



**NATIONAL
LGBTQ
INSTITUTE
ON IPV**



BY & FOR

**The unique services, experiences, and approaches of
LGBTQ domestic violence and anti-violence agencies**





By & For: The unique services, experiences, and approaches of LGBTQ domestic violence and anti-violence agencies

November 2017

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EXECUTIVE SUMMARY

OVERVIEW

Given the high rates of domestic and intimate partner violence (DV/IPV) in lesbian, gay, bisexual, transgender, and queer (LGBTQ) communities, LGBTQ-specific DV/IPV programs play a critical role in addressing their unique needs and experiences. Although LGBTQ-specific DV/IPV agencies have been around for decades, little systematic research has examined their unique services, experiences, approaches or needs.

The National LGBTQ Institute on IPV (then acting as the National LGBTQ Capacity Building Learning Center) conducted a survey to examine these facets of LGBTQ-specific DV/IPV organizations. We distributed an online survey through a national listserv of LGBTQ-specific organizations, and 24 organizations and programs completed the survey.

KEY FINDINGS

- LGBTQ-specific DV/IPV organizations find themselves attempting to balance between providing services to their community and offering training to mainstream organizations.
- Most LGBTQ-specific organizations provide services that aim to create community-level changes for LGBTQ survivors.
- Bisexual people make up a relatively small proportion of survivors that LGBTQ-specific DV/IPV organizations serve.
- LGBTQ-specific agencies mostly provide housing assistance via advocacy with landlords and hotel/motel stays. Rarely do these agencies operate an emergency shelter.
- LGBTQ-specific agencies spend considerable time and resources providing training and technical assistance to non-LGBTQ organizations
- Both LGBTQ survivors and LGBTQ-specific organizations have considerable involvement with the criminal justice system and specifically law enforcement.
- Many promising programs and approaches already exist to address DV/IPV in LGBTQ communities.
- LGBTQ-specific agencies need additional funding to expand and deepen their work.



LGBTQ-Specific DV/IPV and Anti-Violence Agencies: agencies that specifically work with and focus on providing services to LGBTQ survivors of domestic and dating violence. These are often programs that are “by and for” LGBTQ communities.

The National LGBTQ Institute on IPV is a project of lead agency, NW Network of Bisexual, Trans, Lesbian & Gay Survivors of Abuse, and foundational partner, The National Coalition of Anti-Violence Programs (NCAVP).

OVERVIEW

A national study conducted by the Centers for Disease Control and Prevention revealed that individuals identifying as lesbian or gay report experiencing lifetime rates of domestic and intimate partner violence (DV/IPV) comparable to their heterosexual counterparts. Those identifying as bisexual and transgender reported higher rates of lifetime abuse than did heterosexual, lesbian, gay and non-trans respondents.¹ The demonstrated shortage of culturally relevant and comfortable DV/IPV services for LGBTQ people² stands as a disturbing counterpoint to these rates of abuse.

LGBTQ-specific DV/IPV programs play a critical role in serving and addressing the unique needs of LGBTQ survivors, through both the direct services they provide to survivors and the training and technical assistance they provide to other agencies. For the purposes of the current study, LGBTQ-specific DV/IPV agencies are those that specifically work with LGBTQ survivors of DV/IPV. While many DