able to achieve a clear sense of what comprises the behavioral mechanisms and environment of power and control.

The Prevalence of LGBT Domestic Violence

While LGBT domestic violence is becoming the focus of increasing research attention, it has so far not been examined with anything near the thoroughness afforded to heterosexual domestic violence. As a result, estimates of the prevalence of LGBT domestic violence remain highly provisional. Island and Letellier suggest that 15-20% of gay male relationships become abusive¹. Elsewhere they describe it as "the third most severe health problem facing gay men today," behind HIV/AIDS and substance abuse². Among lesbians, a 1985 study by Gwat-Yong Lie and Sabrina Gentlewarrior reported that slightly more than half of 1,109 respondents had been abused by a woman partner in their lifetime³. Several smaller studies seem to support this finding. Coleman's 1990 study of 90 lesbians, for example, reported that 46.6% had experienced repeated acts of violence, and Ristock's 1994 survey of 113 lesbians reported that 41% been abused in at least one relationship with another woman⁴.

¹Island, I. & P. Letellier. 'The Scourge of Domestic Violence', *Gay Book # 9*, San Francisco, CA, Rainbow Ventures Inc, Winter 1990, 14.

²Island, D. & P Letellier. 'Men Who Beat the Men Who Love Them: Battered Gay Men and Domestic Violence', Harrington Park Press, New York, 1991, 27.

³Gwat-Yong Lie and S. Gentlewarrior. 'Intimate Violence in Lesbian Relationships: Discussion of Survey Findings and Practice Implications', (1991) 15 *Journal of Social Service Research* 46, The Haworth Press.

⁴Ristock, J. 'And Justice for All?...The Social Context of Legal Responses to Abuse in Lesbian Relationships', (1994) 7 *Canadian Journal of Women and the Law* 420.

Studies of other populations in the LGBT community have documented even higher rates of abuse over respondents' lifetimes. The Portland, OR-based Survivor Project's 1998 Gender, Violence, and Resource Access Survey of transgender and intersex⁵ individuals found that 50% of respondents had been raped or assaulted by a romantic partner, though only 62% of these individuals (31% of the total) identified themselves as survivors of domestic violence when asked⁶.

One might criticize the sample sizes and methodologies of some of these studies, but the remarkable uniformity of their findings strongly suggests that domestic violence is experienced by a large percentage of LGBT individuals at some point in their lives. Consequently, most LGBT domestic violence researchers and service practitioners start from the point of view that domestic violence in LGBT relationships is just as widespread as domestic violence in relationships between heterosexual couples. Rather extensive studies of the latter suggest a prevalence ranging from 20%-35%, depending on the definition of domestic violence used⁷.

Special Issues in LGBT Domestic Violence

While LGBT domestic violence may be as prevalent as heterosexual domestic violence, it is not in all ways identical. Perpetrators often attempt highly specific forms of abuse, including:

- ~ "Outing" or threatening to out a partner's sexual orientation or gender identity to family, employer, police, religious institution, community, or in child custody disputes
- ~ Reinforcing fears that no one will help a partner because s/he is lesbian, gay, bisexual or transgender, or that for this reason, the partner "deserves" the abuse
- ~ Alternatively, justifying abuse with the notion that a partner is not "really" lesbian, gay, bisexual or transgender; i.e., s/he may once have had or may still have relationships with other people, or express a gender identity, inconsistent with the abuser's definitions of these terms
- ~ Telling the partner that abusive behavior is a normal part of LGBT relationships, or that it cannot be domestic violence because it is occurring between LGBT individuals

⁵Intersex people are those who "naturally (that is, without any medical intervention) develop primary or secondary sex characteristics that do not fit neatly into society's definitions of male or female." *The Survivor Project, Guide to Intersex and Trans Terminologies*, <http://www.survivorproject.org/basic.html>.

⁶Courvant, Diana and Loree Cook-Daniels, "Trans and Intersex: Survivors of Domestic Violence: Defining Terms, Barriers, & Responsibilities", <http://www.survivorproject.org/defbarresp.html>.

⁷Lundy, S. 'Abuse That Dare Not Speak Its Name: Assisting Victims of Lesbian and Gay Domestic Violence in Massachusetts', (Winter 1993) 28 *New England Law Review* 273.

NCAVP-AFFILIATED ORGANIZATIONS CONTRIBUTING TO THIS REPORT

CALIFORNIA

Queer Asian Women's Services

Asian Women's Shelter

3543 18th Street

Suite 19

San Francisco, CA 94110

Phone: (415) 751-0880 (hotline)

Phone: (415) 751-7110

Fax: (415) 751-0806

INCIDENT NARRATIVES

Violence Recovery Program, Fenway Community Health

*Kelley, 53, female, bisexual, Vietnamese,
urban*

From the beginning of my relationship with Amy, everything was always focused on what she "needed" or wanted. At first I loved her insistence that we were everything each other needed and the closeness we had. Over time, however, that closeness became smothering and turned into control and suffocation. Amy controlled most of the relationship including what doctors I saw and what medications I took. She also encouraged my abuse of prescriptions. Her control of this seriously compromised my health and I ended up with weekly multiple seizures and daily migraines. Amy demanded that I do all the cleaning and cooking and controlled how much I spent on groceries. If I went to bed early because I was exhausted or sick, she insisted that I was not fulfilling my commitment to her. Amy also cared only about her own sexual pleasure - for example, if I did not touch her in the right ways, unprompted, often enough, or if I did not say the right things, she would insist that I didn't love her. She also demanded that I "make love" whenever she wanted, regardless of what I wanted. I can't remember how many times she would wake me in the middle of the night and demand to make love right then. It didn't matter that there were things she liked that I didn't or wasn't comfortable with and somehow these things became necessary for her fulfillment. Last spring, I became suicidal and my physician sent me to the hospital. Despite my fear of talking about my situation, I was going to tell the hos-

- ~ Monopolizing support resources through an abuser's manipulation of friends and family supports and generating sympathy and trust in order to cut off these resources to the survivor.
- ~ Portraying the violence as mutual and even consensual, especially if the partner attempts to defend against it, or as an expression of masculinity or some other "desirable" trait

There is an additional and uniquely same-sex DV twist to type of abuse where an abuser will contact DV service programs requesting assistance as the victim. Most DV programs are not trained in how to work with those in same-sex DV situations, or how to screen for abusers among those requesting services identifying as victims, and will often offer services only to the "first caller" and deny services to the subsequent caller from the same relationship.

This last point merits additional discussion. There is a frequently held ideology that situations of abuse in same-sex couples cannot have a power differential due to the lack of a differential in power bestowed on the parties by a sexist society, and that therefore abuse in LGB relationships must be mutual. This is based on an extremely gendered and heterocentric understanding of domestic violence and could not be further from the truth. Nevertheless, because of this misconception, many service providers, law enforcement officials or others will simply assign the label of "Mutual Abuse" to any situation involving battering in an LGTB relationship.

The label "Mutual Abuse" is more likely to be placed on situations where the victim attempts to fight back in defense against the abuser. We see this misdiagnosis in heterosexual relationships as well, often followed by further mishandling of some cases in which both partners are arrested and brought before the court.

Since domestic violence is defined as an imbalance of power in which one partner aims to control the other partner and thus the relationship, there is no possibility of "Mutual Abuse." "Mutual Abuse" would imply that both partners in the relationship had equal power, equal access to resources, equal opportunity to exercise agency without harmful or dreaded consequence from the other. Where power is shared equally in this way, there is no definition of domestic violence. This is not to undermine the very real experience of people who are in dysfunctional or bad relationships, however this document refers to situations in which an imbalance of power and thus domestic violence is present. It is completely inappropriate and extremely harmful to treat situations of domestic violence as simply "bad relationships" therefore it is necessary to do an assessment for domestic violence in all work with singles, couples and families.

HIV/AIDS and DV

The presence of HIV/AIDS tends to lead to other fairly specific dynamics. For example, HIV illness can act as a potent emotional stressor that precipitates some incidents of abuse. In addition, the outcomes of domestic violence can become more serious when they directly or indirectly affect an HIV-positive person's health status, as in some of the examples below:

- ~ The abuser may threaten to tell others that the partner has HIV/AIDS.
- ~ An HIV-positive abuser may suggest that s/he will sicken or die if the partner ends the relationship (or alternatively, that the abused partner's health will fail). The threat may have the ring of truth, if the HIV-positive partner is dependent on the other for housing, nutrition, health care or other forms of support.
- ~ An abuser may withhold, throw away or hide a partner's HIV medications, cancel medical appointments, or prevent the HIV-positive partner from receiving needed medical care. An HIV-positive abuser may even do the same things to him/herself, in an attempt to blackmail the partner.
- ~ An abuser may take advantage of an HIV-positive partner's poor health by using it as a rationale to limit contact with other individuals, assume sole power over a partner's economic affairs, and foster a partner's utter dependency.
- ~ The threat of physical violence can become more potent to HIV-positive victims, who may be too weak to defend themselves or may fear the HIV-related complications (easy bruising, infections, slow or difficult healing) that can result from being subjected to physical harm.
- ~ An abuser with HIV/AIDS may infect or threaten to infect a partner, or may use claims that the victim is responsible for the abuser's sero-conversion and use this as a reason why the victim cannot leave.

Barriers to Addressing LGBT Domestic Violence

There are many significant obstacles to addressing LGBT domestic violence (both for service providers and for survivors), some of which are implicit in the observations above. In addition, the widespread belief, exploited by some abusers, that domestic violence does not occur in LGBT relationships, coupled with overall societal homophobia creates an atmosphere in which visibility and knowledge about this issue is minimal and survivors experience extreme isolation. Few programs and resources exist for LGBT DV survivors. While some progress has been made in recent years in public awareness and education of those who work with DV survivors, training law enforcement, health care professionals and other service providers on how to provide appropriate, sensitive and effective intervention for LGBT survivors still remains a vast task in which we have only begun to make the tiniest dent.

tal's psychiatrist the truth about everything when Amy showed up. When the doctor left Amy and I alone, she said "If you end up going into the psych hospital, I'll kill myself." I had no idea how to handle that, so I didn't say anything more to the doctor. I made two more suicide attempts and was also cutting myself on a regular basis. When Amy found out about this, she screamed and threw things at me. She physically and sexually assaulted me as well. Finally, I told my therapist what was happening to me and she helped me locate a safe place to go. It's been a year since I've seen Amy, and after a lot of hard work, I am now getting my life together on my own terms.

LA Gay and Lesbian Center

Helen, 35, female, lesbian, urban

I met Lupe at a party a year ago shortly after my divorce. Our connection was strong and we spent all of our free time together. She moved in with me a month after we met and treated me like royalty. She insisted on doing the grocery shopping, bought me a new wardrobe and drove me to work each morning.

In fact, Lupe was the opposite of my ex-husband who abused me the majority of the time we were married. To my surprise, my family was even supportive of our relationship because they thought I'd be safer with a female partner. Several months into our relationship, Lupe began calling me at work 2 to 3 times during the day. I asked her to stop because my boss was upset about it. She laughed and said, "Your boss should mind her own business. I'll call you anytime I want to call you." When I worked late, she would come by the office and make a scene. One night, she didn't come by the office but waited for me at home in the dark. When I turned on the lights, she accused me of cheating on her with my ex-husband, threw me against the wall, and raped me at gunpoint. I was I

too frightened to tell anyone and even believed that my family would dismiss her behavior and encourage us to stay-together because they thought she was much better for me than my husband had been. She became increasingly possessive and abusive and threatened to kill me and my ex-husband. She eventually began beating me consistently. I called a domestic violence hotline and the hotline counselor wanted to focus on the abuse in the relationship with my ex-husband rather than my situation with Lupe. I finally had Lupe evicted and got a restraining order. She still called and drove by the house several times a day. I began dating someone else. One night, my partner Brenda and had bacon and eggs for dinner then went to bed. Unfortunately, Lupe still had keys to the house and she came in had bacon and eggs for dinner then went to bed. Unfortunately, Lupe still had keys to the house and she came in that night, heated the bacon grease, walked into the bedroom and threw the hot grease on us. I managed to call the police and she was arrested. Brenda and I received 2nd degree burns.

I never felt safe again in my house after that so I sold it. I read about the L.A. Gay & Lesbian Center's STOP Partner Abuse Program in a newspaper article about domestic violence and called them. They understood my situation and really helped me through the earlier rough parts. Once I was safe, they helped me explore my options and encouraged me to join a survivors' group. Sometimes I question if I should change my name and move out of state even though I don't want to leave California. My counselor and members of my group at the L.A. Center are helping me sort everything out. I'm finally beginning to believe that I'll get through this.

In recent years, there has been increased focus by the LGBT community on achieving public recognition for LGBT relationships and families. However, there is still little to no acknowledgement that, unfortunately, where couples and families exist there is also DV. Great pressure is brought to bear on those who bring LGBT DV to the public eye to silence themselves. There is fear that airing problems among LGBT people will take away from any progress toward equality. Instead, it is the view of NCAVP that addressing DV, and other issues that confront LGBT people, is a way of building a stronger community. The LGBT community is responsible, not only for seeking acknowledgement and equality of rights for LGBT couples and families, but also for creating safe spaces within the community where all couples and families can live, grow and thrive.

NCAVP, it's member organizations, LGBT Anti-violence projects and individual activists in various parts of the country have been working to bring the issue of domestic violence to the forefront in the LGBT community, but there is still a long way to go. In addition to this denial, there are other external obstacles that face survivors attempting to gain assistance and safety from abuse in their relationships. These barriers include:

~ Poor or inconsistent law enforcement response. While in recent years, more law enforcement officers have been trained to recognize and deal with domestic violence in heterosexual relationships, there has been little training about how to respond when there is a situation of LGBT DV. Some progress has been made in the few places where an anti-violence project has been able to establish a relationship with the local police department, in a few regions the results have even been quite successful. However, in most areas police response to LGBT DV is still lacking or even poses danger for LGBT people. Police officers in general are more apt to view violence between LGBT individuals, especially partners of the same gender, as mutual or consensual abuse. Even among those well-meaning officers, few police receive the training necessary to distinguish the actual abuser in many incidents of LGBT domestic violence, such that the arrest of the victim is not an infrequent occurrence. In addition, many police officers continue to express homophobia themselves or at least act as its instruments in other contexts. The consequent fear of the police prevents many LGBT victims of domestic violence from seeking the assistance of law enforcement themselves. Additionally, many LGBT people do not utilize the police for other reasons including fear of race-based bias or violence, because of the immigration status of either the victim or abuser, or an overall fear for how they or their partner will be treated in police custody because of LGBT identity. Victims of DV want the abuse to stop but, most love their partners and would not want to risk placing them in harm's way, even if it means continuing to experience abuse or even threat to their own lives.

~ Limited Access to Civil Court orders of protection As is outlined in great detail in the legal section and appendix of this report, family courts in many jurisdictions adjudicate domestic violence cases only between married and/or heterosexual partners who have a child in common. LGBT victims of domestic violence who seek judicial relief generally must turn to the criminal court system, which is not equipped to respond to their needs. Criminal courts may require, for example, that the abusive partner has been arrested or charged with a crime before considering a victim's petition for an order of protection or its equivalent, and may still deny that petition if the victim cannot present substantial proofs of injury and/or continuing endangerment. Criminal courts also do not provide access to the array of public and private domestic violence services that are considered integral components of many family court systems.

~ Lack of accessible and sensitive services. Even if more victims of LGBT domestic violence could obtain access to family courts, they might still be denied many services—such as emergency shelter, medical treatment, financial assistance, psychosocial counseling, job training, legal services and many others—that these forums routinely prescribe for battered heterosexual women. The problem is especially acute for male and transgender victims of LGBT domestic violence who seek help from organizations that only serve women. But even lesbians are routinely denied access to many mainstream domestic violence organizations, ostensibly because their abusive female partners might too easily infiltrate them. Additionally, many service providers, like police officers, are not adequately trained to recognize the special dynamics apparent in many cases of LGBT domestic violence. Some may even designate as the "victim" whoever seeks their services first, putting other clients at risk by potentially including batterers in survivor service environments like shelters and support groups. Even well intentioned DV service providers, who attempt to assist an LGBT survivor of DV may not have the knowledge of the special issues facing such survivors and ultimately may not be able to offer services that feel relevant or effective to an LGBT person. Training is needed to make sure that those providers who have some awareness and interest in helping LGBT DV survivors have the knowledge and tools to do so, and that those providers who are less aware and are insensitive or perhaps even hostile to LGBT survivors, are made aware of the issues involved and their duty to providing a safe and respectful environment for all DV survivors.

~ Victim's fears of being "outed" The abused partner may fear that coming forward as a victim of LGBT domestic violence will endanger relationships with family members, friends, a landlord, coworkers or an employer. Again, the lack of access by LGBT domestic violence victims to the family court system (where proceedings are generally kept confidential), coupled with the lack of meaningful civil rights protections for LGBT people throughout most of the country, makes the concern a

NYC Gay and Lesbian Anti-Violence Project

Darlene, 54, transgender (male to female), Latina, urban

My partner, Martin, abused drugs and beat me if I did not give him money. Many times he sold my things for drugs. I found out that he even got his friends to physically assault me and burglarize my apartment so that he could buy crack. I was hit so hard, I was temporarily blinded. I knew I needed help to get out but was afraid of becoming homeless. A woman from my church noticed my black eyes and bruises and wanted to help me find housing but I was fearful because I thought that would mean coming out to her that I am a person of transgender experience. Since I was on public assistance, I was limited with the types of housing that I could afford. I called the police several times, but eventually they refused to respond to my complaints and did not take my issues seriously. I eventually felt that I didn't have anywhere to turn. It was important for me to find an agency that would respect my identity and also speak to me in my native language. I discovered the NYC Gay & Lesbian Anti-Violence Project and met with a counselor who spoke Spanish and informed me about my rights and other resources such as emergency shelters, hotels and escorting me to my precinct to file an order of protection. Along with the support of the staff, I used this information to find other ways of survival. Through the counseling services I received, I was able to gain the support I needed and most importantly, leave my abusive partner.

Community United Against Violence

Natasha, 42, female, lesbian, African-American, urban

I lived with my partner, Cynthia, for the past eight years. She wanted me to move in with her right away. I felt it was a little sudden, but I thought, "I'm so lucky. She's so amazing." so I really looked forward to it. Right away, though, she started getting angry and her anger seemed to come out of nowhere. For example, she'd get angry when I was talking to a friend or my sister on the phone. She seemed to be paranoid and then would scream things like, "Why are you whispering on the phone? Are you talking about me?" I'd try to calm her down and tell her the truth. She never believed me and would just backhand me across the face. I tried to leave her several times over the years. I would go to my sister's, but Cynthia would always call me, or come over and say how much she loved me and missed me. I went back each time because I was in love with her. One time, after she came and begged me to come home with her, she started yelling at me. I was so fed up with it that I turned around and ignored her. I was at the sink, washing dishes, when I felt something hit my head. I buckled forward from the pain and force. I woke up later in a hospital not knowing how I got there, but she told me she had thrown a heavy glass ashtray into the back of my head. She said, "I'm so sorry I put you in the hospital, baby." The police were there and asked if Cynthia had done it to me. I lied and said, "No, I fell on the stairs." I was afraid of putting her in jail because I didn't want her to suffer. A few weeks ago, she became paranoid again. She accused me of talking about her behind her back when I was talking with a friend on the phone. I denied it. She punched me in the face and then smashed a beer bottle and came at me

legitimate one. Appearing in criminal court, the victim can obtain no guarantee that his or her situation will not be publicized in a variety of ways.

This fear of "outing" can also apply to someone's fear that their status as a DV survivor will be revealed in the LGBT community and, that this will cause them to lose community supports, status or credibility.

~ Victim's hopelessness and/or fear of reprisals - Understanding the barriers to addressing LGBT domestic violence, victims may become hopeless or fear reprisals by a partner, even for making modest attempts to end the abuse. Many abusers play on this fear when they tell their LGBT victims that no-one will help them. Research suggests that the most dangerous time for a victim is when s/he seeks assistance or tries to exit an abusive relationship, so the fear is warranted. These primary factors may be joined by several others, including, in the case of victims who live where there are one or more dedicated responses to LGBT domestic violence, ignorance that these services exist. LGBT anti-violence organizations, despite their best attempts generally lack the resources to publicize their services as widely as they might like, especially in the multiple ways needed to assure broad outreach that includes people of color, non-English speaking populations and other traditionally underserved communities.

LEGAL PROTECTIONS FOR LGBT DV SURVIVORS: A STATE BY STATE ANALYSIS

NCAVP's 1997 edition of this report (published in 1998 by Community United Against Violence), included a section on the availability of protective orders for LGBT survivors of DV around the country. As DV victim advocates know, an order of protection is one of the most important tools in attempting to protect a survivor from further abuse. The legal section published in NCAVP's 1997 report has become one of the most highly requested pieces of information from NCAVP by advocates, service providers, law enforcement, press and law makers, among others. In this year's report NCAVP provides an update to our previously published section on the availability of protective orders to LGBT DV survivors.

Overview and Analysis

The following summary creates four categories to describe the availability of protective orders to LGBT DV victims in various states, "clearly unavailable", "arguably unavailable", "neutrally available" and "affirmatively available." At the end of this report (Appendix A), please find a chart that provides state by state breakdown and explanation of the laws governing protective orders to DV victims.

Domestic Violence Protective Orders Are CLEARLY UNAVAILABLE to Victims of Same-Sex Abuse in Six Jurisdictions

The laws in six states which allow a victim to petition the court for an order of protection are generally written to define eligible petitioners as members of opposite-sex couples. These states include Delaware, Louisiana, Montana, New York, South Carolina, and Virginia.

In South Carolina, for example, the law protects family and household members, but defines those terms to include marital and blood relationships, persons who have a child in common, and a "male and female who are cohabitating or formerly have cohabited." In New York State, domestic violence orders are issued by family courts, which have jurisdiction in family offense proceedings only over persons related by consanguinity or affinity, persons legally married, or persons who have a child in common - all categories which legally exclude same-sex relationships. Montana protects "partners" but defines that term to include only relationships between persons of the opposite sex. In Virginia, the domestic violence statute protects persons who cohabit or who cohabited in the last twelve months, but a

with it. Cynthia screamed "I'll fuck you up so no one will want you." I calmed her down and a few days later, took a bus to San Francisco and got hooked up with CUAV and a women's shelter. It's not been easy because I can't find work or have an apartment and I think about her all the time. I don't want to move back to Phoenix but I may have to if something doesn't change soon.

Buckeye Region Anti-Violence Organization

Jean, 44, female, lesbian, African-American, suburban

My girlfriend, Sasha, and her teenage son, Mike, have lived in my house for four years. We met at a park and never parted. Things were good at first. We were like a family. We started having problems the older Mike became. There's been pushing and name calling, but the real problem is Mike. He's 14 and not much bigger than I am, but he can be really intimidating, especially when four or five of his friends are visiting. He calls me "dyke-bitch," has stolen my credit cards, and has threatened to kill me with kitchen knives and a gun. I have told Sasha about all of it but she ignores me or tells me that I must have done something to deserve it. Recently, when she was out of town, Mike locked me in the basement for two days. I called the police and they offered to help me but Mike threatened to kill me and my cats if I ask him and his mom to leave. I don't know which is worse - the way he treats me, or the way his mom watches him hurt me and then defends his behavior. I don't know what to do.

Mark, 63, male, bisexual, white, HIV-positive, rural

I contracted HIV years ago and now I have AIDS with multiple complications. Last year my partner, Rob, passed away. Larry and I were together for nearly 20 years. I met Rob shortly after Larry died. He seemed genuinely concerned and compassionate. We talked for hours and laughed like school kids. We spent all our time together so he moved into my apartment immediately. I noticed early in the relationship that he was possessive, especially when he was drinking. His drinking seemed to bring out the worst in him. He became violent and would slam me into walls and punch me. He even raped me. He told me that no one would want me because I was used and dirty. I started to believe him. When we were on a weekend vacation in Ohio, Larry raped me again, aggravating the stitches from a recent surgery. Then he went out to the bar and left me in the hotel. I knew that if I didn't get out, I might die. I gathered my things and took a taxi as far as the driver would go—nearly all the way to Columbus. I have no reason to go back to West Virginia, but have no ties in Ohio either. I have no home, I can't work, and I am afraid that Larry will find me no matter where I go.

Horizons Community Services

Jeff, 37, male, gay, East Indian, HIV-positive, urban

My partner, David, and I have lived together for the entire year that we've been together. He and I came to Horizons Community Services for couples' counseling because we both argued all the time. After the intake, the counselor suggested that we might benefit from individual therapy instead of couples counseling. I was relieved because I didn't feel comfortable talking about our problems with David in

1994 Attorney General Opinion defines "cohabit" as persons living together as husband and wife, explicitly excluding roommates and members of lesbian and gay relationships from the class of persons protected by the law.

Arizona was part of this category in the 1998 survey. In 2000, the Arizona legislature removed the words "opposite sex" from the statute, making same-sex domestic violence orders neutrally available in that state.

Domestic Violence Protective Orders Are ARGUABLY UNAVAILABLE to Victims of Same-Sex Abuse in One Jurisdiction

The domestic violence statute in Florida is written so that a court could easily interpret it to limit protection to heterosexuals, or to require acknowledgment of an illegal sexual relationship when petitioning for protection.

The Florida statute protects persons "residing as a family." But sodomy laws in Florida criminalize homosexual acts and Florida bans same-sex marriage - legal policies which would support an argument that domestic violence orders were not intended to protect same-sex couples.

Mississippi and Maryland were part of this category in the 1997 survey. Mississippi's statute protects persons "living as spouses." Much like in Florida, laws banning sodomy and prohibiting same sex marriage support an argument that domestic violence orders were not intended to protect same-sex couples. However, in 2001, the legislature added protection for individuals in dating relationships. This addition provides an alternative basis for same-sex protection orders and makes these orders neutrally available in Mississippi.

Maryland's statute protects cohabitants, but defines a cohabitant as "a person who has had a sexual relationship with the respondent in the home" for a specific period of time. At the time of the 1998 survey, acknowledging a same-sex relationship in Maryland could leave the victim of abuse vulnerable to prosecution under the state prohibition of "unnatural or perverted sex practices" commonly known as a sodomy law. However, that law was repealed by the legislature in 2002. Consequently, same-sex protection orders are now neutrally available in Maryland.

Domestic Violence Protective Orders Are NEUTRALLY AVAILABLE to Victims of Same-Sex Abuse in Thirty-Nine Jurisdictions

In about four-fifths of the states, the District of Columbia, and Puerto Rico, a victim of same-sex abuse should be able to obtain a protection order because the laws in these jurisdictions are written in gender-neutral language. These jurisdictions include Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, the District of Columbia, Georgia, Idaho, Indiana, Iowa, Kansas, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Hampshire, New Mexico, North Carolina, North Dakota, Oklahoma, Oregon, Puerto Rico, Rhode Island, South Dakota, Tennessee, Texas, Utah, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.

In Colorado, for example, the law protects parties who have been involved in an "intimate relationship" as well as parties who live or have lived together. The District of Columbia protects those who share or have shared a residence and persons who maintain or maintained a "romantic relationship not necessarily including sexual relationship."

In Idaho, domestic violence restraining orders are available to persons who reside or have resided together, and the statute further provides that the law shall be "construed liberally."

Minnesota domestic violence laws apply to persons residing together, or persons who are or have been in a "substantive dating or engagement relationship" as determined by factors such as the duration and type of relationship.

North Dakota's law is one of the most liberal, allowing an action for protection by any person "if the court determines the relationship between that person and the alleged abusing person is sufficient to warrant the issuance of a domestic violence order."

In December of 1997, the North Carolina law was broadened to include "former and current household members" which should allow access to protective orders for at least some same-sex victims; however, the statute also warns that such an order may not be used as a defense for persons charged with the "crime against nature" prohibited by the North Carolina sodomy law.

the room. When we met, he was fun and playful, which I found attractive because I tend to be serious. After a while, the playfulness stopped and he often became enraged, called me names and belittled me because of my positive HIV status even though he knew about it from the beginning of our relationship. I felt horrible about myself. Then our money began disappearing, and I learned that he was seeing other men in the apartment while I was at work. One night I came home from work and found him having unprotected sex with another man. He was so angry that he began beating me with anything he could find. I ran from room to room and ended up in the bathroom where he broke the door down, ripped the towel bar off the wall and hit my head until I blacked out. I felt worthless. I love David but his rage scares me. I hope we can work this out in individual therapists so that we can stay together.

Colorado AVP

Christine, white female, late 20's, lesbian, urban

I called the Colorado Anti-Violence Program in desperation because my girlfriend's ex-partner, Sandra, is stalking and harassing us. My partner, Louise, still lives in the same apartment complex as Sandra. The harassment has been escalating for some time. Sandra routinely calls Louise and threatens to hurt herself or me. She sends Louise harassing emails, calls Louise at home repeatedly, and often follows her to work or elsewhere. Often, Sandra will wait in the parking lot of their apartment building and demand that she and Louise get back together. Sandra has also shown up at my job and has outed me to my coworkers. Recently, Sandra followed Louise to my house and demanded to be let in and then tried to break the windows. She finally left when I called the police. Sandra says that she has go

nothing against me and that she just wants Louise to be her friend. She is trying to convince Louise to go to therapy with her. I just want Sandra to away. Recently, she threatened to kill me. As a result of all, I've gotten to the point where I'm considering breaking up with Louise. We stopped seeing each other previously for short periods of time in an effort to calm Sandra down but nothing seems to help and Sandra has continued to harass us. I have tried getting the police involved but it hasn't been helpful. I just want my life back.

Charles, transgender (male to female), Native American, late teens, rural

The other night my brother beat me up again. He gets angry with me because I am two-spirit but this is a part of our culture. Most people on the reservation don't bother me but some of my brother's friends follow me around and get rough with me. My brother tells me to act like a man and stop dressing like a girl. I live at home with my mom and my sisters. They try to keep my brother from hurting me but usually they can't. I'm afraid to go out because Fred Martinez - a person like me - was murdered here in Colorado. Fred's story was all over the news and seeing it on TV set my brother off and he beat me. I feel like I have to leave home now, but I don't know where I can go to be safe.

Jose, gay Latino, male 30's, urban

I lived in Denver until recently when I fled to Florida to escape my abusive boyfriend, Bobby. I met Bobby through mutual friends at a dinner party. He was handsome and funny. He paid attention to me and, even though we didn't have much in common, we spent a lot of time together. We went mountain biking and camping, museums, parties and sometimes we'd just sit at home watching movies or reading to each other. Bobby slowly began to get

In Massachusetts, an appeals court reviewed a same-sex protection order. While the court's decision focused on the propriety of a mutual protection order in that case, the court failed to raise the issue of the propriety of any protection order for a same-sex couple. Unlike some cases mentioned below in the affirmatively available section, the court in this case never explicitly reviewed the order in regard to the genders of the parties. Therefore this case is not significant enough for one to conclude that Massachusetts should be re-classified as affirmatively available. However, this case may be helpful to someone in arguing that same-sex protection orders are allowed.

A major trend in this category has been the addition of people in dating relationships to the class of protected persons. Since the 1998 survey, eight states have added individuals in dating relationships or something similar to their protected classes. This is particularly helpful to the LGBT community since it can act as a substitute for marriage or sexual relations that may be prohibited in that particular state. For example, Maryland's protection order law protects people in a sexual relationship but the state prohibits sodomy. The dating relationship category provides a useful alternative to same-sex domestic violence victims in that state.

In any of these states, the availability of a protective order for an individual victim of same-sex abuse will depend on a variety of factors particular to the state and to the victim. Some states may protect roommates - others do not. Some states protect persons who are dating - other states require that the parties live together. Sexual relationships may define the protected class, or a sexual relationship may be expressly irrelevant. However, the laws in these states should be accessible by victims of same-sex abuse in the same manner that they are available to victims of opposite-sex domestic violence.

Domestic Violence Protective Orders are AFFIRMATIVELY AVAILABLE to Victims of Same-Sex Abuse in Six States

Only six states affirmatively make protective orders available to victims of same-sex domestic violence. These states include Hawaii, Illinois, Kentucky, New Jersey, Ohio, and Pennsylvania.

Of the four states, only Hawaii specifically addresses same-sex relationships in the statute, providing access to protective orders for "reciprocal beneficiaries." By registering for reciprocal beneficiary status, same-sex couples are granted many of the rights and obligations of legally married heterosexual couples - including protection under Hawaii domestic violence laws. Laws

in the other five states are actually written in gender-neutral terms, but courts in those states have interpreted the statutes to apply to same-sex relationships. One Kentucky court has ruled that the statutory term "unmarried couples" included same-sex couples. Similarly, an Illinois court upheld one man's protective order against his male abuser. In Ohio, at least three courts have found that a member of a same-sex couple is a "person living as a spouse" for the purposes of the domestic violence laws.

New Jersey and Pennsylvania were part of the neutrally available category in the 1998 survey. Since then, there have been court opinions in both states that have interpreted those statutes to apply to same-sex couples.

State by State Breakdown

A chart showing the relevant statutes relating to DV protections and availability of civil court protective orders for LGBT survivors is at the end of this report in Appendix A.

violent. He would pinch me or pull my hair to get my attention. Then he started to push me, hit me and slap me. He was always jealous and wanted to control where I went and whom I saw at all times. I told him that his behavior was hurting our relationship but we would break up and get back together over and over. Even when I asked him to stay away he couldn't leave me alone. The last time he hit me, I decided to stay with friends in Florida but I left my possessions and my cat behind. I came back to Denver to get my things. I had arranged with Bobby to leave the apartment and have a mutual friend let me in. We had even talked about exactly what I would take from the apartment. When I got to the apartment, he was there and refused to give me any of my possessions. He said that I couldn't have any of my things, especially my cat, if I didn't talk to him. I told him that I would leave everything else if I could just have my cat but he refused. I left and checked into a hotel and called the police. They refused to take a report and told me to call a lawyer. All I really want is my cat.

LA Gay and Lesbian Center

Lisa, 39, Latina, Transgender, Urban, STOP Program

I have been living my life as a woman for almost 20 years. Soon after I began my transition, I met Scott. For the first time in my life, I felt accepted and loved for who I was. The abuse began almost immediately. He cheated on me with other women, then blamed me for it, saying I wasn't a "real" woman. When I cried or got angry, he slapped me. We were both shooting crystal and when we were coming down, the abuse usually got worse. I never fought back until one morning 2 years ago when Scott punched me and I hit him on the arm with a lamp. He started bleeding and ran out of the house and called the police.

When the police arrived, I tried to explain to them how he had been consistently abusing me for 20 years. Because he called the police and was bleeding, they arrested me. I spent 4 days in the men's jail, where I was raped and beaten up. The judge kept calling me "he" and "Albert". My lawyer kept trying to help, but it didn't do any good. The court mandated that I attend a batterers' group for an entire year. I went to a program that was close to my home but the counselor actually laughed at me when I told him that I was a woman of transgender experience and insisted that I attend a group for male batterers. I went to the L.A. Gay & Lesbian Center and the counselors there were very helpful and understood me and my situation. They advocated on my behalf but the judge was adamant that I was a batterer and wouldn't adjust the terms of my probation. The Center put me in a group with other abused women who fought back and were arrested. The court also mandated that I pay for counseling but I live a long way from the Center so I had to turn tricks to make enough money to get to the group. There were times when I didn't have enough money for travel and couldn't attend group so the judge sent me back to jail twice. I finally decided to leave Scott. My counselors tried to get me into a shelter but when the shelter staff learned that I had been arrested and that I wasn't born a woman, they refused to help. I went back to Scott out of desperation. Sometimes I think that his abuse is better than living on the streets but there are other times when I'm not sure. It's ironic but the group has been really helpful to me when I'm able to attend. I'm trying to put my life back together, explore options, and do the best I can to stay safe. At least I've got the support I need to do that.

YEAR 2001 STATISTICS

Number of Cases Reported

As noted in the introduction to this report, the nine regions (twelve agencies) that compiled data for this report documented a total of 5,046 incidents of domestic violence affecting LGBT individuals in 2001, compared with 4,048 reported in 2000.

The most statistically significant increases in reported cases occurred in Chicago (from 109 to 201, +84%), Los Angeles (from 2,146, to 3,208, +50%), and Colorado (from 88 to 100, +14%). Reported cases decreased significantly in Columbus (from 91 to 44, -52%), Cleveland (from 19 to 12, -37%), Boston (from 397 to 329, -17%), Minnesota (from 36 to 30, -17%) and New York City (the second decrease in two years, from 471 to 428, -9%). San Francisco reported no significant change in the rate of reporting (from 691 to 694, <+1%).

Also, as noted in the Introduction, caseloads in excess of 100 were recorded in only five of the reporting regions: Los Angeles, San Francisco, New York City, Boston and Chicago. Four other regions—Colorado, Columbus, Minnesota and Cleveland—each reported smaller numbers of cases, ranging from 12 in Cleveland to 100 in Colorado.

Murders

Five regions reported murders attributable to LGBT DV for a total of 7 in 2001. This is an increase from the 5 murders reported in 2000. Murders were reported by San Francisco (1), Chicago (2, one of which took place in Milwaukee, WI), Boston (1), Minnesota (1), and Columbus (2). It should not be assumed that these were the only LGBT domestic violence related murders that occurred last year throughout all regions represented in this report. For example, New York City, which reported all 5 murders in 2000 and a significant number in 1999, reported none in 2001, however grappled with how to classify a number of cases in which domestic violence wasn't deemed the direct cause of death but seemed to clearly exacerbate illness and circumstances that lead to victims' deaths. Another murder in Milwaukee, WI (reported by Horizons, in Chicago, staff from which worked with the local community in responding to this case) initially came to the attention of the community as an incident of bias violence and only upon further analysis became clear that it contained both elements of family violence, and those of a hate crime.

NCAVP documented the following DV related deaths in 2001:

A 59-year old male was murdered by a man the media referred to as the victim's "roommate/landlord," January 6, 2001 in Waltham, Massachusetts. Neighbors reported that the two men had been fighting earlier that night, and the murderer returned later and killed the victim by kicking him multiple times in the head. Police had been called to the house at least 4 times in the past two months preceding the murder

A gay man died as the result of severe brain injury from a gunshot wound inflicted by his former partner on October 5, 2002 in Minneapolis, Minnesota.

The victim had previously obtained a court granted Order for Protection, and called the police repeatedly for help. Police were at the scene on a city street as the shooting took place - the victim had been chased down by his former partner, detained by him, held at gunpoint for a quarter of an hour, and finally shot in the head before law enforcement officers could intercede in the attack. The victim's family knew for some time that the relationship between the two men was often violent, and the victim had made previous unsuccessful attempts to leave, despite receiving support from his family. The police were called six times between the time the Order for Protection was issued and the last attack, including two hours before the actual murder took place. Family members expressed their feelings that police contributed to the death by failing to take seriously the victim's reports of earlier violence, allegedly because it was a same-sex domestic and not a heterosexual situation.

A Latina lesbian, 36 years old, was shot numerous times by her partner's brother in November 2001 in Milwaukee, Wisconsin. The victim was active in the LGBT community in her city and the case was highly publicized. Local activists, friends and family of the victim wanted this case to be prosecuted under Wisconsin's hate crime law. The murderer was reported to have harassed the victim previous to the murder verbally, threatening to kill her and sending her intimidating letters. The murder occurred after the victim's partner had beaten her in the head with a blunt object. The victim followed her partner to her mother's home and knocked on the door. The perpetrator opened the door and shot the victim twice in her head and three times in her body. As the victim lay dying, the murderer and the victim's partner dumped her into the dumpster behind their mother's home. The victim's partner's brother was convicted and sentenced on March 28, 2002 for the murder. He received a sentence of life in prison, which was longer sentence than the DA's office had requested. The judge in the case admon-

The Network/ La Red

Mel, 23, white, lesbian, urban

I'm in my early 20's and fell in love with an incredible woman. It was surprising to find that the feelings were mutual. Caroline worked in the hospital where I was seeking therapy. Our relationship was the most romantic and wonderful experience in my life. I left the hospital and moved in with Caroline upon her request. I believed I had found bliss and security. Although I always knew that Caroline could be jealous, I didn't realize how possessive and accusatory she would become nor did I realize that she had two other loves in her life. The first, a "wife", was 300 miles away and paying \$2000/month with the promise of Caroline's return following medical school. Caroline's other love was vodka on the rocks. The violence, both physical and verbal, escalated. Her blackouts fogged her memory but the assaults happened even when she was sober. One night, with my body severely bruised and my mind overwhelmed from fear and lack of sleep, Caroline accompanied me to the emergency room because she didn't trust me. While in the restroom, I saw a poster about domestic violence. At that moment, a seed was planted. I called The Network/La Red and during the next nine months, they helped me survive. Caroline and her "wife" were dangerous. If I tried to leave, she used the other woman to harass me. My family and friends were tortured with phone assaults and my applications for housing were sabotaged. Then, after an unexplained hit-and-run and fear for my life, I got a restraining order. Promptly thereafter, Caroline dated a woman in my support group specifically to divulge information about me. Out of frustration and panic, I fled the state. After 5 years, I still live in fear.

ished the DA's office for failing to charge this as a hate crime. The police had also been called to the home of the victim and her partner on previous occasions because of domestic violence.

A gay male was sent to prison for killing his batterer in San Francisco, California. This murder was reported in July 2001 by a person who called the crisis line requesting resources for the imprisoned survivor.

A 31-year-old Hispanic man was allegedly shot to death by his former roommate, as was reported by a Chicago LGBT newspaper. The roommate was arrested and held on \$350,000 bond after he recorded a taped confession that he had killed his former roommate. The suspect stated that he had ended the living arrangement with the victim two months prior to the murder and moved in with his girlfriend. The suspect told the police that the victim continued to call him and threatened to expose their former relationship to his girlfriend. The suspect reported driving to where the victim was and shot him in the head and neck.

A gay man was stabbed to death by his roommate in Columbus, Ohio. The victim had filed assault charges against his roommate the previous year, which were dismissed. The perpetrator had several previous charges of domestic violence and assault both against the victim and others. He was sentenced to life in prison for the murder.

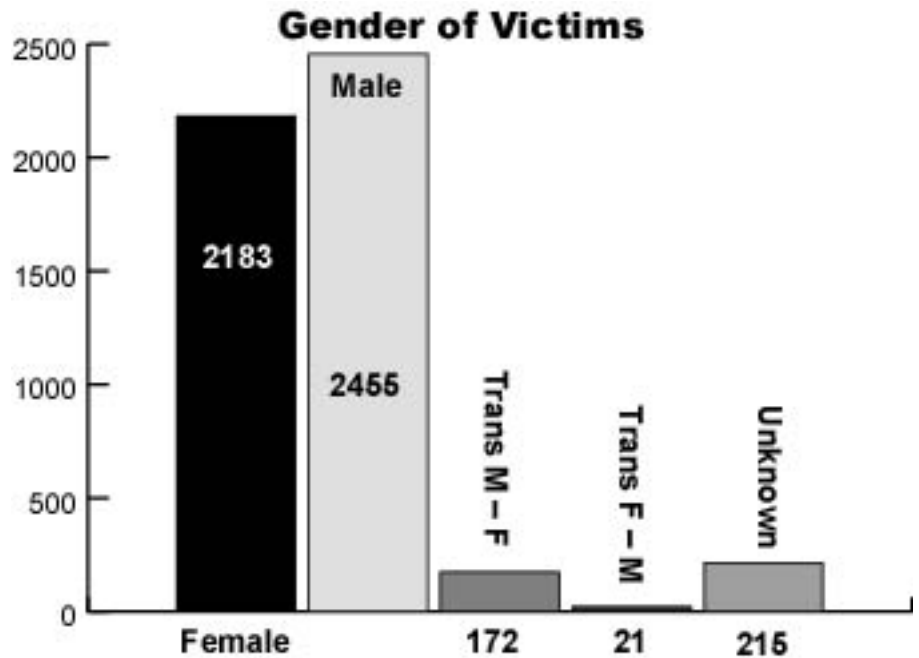
A 57-year-old gay man was bludgeoned to death with a two-by-four by his partner of 20 years in Hyde Park, Cincinnati, Ohio. The perpetrator phoned 911 immediately afterward and confessed to the killing. He was sentenced to life in prison for the murder.

Gender of Victims

In 2001, 2,183 (43%) of the LGBT domestic violence victims reporting incidents to NCAVP programs identified themselves as female, and 2,455 (49%) as male. An additional 4% identified as transgender (the vast majority male to female), while the gender identity of 4% was reported "unknown."

These figures do not differ substantially from the ones recorded for 2000. It should be noted, however, that the relative distribution of gender identity among domestic violence victims reported to NCAVP probably bears little relation to its distribution among LGBT domestic violence victims generally. The Queer Asian Women's Services of the Asian Women's Shelter in San Francisco, as well as the Lesbian, Bisexual, Transgender Anti-Domestic Violence Program of W.O.M.A.N., Inc. in the same city primarily serve women. As well, The Network/La Red in Boston only began expanding its program in earnest to serve people of all genders during 2001, and therefore still had a vast majority of reports from women. In general, NCAVP member organizations that provide domestic violence responses to people of every gender encounter a fairly equal number of men and women or a slightly higher number of men and transgender victims than women. For the reason that most men and transgender people have no other place to turn while some women do access services at mainstream DV programs that are primarily geared toward heterosexual women. In many of these cases survivors remain closeted about the sex of their abuser being the same as their own in order to safely access services without fear of homophobic discrimination from program staff, volunteers or other clients (or in the case of bisexual women seeking support relating to abuse from a male partner, will sometimes identify as heterosexual). This, unfortunately, generally results in the receipt of inappropriate services and additional stress that increases the chances that a victim will choose to return to her abusive partner rather than continue to operate within a stressful "closeted" atmosphere.

Still, the relatively broad distribution of victims across genders demonstrates that gender identity alone has little predictive value in assessing who is likely to seek domestic violence services within the LGBT community. Of course, much more resourceful study is needed to assess whether gender identity plays no significant role in LGBT domestic violence, or whether its role is one that cannot be characterized from the limited data reported to NCAVP.



Sexual Orientation of Victims

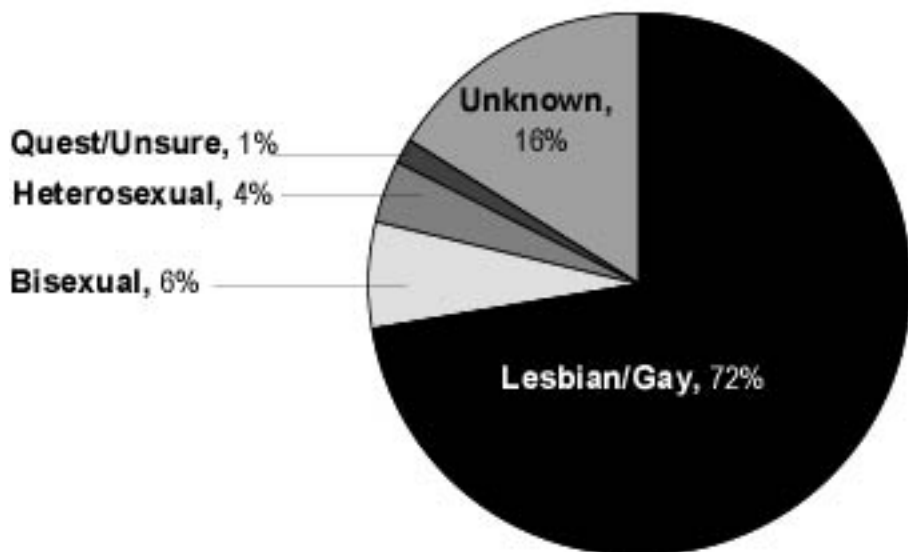
Among all the victims reported to NCAVP in 2001, 72% (3,651) identified themselves as lesbian or gay. This percentage more than likely affected by the fact that one of the participating agencies in Boston (The Network/La Red) did not report information about the sexual orientation of its 265 clients, helping create a disproportionately large number of unknowns which accounted for 16% (813) of all cases. This program has begun collecting data on the sexual orientation of its clients and expects to report this information in the coming year. The remaining sexual orientation breakdown is as follows: bisexual 6% (320), heterosexual 4% (188) and questioning/unsure 1% (74).

These figures should be approached with caution. Some people seeking services from LGBT agencies may identify themselves as "lesbian" or "gay" even if they might describe themselves as "bisexual" or "questioning" in most other contexts. Conversely, some individuals who say they are bisexual do so as an alternative to describing themselves as lesbian or gay: identities they may not wish to express for reasons that have little if anything to do with their actual gender or affectional preferences. It is also likely that some bisexual individuals will try to seek assistance from mainstream service providers, particularly if the domestic violence they experience occurs within the context of an opposite sex relationship - so too, may some self-identified lesbian women who experience continuing victimization by past male partners.

Bisexual victims are also likely to be undercounted if the agency from which they seek services "constructs" the sexual orientation of the victim based on the gender identity of the abusive partner, and does not explicitly query victim self-identification. In general, however, NCAVP member agencies strive to avoid such assumptions by asking for victim to self-identification.

Heterosexuals who access domestic violence services at LGBT agencies, do so for a variety of reason. Some are transgender individuals who identify as heterosexuals because they form relationships with those of the opposite gender. Others are HIV-affected individuals who seek services from LGBT agencies because the latter are better equipped to address the occurrence and consequences of domestic violence involving HIV-affected partners. Finally, some are people who choose to access services at a particular LGBT agency because of its reputation, advertising, location, referral by an LGBT acquaintance or relative, or for other reasons, which may include their questioning their sexual orientation, or that they do not see people like themselves reflected in the public advertising or outreach of other domestic violence service providers.

Sexual Orientation of Victims

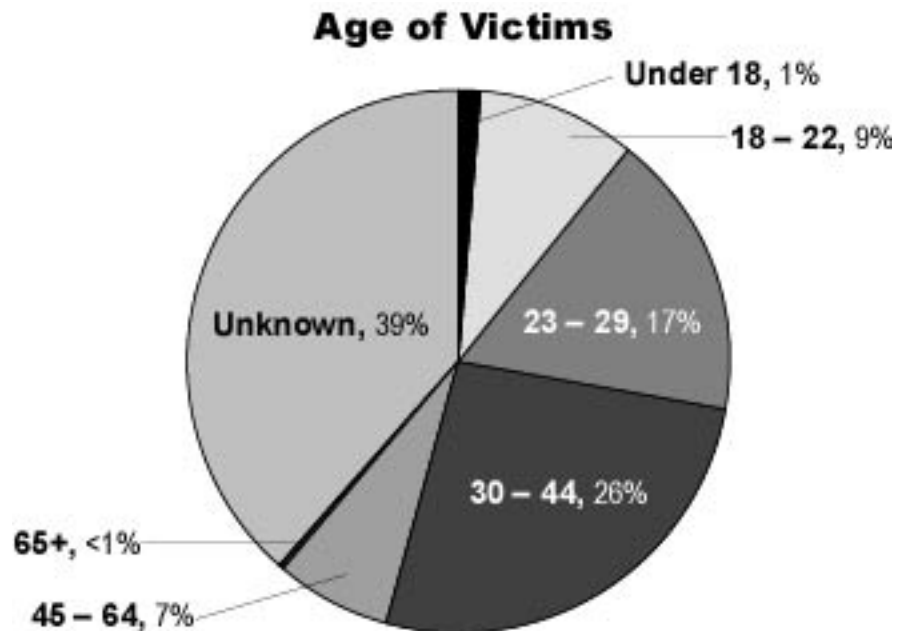


Age of Victims

The largest number of victims reported in 2001 (1,336 or 26%) were in the age category between 30 and 44 years old. However, this is a reduced proportion from 2000 when this category accounted for 44.5% of all reports. 860 (17%) victims of the 2001 total were aged 23 to 29, and 477 (9%) were between 18 and 22. Victims between 45 and 64 accounted for another 348 (7%), while those in the over-65 and under-18 categories amounted to 15 (<1%) and 66 (1%), respectively.

While there was a significant decrease in the percentage of reports by 30-44 year olds, the number of "unknowns" rose to a record 1944 (39% - a vast majority of which were recorded in Los Angeles), it is a safe assumption, based on the trends of previous years, that a large number of the "unknowns" would fall into the 30-44 year old age group. The remaining proportion of reports in all other age categories remained similar to the 2000 numbers.

The fact that 97% of all the victims, for whom age was known, identified in 2001 were between 18 and 64 primarily reflects the circumstance that virtually all the agencies participating in this report have been designed to serve adults. NCAVP believes that in actuality, domestic violence affecting younger and older LGBT individuals occurs with much greater frequency



than is documented here. The level to which these age groups are represented at all is primarily a function of member program or affiliates having dedicated youth or senior outreach programs. To wit, the number of reports in the 18-22 category have grown since several programs began or enhanced services to young people during the past two years and the expectation is that as these programs continue to strengthen reports from this age group will further increase in this category.

It is also important to note that violence in the lives of LGBT people under the age of 18 or over the age of 65 may be characterized somewhat differently. While both groups on either end of the age spectrum experience violence within their intimate partnered relationships, abuse by family of origin, guardians or other care-givers is also of major concern during these stages of life. As well, teenagers may be reluctant to report violence by any person in their lives for fear that service providers will make reports to child welfare personnel or statutory rape reports to police. There are additional barriers to charting partner violence among young people, given anecdotal evidence that they may be the least likely group to respond to outreach using 'domestic violence' terminology. It is clear that the existence of violence in the lives of LGBT teenagers and seniors is most likely not less than that experienced by those between these stages of life, and may even present more of a threat. Specialized programs need to continue to be developed to address violence experienced during the earlier and later stages of life.

Race/Ethnicity of Victims

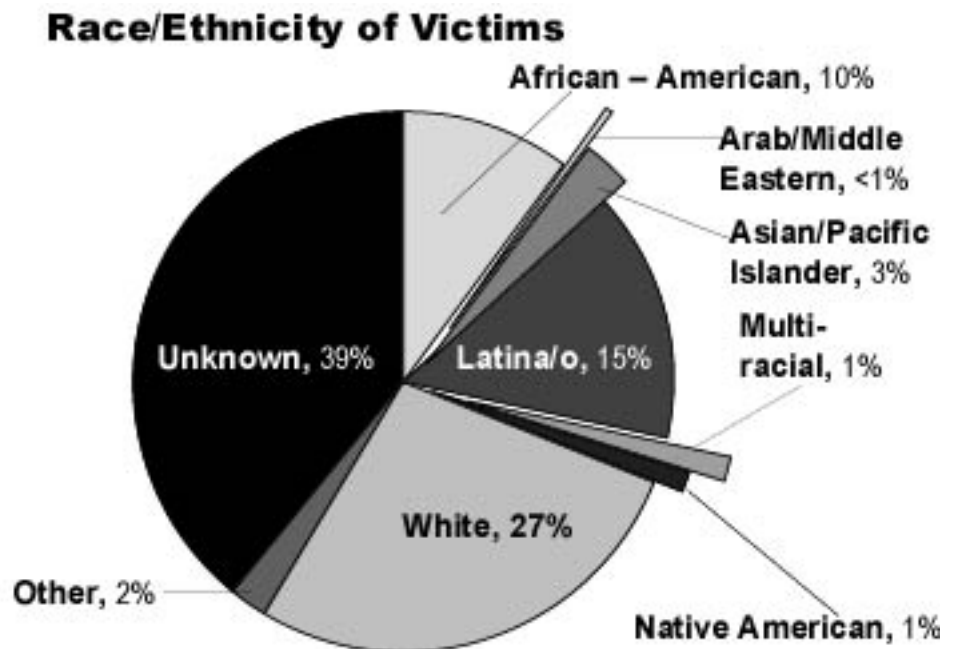
As with age, the race/ethnicity of a large number of reporting survivors was unknown, representing 39% of all reports received in 2001. Therefore race/ethnicity percentage breakdowns will also only take into account the cases in which the race/ethnicity of the survivor was known. As in previous years reports, the greatest number of reports came from those who were white, representing 43% (1,323) of victims for whom race was known. The next highest percentage, 25% (763), of reports came from Latina/o individuals, which represented a substantial increase from 15.1% in 2000. African Americans were 17% (510) of reports in which race was known, a slight increase over 11.1% in 2000. The percentage of reports from Asian/Pacific Islanders 5% (148) also increased slightly after a decrease in 2000 and brings the proportion back to a similar level from 1999.

Members of other racial/ethnic groups continued to account for a very small percentage of domestic violence reports in 2001. These groups included Native Americans (2%), Arab/Middle Easterners (<1%), multira

cial individuals (2%), individuals classified as "other" (4%) and individuals identified as Jewish (2%) (a category which will continue to be tracked by

NCAVP because of this population's vulnerability to bias-related violence, but which is being phased out of the race/ethnicity category during 2003). It should be noted that the numbers of Jewish and multiracial victims were almost certainly underreported, since many may have identified themselves as members of another racial/ethnic community.

Several programs experienced an increase in the diversity of the people they served during 2001. Much of the increased success with reaching out to communities of color was achieved through less-conventional methods of outreach and collaboration work, in which increasing DV reporting levels wasn't the primary expected outcome or reason for participation. Several programs reported increased participation at community events and rallies and actively providing support to various communities around non-DV related issues that were of great mutual import. This activity seemed to increase and be particularly vital, post September 11th, when overall social, political and legislative tones turned more hostile toward many people of color and immigrants to this country. Many of the programs that contribute to this report became more actively involved with overall community discussions about the events of September 11th and efforts to look toward ways to promote peace both within the US and abroad. As well, a number



of anti-violence programs were assisting victims of bias violence and racial profiling which particularly increased for Middle-Eastern and Asian people and those perceived to be of these ethnic groups. While this work may not seem to be directly DV related, a secondary outcome was enhanced relationships with some communities of color and overall increased reports around all issues of violence affecting people in these communities.

Generally, few conclusions can be drawn from NCAVP's limited data about the racial/ethnic distribution of LGBT domestic violence victims as a whole. One of the agencies reporting in 2000 serves a specific racial/ethnic constituency, while most of the others have varying degrees of capacity to provide culturally and linguistically competent outreach and services to all the diverse elements of the LGBT community. Barriers to reporting domestic violence in some communities of color may be even greater than described elsewhere in this report, especially if the victims have additional reason to fear or mistrust the police. Finally, large numbers of LGBT people in every racial/ethnic community do not necessarily identify themselves using this same language or definitions, nor do they willingly seek services from LGBT-identified organizations. People in some ethnic communities do not feel comfortable utilizing many of the venues traditionally offered by many DV organizations as gateways into services, including hotlines, support groups, etc. These ways of reaching out for assistance or communicating may be less culturally aligned with some particular communities of color.

Other Information Recorded About Incidents

Individual NCAVP member agencies recorded a significant amount of additional data about cases of LGBT domestic violence in 2001, including information about crimes/ offenses, injuries, perpetrators and police response. Due to inconsistencies in the type and method of collecting this information, these data are not reported here, but may nonetheless inform the observations made in some of the local NCAVP member reports that follow. Readers seeking more specific information about the incidence and characteristics of LGBT domestic violence are encouraged to read through all the local reports, as well as contact individual NCAVP members with specific questions or concerns. In particular, some NCAVP members are preparing much more comprehensive local reports about their domestic violence services in 2001, of which it is only possible to present brief summaries in this document.

LOCAL SUMMARIES

The following local reports were prepared directly by NCAVP members. The first group of summaries is from regions/programs who contributed statistics to this report. The second group of summaries is from NCAVP member programs where DV programs are in earlier stages of development but will be contributing statistics to this report in the future. All Summaries have been edited slightly to ensure consistency of presentation.

Regions That Contributed Statistics to this Report

Los Angeles, California

The L.A. Gay & Lesbian Center's STOP Partner Abuse/ Domestic Violence Program

The L.A. Gay & Lesbian Center's STOP Partner Abuse/Domestic Violence Program serves lesbian, gay, bisexual and transgender (LGBT) victims and perpetrators of domestic violence as well as those at risk and offers a broad range of services including survivors' groups; a court-approved batterers' intervention program; crisis intervention; short-term and on-going counseling; groups for at-risk youth and adults; criminal justice advocacy; specialized assessment; LGBT domestic violence training, education and consultation; and a multi-faceted prevention program.

Reported cases of domestic violence in Los Angeles increased from 2,146 in 2000 to 3,208 new cases and a total of 3776 domestic violence clients served between new and continuing cases in 2001. The majority of these cases were reported to, assessed by, or brought to the attention of the L.A. Gay & Lesbian Center's STOP Partner Abuse/ Domestic Violence Program (Support, Treatment/Intervention, Outreach/Education, Prevention), Health & Mental Health Services Department, and Youth Services Department. Less than 8% of the total was reported and/or collected by other agencies in the greater Los Angeles area.

The majority of reports (2519) came from individuals who identified as lesbian or gay. There were 170 reports from bisexual individuals and 62 reports from individuals identifying as heterosexual. Of those cases in which the ethnicity of the victim was known (1693), 824 (49%) were reported by LGBT persons of color.

Since 1996, the STOP Program has seen a consistent increase in the number of LGBT persons who report domestic violence or are assessed to be experiencing it. The increases are attributable to progressively expanded

domestic violence programming by the L.A. Gay & Lesbian Center and funding for LGBT domestic violence prevention activities from the California Department of Health Services, Maternal and Child Health Branch. As a result of funding, STOP was able to expand its strategic plan and reach hundreds of people in Los Angeles County - especially those in un and under-served communities - that would not have been otherwise possible to reach in 2001.

To assist STOP with the expansion of its strategic plan, community awareness surveys were distributed to a large and diverse sample of LGBT community members at various Pride festivals and community events in Los Angeles County in 2001. Self-identified members of the LGBT community completed a total of 1522 surveys. While the surveys did not distinguish between self-defensive and primary aggressor behaviors, an average of 46% of the respondents indicated that they had been perpetrators of psychological or physically abusive behaviors in an intimate partnership while 45% indicated that they had been the victim of psychological or physical abuse by a partner. An average of 65% of the respondents reported that they believed that domestic violence was a significant problem in the LGBT community, but ironically, the region that reported the highest rate of battering had the lowest number of respondents who saw it as a problem. While responses varied by geographic region on the issue of whether or not an increase in overall awareness of LGBT domestic violence would contribute to anti-LGBT bias, a sizable percentage of respondents reported that they believed that increased awareness would produce increased bias against members of the lesbian, gay, bisexual and transgender community.

As part of its strategic plan and in collaboration with the L.A. County Domestic Violence Council, STOP developed a service provider needs assessment survey that was distributed throughout Los Angeles County to 1000 domestic violence and social service organizations in an attempt to assess the quality of care offered to members of the LGBT community.

Survey results revealed an acute deficit of awareness, education and training on the part of service providers. Only 4.4% completed and returned the survey. More than half of these respondents indicated that they were unaware of unique issues faced by members of the LGBT community. Only 5 respondents indicated even minimally adequate screening procedures when questioned how they differentiate same-gender victims from batterers. Although 57% indicated that they use gender-neutral language in their informational materials, the majority indicated that they do not use LGBT specific language in the materials. Furthermore, 21 respondents indicated that they wanted to be included in a LGBT Domestic Violence Resource Guide

but 14 of them had no experience working with the LGBT community and had received no training. Of those 14 respondents, 5 identified themselves as "LGBT sensitive" in a county listing of batterers' intervention programs but only 2 actually had received training in LGBT issues/domestic violence. While the majority of survey respondents indicated that their organizations do not have plans to expand their services to the LGBT community and currently lack skills to adequately serve the community, a large majority indicated that they would like more resources for their LGBT clients, increased training and education on LGBT issues/domestic violence, and additional support for their staff when dealing with LGBT clients.

Criminal justice response continued to be problematic in 2001 with improper assessment being commonly evident. As in 2000, a consistently high number of primary LGBT victims were mandated to attend batterers' treatment. As in previous years, the STOP Program saw an increase in the number of LGBT persons referred into treatment by the courts but, because of the unavailability of LGBT specific batterers' intervention programs and the acute need for them, STOP continued to have one of the largest batterers' intervention programs in Los Angeles County where there are more than 150 other court-approved programs designed primarily for the heterosexual community.

Los Angeles County is one of the nation's largest and most diverse counties with 4,081 square miles and an 81-mile long coastline. It has the largest population of any county in the United States and approximately 29% of California's residents live within it. The STOP Program maintains strong collaborative relationships with other domestic violence organizations including the L.A. County Domestic Violence Council, the West Hollywood Partner Abuse Education Task Force, the Statewide California Coalition for Battered Women, the Gay & Lesbian Community Center of Greater Long Beach, and numerous other organizations devoted to intervening with and preventing domestic violence in California. These allies have been instrumental in helping STOP to increasingly meet the challenge of reaching members of the highly diverse LGBT community and their service providers in a geographic region as vast as L.A. County.

During 2001, the number of service providers that requested and received education and training in LGBT domestic violence continued to increase throughout the year. As a result there was an expanded distribution of information and prevention materials and more media coverage about LGBT domestic violence throughout L.A. and surrounding Southern California counties than ever before. An LGBT Domestic Violence Resource Guide for Los Angeles County was produced and distributed

throughout the county. STOP, along with community partners, conducted the second annual "Holidays Free from Family Violence" press conference, an event designed to provide L.A. residents with information about domestic violence in LGBT and heterosexual families. STOP worked in collaboration with the Statewide California Coalition for Battered Women, the Junior League, and State Senator Jackie Speier's office, to develop a bill that would include information about same-gender domestic violence as a requirement of expanded domestic violence training and continuing education of mental health professionals in California.

San Francisco, California

Community United Against Violence

Queer Asian Women's Services of Asian Women's Shelter

W.O.M.A.N., Inc.

In 2001, three collaborating San Francisco agencies documented 694 cases of domestic violence in the lesbian, gay, bisexual, and transgender & questioning (LGBTQ) community. The agencies that collected domestic violence data were W.O.M.A.N., Inc., Queer Asian Women's Services of the Asian Women's Shelter (QAWS), and Community United Against Violence (CUAV). W.O.M.A.N. Inc., and QAWS focus on women survivors and CUAV serves all genders. Female survivors accounted for 399 of the incidents reported and Community United Against Violence documented 251 incidents reported by male domestic violence survivors. Transgender survivors accounted for 43 reports and there was one report from an individual that identified as intersexed.

The three collaborating agencies continued to make inroads in the number and range of services available to LGBT survivors. QAWS employed dinner parties to outreach to underserved groups, including immigrant communities. These dinner parties, were based on a peer resource model, and brought together friends to dialogue about domestic violence and receive training so they could provide peer support in their own communities. For individuals not likely to use crisis lines, friends are often the first line of support for members of particular communities experiencing partner abuse. W.O.M.A.N., Inc., continued its work in providing advocacy and support to the deaf and hearing-impaired communities, by providing trainings and technical assistance to other community groups.

Community United Against Violence strengthened its ongoing efforts to provide services to the most underserved groups within the LGBT community by beginning the long term project of moving away from an over reliance on criminal justice solutions for domestic violence, especially in

communities of color, and looking at ways these communities can have more of a voice around solutions and accountability. Going directly into underserved communities, CUAV is looking at ways to link DV with other struggles facing marginalized groups, especially women of color communities. Through the Love and Justice Project, which is a peer led youth of color program, CUAV is also seeking new and safe ways for youth to discuss dating violence in their lives.

The majority of cases, 461 (66%), came from individuals identifying as lesbian or gay. There were 129 (19%) documented cases from bisexual survivors and 50 (7%) reports from heterosexuals.

Of the total number of DV reports in San Francisco, 554 (80%) captured the race/ethnicity of the survivor. The race/ethnicity of just less than half of those cases (272 cases out of 554, 49%) indicated that the victims were people of color. Latino/Latina survivors accounted for 18% of the cases in which the race/ethnicity of the victim was known. African-American survivors accounted for 15%; Asian/Pacific Islander survivors accounted for 9%; those identifying as multi-racial accounted for 6%, while those who were white accounted for 42% of the cases where race/ethnicity was known (234 out of 554).

Survivors from communities of color and transgender individuals still faced barriers when seeking help. In San Francisco attempts are being made to address this by employing, improving and expanding culturally appropriate and sensitive services at each of the reporting agencies. For example, in 2001, the Asian Women's Shelter city wide multi-lingual access model celebrated 5 years of continual usage. This model provides multi-lingual advocates and translators to mono-lingual speakers. Community United Against Violence has dedicated Spanish and Chinese (Cantonese, Mandarin) speaking staff, who are also bi-cultural. CUAV provided expanded technical assistance to domestic violence shelters, service providers, court personnel, and Bay area law schools. This technical assistance included issues pertinent to queer survivors, youth of color, and transgender communities.

The three San Francisco agencies have been working since the 1980's to provide LGBTQ survivors with in-person counseling, emergency shelter, advocacy and court room accompaniment. They have also diligently worked at the equally daunting task of bringing queer and same-sex domestic violence to public awareness. These long standing programs have also been aided in their work by a network of other San Francisco based agencies, including the Family Violence Project, the Riley Center, Bay Area Legal Aid and La Casa de las Madres, and while not providing data for this report,

these agencies have been invaluable allies, providing their expertise on specific cases.

Colorado

The Colorado Anti-Violence Program

The Colorado Anti-Violence Program (CAVP) reported 101 domestic violence cases in 2001, a 14% increase over the total (88) reported in 2000. This continues a five-year trend of steady increases in reporting to the agency. It should be noted that these figures are representative only of domestic violence incidents reported to or brought to the attention of the CAVP. There is no common intake form for service providers in the state, and only a few organizations and agencies actually track LGBT domestic violence.

In 2001, (42) 42% of victims identified as female and (36) 36% identified as male, as compared to (49) 56% and (35) 40% in 2000. The number of female identified victims decreased 14% while the number of male identified victims increased 3%, reversing 2000's trend. More significantly the number of transgender male-to-female-identified victims increased rose to 7 compared to none in the previous year. This is consistent with CAVP's documented increased reports from transgender victims in all categories of violence. However, it is unlikely that this reflects an increase in domestic violence involving transgender victims, but rather is due to CAVP's increased visibility and accessibility within the transgender community.

CAVP documented a 233% increase in reporting levels from African Americans (3 to 10), a 200% increase from Latino/as (6 to 18), and Native Americans (1 to 3). A decrease of 15% among self-identified whites was also documented. Again, the documented increases among people of color seems unlikely to represent an increase of domestic violence in LGBTQ communities of color, rather, the increase likely speaks to an increase in the perceived accessibility and cultural competency of CAVP programs and services to communities of color.

Significant trends were also recorded among reported age categories. Reports from victims 18-22 increased 150% (from 4 to 10). And victims ages 45-64 increased 133% (from 3 to 7). Also significant is the 57% decrease in reports from victims ages 30-44. All other age categories remained virtually the same. It is unclear what would account for the decrease in victims ages 30-44. However, the increase in youth and older victims who reported may again be attributed, at least in part, to increased agency visibility and accessibility to these communities.

In March 2001 CAVP celebrated its first anniversary as a project partner of the Colorado Nonprofit Development Center, an incubator for new non-profits. Despite the challenges of decreased staff and the demands of transitioning an independent organization, CAVP continues to provide high quality services to victims in Colorado, illustrated by the continuing increase in reporting and significant increase in the diversity of those reporting during this period.

Chicago, Illinois Horizons Community Services

Horizons Community Services in Chicago observed another significant increase in the number of domestic violence incidents reported for the year 2001. There was an 84% increase in reports of domestic violence incidents from 109 in 2000 to 201 in 2001.

Horizons Community Services is committed to community outreach. Through our efforts, more and more agencies, institutions, and individuals have become aware of our Anti-Violence Program, and access our services. Horizons continues to be a major referral source for other agencies whose clients identify as LGBTQH (Lesbian, Gay, Bisexual, Transgender, Questioning, and/or HIV impacted). Horizons works in collaboration with the Chicago Police Department and is utilized as a referral source for the Department. Horizons has made it a priority to provide roll call trainings in as many districts as possible, and has successfully been able to meet this goal.

A collaborative effort between Horizons Community Services Anti-Violence Project, the YWCA Metropolitan Chicago LGBT Sexual Assault Program, Howard Brown Health Center and the Chicago Connections Women's Program has enabled Horizons to expand roll call trainings to the south side of Chicago and increased outreach to communities of color through a groundbreaking media campaign (posters, palm cards) that the agency hopes to expand next year with increased funding. The campaign specifically targets the African American and Latina/o communities. In 2001, Horizons Community Services Anti-Violence Project collaborated more effectively with internal programs such as the Mature Adult Program and Youth Services. It is most likely that in 2001 the numbers rose across age, gender and sexual orientation, race/ethnicity due to outreach efforts and the aforementioned collaborations rather than domestic violence rising as an issue within the LGBTQH communities.

In 2001 there was a significant increase in the 30-44 year old bracket from 59 to 107 (81%), and in the 23-29 year old bracket from 11 to 44 (300%). There was one incident reported in the 65 and older bracket, where last year none were reported. Reported incidents from African American survivors increased from 40 to 100 (150%). Sadly, there were two reported domestic violence related murders for 2001, (up from none reported in 1999). Work related to one of the murders led Horizons staff up to Milwaukee to help support community members there and to organize and respond effectively to the incident that also included elements of hate motivation.

Horizons Community Services is committed to reaching diverse groups of people who identify as LGBTQH in and around Chicago. This commitment and outreach efforts to date have resulted in an increased awareness that domestic violence does happen in the LGBTQH community, and that there are resources for those impacted by the violence. The rise in reports over the past few years indicates that the reported numbers have only just scratched the surface of LGBTQH domestic violence in the Chicagoland area and that with increased resources a truer picture of the extent of this issue throughout these diverse communities may be revealed.

Boston, Massachusetts

The Network/La Red: Ending Abuse in Lesbian Bisexual Women's and Transgender Communities

The Violence Recovery Program at Fenway Community Health

Boston had two reporting programs in 2001, The Violence Recovery Program (VRP) at Fenway Community Health and The Network/La Red: Ending abuse in lesbian bisexual women's and transgender communities (The Network/La Red). The VRP reported 64 cases. The Network/La Red reported 618 cases with 265 new cases and 353 ongoing cases; the combined total cases of 682 from both reporting agencies. There continued to be an increase in reporting of new cases from the past three years, with 193 reports in 1998, 289 reports in 1999, and 397 reports in 2000.

The growth in reported lesbian, gay, bisexual and transgender (LGBT) domestic violence cases can be explained by several contributing factors. The Network/La Red had a yearlong visibility campaign, which began at the end of 2000 and continued through 2001 with concurrent advertisements in LGBT and mainstream media, public transportation and distribution of material through out the state. The VRP increased outreach in the Southeastern and Cape Cod areas of Massachusetts. Both VRP and The Network/La Red continued training and outreach to criminal justice professionals, college groups, mainstream domestic violence programs, and GLBT social groups.

The gender identity breakdown continued to be overwhelmingly female not because of greater frequency of domestic violence in woman to woman relationships, but because The Network/La Red's primary outreach is to lesbian, bisexual women, and transgender communities, while the VRP targets outreach to female as well as male and transgender individuals.

The Network/La Red saw a significant increase in the number of transgender individuals, with 29 male to female (MTF) individuals and 8 female to male (FTM) individuals reporting this year verses 12 MTF individuals and 1 FTM individual who reported in 2000. This probably occurred in combination with the name change of the organization, which was in effect for over a year and targeted outreach to transgender communities through advertising and workshops at transgender conferences.

The VRP saw a significant increase in the number of individuals in 45-64 age range with 14 reported this year verses 6 in 2000 (+133%). This increase probably occurred because there had been added outreach to older GLBT folks and an increased awareness by older age groups about abuse. Also, greater numbers of older GLBT people are out whereas in earlier years many more remained closeted.

The cases reported here are only representative of those individuals who came forward to either the VRP or The Network/La Red and are probably a significantly lower number of total actual cases as many LGBT victims of domestic violence do not report abuse, often do not seek out services, or may have received services from other domestic violence programs not represented in this report.

New York, New York The New York City Gay & Lesbian Anti-Violence Project

The New York City Gay and Lesbian Anti-Violence Project (AVP) primarily serves lesbian, gay, transgender, bisexual and HIV affected (LGTBH) victims of hate crimes, domestic violence, pick-up crimes, rape, sexual assault, HIV-related violence, police misconduct and abuse, as well as friends and family members of victims murdered in bias crimes.

September 11, 2001 brought New York City face to face with horror, shock, and great loss. AVP noted a variety of after-effects following 9/11 including anti-gay/anti-Arab bias/hate crimes, an observable increase in walk-in clients suffering from exacerbated symptoms of mental illness or distress related to PTSD, and DV victims in escalating situations of abuse who were more than usually fearful of taking action against their abusive partners.

Many DV clients reported feeling that their problems were insignificant in comparison to the attacks and the continuing onslaught of new dangers. Many who had planned to leave abusive situations prior to September 11th almost without exception chose to stay with their batterers after the attacks. One woman who had planned to enter a DV shelter prior to 9/11 reported after the attacks that she was afraid to be with strangers if something else happened. A male DV survivor, and regular client, had escaped his batterer only months earlier and lived in the downtown area and had worked at the Towers. He was not heard from after 9/11 and it is believed that he perished in the attacks. Many clients from the outer boroughs were fearful to travel into the city. Clients even within the Manhattan area hesitated to take trains further into midtown. Many clients, as well as most New Yorkers, have experienced various degrees of hypervigilance, difficulty sleeping, nightmares, changes in appetite, fatigue and other symptoms all consistent with acute and on-going responses to trauma. Regular crisis intervention counseling and safety planning has been needed, not only to address DV but to help clients stabilize in the aftermath of the terrorists' attacks, threats of anthrax and on-going concerns about the war. 2001 ended as a challenging year overall and for many DV victims compounded the difficulties they face.

In 2001, AVP served 428 new DV clients, and provided services to 118 on-going DV clients. Ages served ranged from under 18 to over 65. 43% were gay men including one transgender identified man, 35% were lesbians including a transgender-identified woman, 10% included heterosexual women and men including transgender-identified women and one transgender-identified man, 3% were bisexual women and men, 9% were unspecified. Transgender-identified clients accounted for 5% of all DV clients. 25% of clients were African American, 26% Latina/o, 26% Caucasian, 3% Multi-Racial, 3% Asian/Pacific Islander, 1% Jewish, .5% Native American, .5% Arab/Middle Eastern, 1% identified as other and 14% were not identified under these categories.

11,157 units of service were provided to new DV clients including bi-lingual English/Spanish hotline and in-person counseling, support groups, referrals, advocacy, accompaniment, court monitoring and assistance locating sensitive, safe shelter. In 3% of DV cases clients directly impacted by the attacks on the World Trade Center accounted for 7% of services. Overall service needs jumped 13% reflecting many of the more complex needs around trauma, loss of employment or housing, etc. which followed 9/11. DV hotline calls that did not result in on-going clients totaled 675 in 2001, an increase from 609 in 2000 and 552 in 1999. These calls ranged from those questioning their experience of and/or their role in an abusive relationship,

to victims who called only in a period of crisis, to social, legal and medical service providers who sought consultation and agency information.

Interestingly intra-familial DV (involving abuse by parents against their adolescent or young adult children) increased 2% and frequently appeared after 9/11 to result in homelessness for the LGTB adolescent or young adult. For those between 30-64 years of age, intrafamilial DV ranged in abuse from verbal slurs and alienation to physical violence. No reports of intrafamilial DV for those 65+ (where adults are victimized by their adult children or other family members) were reported in 2001. This age group is often reluctant to identify as LGTB to family members, caretaking professionals, or others for fear of bias and abuse. They are vulnerable to increased physical, economic and other forms of anti-LGTB violence, including homelessness, as are the younger age groups.

Mainstream society conveys negative or nonrepresentational images of individuals or groups deemed as inferior or unwanted. Many people, not only LGTB, internalize these negative attitudes and beliefs. In DV, issues of class, race, education, immigration and health status can be used as added weapons of abuse. Reported anti-LGTB bias by abusive partners remained high at 29% (43% in 2000, up from 7% in 1999). This is not surprising given the continuing conservative, often hostile and homophobic political climate.

Cleveland, Ohio

The Lesbian/Gay Community Center of Greater Cleveland

The Lesbian/Gay Community Center of Greater Cleveland reported twelve cases of domestic violence in 2001. This number was a decrease from 2000, but an increase from 1999. Reporting of domestic violence to the Center continues to represent only a fraction of the actual cases among the Cleveland lesbian, gay, bisexual and transgender (LGBT) population.

In 2001, the Center formalized its collaboration with Cuyahoga County Witness/Victim Services to increase reporting by and referrals for victim/survivors of anti-LGBT and same-sex domestic violence crimes. The collaboration with the YWCA Domestic Violence Project continued, providing LGBT domestic violence survivors culturally competent counseling and support groups. In the fall, the Center, Witness/Victim, and the YWCA sponsored a community-wide workshop for clients and social service agencies on same-sex domestic violence.

The Center continued to reach out to the community to increase awareness

of available services for and reporting of domestic violence. Informational bar napkins and cards were distributed in social venues, and workshops were held at social service agencies. In 2002, the Center plans to pursue additional grants to expand services and outreach to the community.

Columbus, Ohio

The Buckeye Region Anti-Violence Organization

The Buckeye Region Anti-Violence Organization (BRAVO) collected and contributed data to this report from Columbus, Ohio and the surrounding areas. Columbus reported 44 incidents of domestic violence in 2001, a 52% drop from the 91 reports collected in 2000. Those identifying as female comprised 16 (36%) of the reports, while males made up 28 (63%). There were no reports in 2001 of domestic violence experienced by transgender people. People who identified as lesbian or gay were identified as 37 (84%) of the victims; 4 people did not disclose their sexual identity, and there was one report each by a person who was bisexual, heterosexual, and questioning.

People who were between 23 and 44 years of age comprised 57% of the reports. Of those victims whose age was reported, there were no incidents reported by people under age 18 or over age 65.

In 2001, the overall race/ethnicity of victims was similar to those who had reported in 2000. There were 26 reports from white victims (59%), 6 victims were African-American (14%), and persons whose race was not identified made 12 reports.

Although this report reflects a dramatic decrease in the total number of incidents reported to BRAVO compared to previous years' reports, it cannot be interpreted to reflect a genuine drop in incidents of domestic violence among lesbian, gay bisexual and transgender (LGBT) communities in Central Ohio. A preliminary look at BRAVO's reports of domestic violence from the first half of 2002 indicate that the decreased reporting in 2001 was inconsistent with reporting trends since 1996 and with the number of new reports already received in 2002.

Some possible explanations for the drop may relate to:

- ~ The loss of significant funding specifically focused on serving LGBT communities
- ~ BRAVO's focus in 2001 on providing technical assistance to mainstream domestic violence service providers, thereby placing less emphasis on outreach within LGBT communities

~ A continued reluctance by LGBT people to identify and report domestic violence

In addition, there were qualitative changes in BRAVO's domestic violence program in terms of the amount of service offered to each client. In 2001, more clients received multiple contacts or contacts demanding significant staff involvement related to housing, crisis intervention, safety planning and criminal justice advocacy than in previous years. Lastly, with more mainstream domestic violence service providers in Ohio receiving anti-homophobia and LGBT-specific domestic violence training, it is likely these organizations may be making fewer referrals to BRAVO, especially when serving lesbian and bisexual identified women due to an increased capacity to serve these victim/survivors.

New or Developing DV Programs

(These programs did not contribute statistics in 2001)

Tucson, AZ

Wingspan Domestic Violence Project

The Wingspan Domestic Violence Project (WDVP) reported 94 incidents of domestic violence in 2001 and provided emergency shelter to 12 lesbian, gay, bisexual and transgender (LGBT) victim/survivors of domestic violence.

In July 2001, WDVP merged with Southern Arizona's Lesbian, Gay, Bisexual, and Transgender Community Center. This merger increased the staff, support, and resources of the six-year old WDVP. WDVP gained a full-time program director, two part-time advocates, and 21-trained crisis intervention volunteers, in addition to an administrative assistant, development director, and volunteer coordinator.

WDVP continued to expand its outreach and services to underserved LGBT victim/survivors of domestic violence in Southern Arizona by adding a 24-hour toll-free number for rural communities and a TTY machine to provide access for LGTB members of the deaf community. Additionally, WDVP began weekly satellite office hours at Southern Arizona AIDS Foundation (SAAF) to meet with clients as well as provide on-going training and support to case managers. WDVP is in the process of training the staff at SAAF to complete universal screening for domestic violence with each HIV/AIDS client.

To increase access for low-income, rural, Latina/o, and closeted communities, WDVP provided office hours at satellites in different parts of the city

and in rural communities. WDVP began collaboration with the LGBTQ Youth Program to provide education and increased access to information for LGBTQ youth. Through a Department of Justice Grant, WDVP added a 10-hour a week liaison educator to work with the domestic violence/sexual assault program at the University of Arizona. WDVP translated materials into Spanish and added staff and volunteers that are bilingual and bicultural. WDVP is set to begin an outreach project targeting sex industry workers in collaboration with an HIV/AIDS organization, a substance abuse organization, and a sexual assault agency.

In 2001, the WDVP became an active participant in the Tucson/Pima County Coordinated Community Response Team, which includes representatives of domestic violence service organizations, law enforcement, legal, and medical professionals and various religious communities.

WDVP provided 53 presentations on LGBT domestic violence in 2001. Audiences included LGBT community groups, youth, social service agencies, therapists, students, offender treatment programs, and substance abusers.

Philadelphia, Pennsylvania Pennsylvania Anti-Violence Project at the Center for Lesbian and Gay Civil Rights

The Pennsylvania Anti-Violence Project at the Center for Lesbian and Gay Civil Rights is one of the newer members of NCAVP. The Center provides, among many other services, legal services for LGBT victims of domestic violence. The Center's Anti-Violence Project Attorney represents victims in obtaining Protection from Abuse orders in Pennsylvania's family courts, and assists clients in violence-related legal matters, such as housing and custody. The Center also provides referrals to local social service providers who are sensitive to the issues of LGBT domestic violence victims.

Although the Center has provided these services on an as-needed basis since 1998, the Anti-Violence Project was not formally launched until September of 2001. However, even with no real outreach campaign or formalized project, the Center assisted 20 victims of same-sex domestic violence in 2001.

Since September 2001, the Center has intensified its efforts to serve Pennsylvania's LGBT domestic violence victims. We have launched a court advocates program, in which our summer legal interns acted as domestic-

violence advocates to LGBT victims in Philadelphia Family Court. We have also performed several trainings of domestic violence social service providers, legal services agencies, and court staff, discussing special issues of LGBT victims. We have also designed and distributed a brochure that offers information on the Center's domestic violence services. The Center intends to continue expanding its outreach and education efforts throughout 2002.

Burlington, VT SafeSpace

Burlington's SafeSpace serves lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQQ) survivors of domestic and sexual violence and hate crimes and offers a broad range of services including advocacy, a support line, survivors' groups, emotional support, incident documentation, and education and outreach to the community.

Formerly the Same-Sex Domestic Violence Subcommittee of the Chittenden County Domestic Violence Task Force, SafeSpace was incorporated in December 2001. The original subcommittee was formed by members of Women Helping Battered Women, the Women's Rape Crisis Center, and other members of the community who identified a gap in services for male survivors of domestic violence. Eventually this group broadened its mission to address the needs of all queer survivors of domestic and sexual violence in Chittenden County.

The subcommittee accomplished a great deal between 1995 and 2000 in the area of public awareness and education. Cross-trainings were organized by collaborating agencies to increase everyone's capacity to help queer survivors. The group also collaborated to present forums to educate the community about the problem of physical, sexual, and emotional violence in the lives of LGBTQQ Vermonters. In addition, a brochure was created to increase understanding about domestic and sexual violence in the queer community. The groundwork was being laid to ensure that these services would be readily available and easily accessible to queer survivors.

In June of 2000, the subcommittee was awarded its first grant from the Samara Foundation, and in August, its second from Ben and Jerry's. Later they received another Samara Grant, a Gill Foundation matching grant, and a federal VOCA (Victim of Crime Act) grant from the Vermont Center for Crime Victim Services. These grants facilitated the creation of SafeSpace and allowed the subcommittee to hire a full-time coordinator in November of 2001 and two part-time victim advocates in January of 2002. Calls

began to come in late in 2001 before SafeSpace even officially opened its doors.

POLICY RECOMMENDATIONS

In order to move toward an end to LGBT and all DV, we must continue to work toward overall social and cultural change in all levels of our society. While NCAVP and its member organizations prioritize social change work, it is also necessary to do incremental things to create additional safety and access to services and resources for survivors of DV. Modest changes in government laws and policies, law enforcement practices, funding allocation strategies and service provision standards could bring to domestic violence in the LGBT community the same powerful responses that are currently only available to many heterosexual women.

In pursuit of this end, NCAVP member organizations make the following recommendations to federal, state and local governments, government agencies, funders of domestic violence services and service providers:

Recommendation 1. Enact legally inclusive definitions of family

As is evident in the legal section of this report, while some states and localities define families in ways that are inclusive of same sex and other unmarried couples, many do not or have enacted other legislation that prevents these couples from accessing full protections under the law. The lack of recognition for the true diversity of families creates many barriers to addressing domestic violence and ensuring the safety of survivors and their children. For one, the failure to acknowledge the legitimacy of all relationships and families sets a tone for law enforcement, other criminal justice personnel, service providers and government agencies that greatly impedes efforts to identify domestic violence in LGBT relationships. It also hinders the full protection of LGBT people under laws providing for orders of protection and custody.

Obviously, laws or referenda that define marriage as existing between one man and one woman are inconsistent with this recommendation. But where such laws exist and cannot easily be overturned, exceptions must be made to the extent that persons at risk for violence in any relationship can obtain a surety of protection and assistance.

Recommendation 2. Enact LGBT-inclusive non-discrimination legislation

It is essential to offering equal access to services and shelter for LGBT people that non-discrimination laws governing housing, public accommodation, social services, etc., include provisions relating to sexual orientation and gender identity and expression.

Recommendation 3. Increase access to public and private funding for LGBT domestic violence services and research

It is imperative to the development of more capable services and research in response to LGBT domestic violence that new and continuing funding initiatives include the LGBT community as a priority audience. NCAVP applauds the small number of public agencies and private corporation and foundation funders that have taken this step in recent years, and calls on others to do the same.

Recommendation 4. Adopt LGBT-inclusive standards of service

Consistent with the third recommendation, government agencies responsible for funding, licensing, regulating or certifying domestic violence services should create and enforce general service standards that detail appropriate responses to LGBT individuals who present with a domestic violence-related concern. These standards should prohibit discrimination against LGBT individuals, as well as set out minimum responsibilities for crisis intervention and referrals to longer-term support. NCAVP stands ready to work with the relevant public agencies and the entire domestic violence service community in order to develop these standards in an open and inclusive way.

Recommendation 5. Train more service providers about LGBT domestic violence concerns

While LGBT people are affected by domestic violence in many of the same ways as other individuals, some aspects of the violence many experience are specific to their LGBT identities. All those working to fight domestic violence, ranging from police officers to courtroom personnel and general domestic violence service practitioners, need to understand these issues in order to provide the most appropriate response. Training programs are one highly effective way to foster this broader awareness, and NCAVP stands ready to help design and implement them.

Finally, since most of the readers of this report are likely to be domestic violence service providers themselves, NCAVP offers the following supplemental recommendation:

Utilize training resources offered by LGBT agencies

Throughout many areas of the country, LGBT community-based anti-violence organizations will gladly offer training and other technical assistance to help general domestic violence service providers learn about and better respond to the needs of LGBT individuals. For more information, readers are encouraged to contact NCAVP members in their areas.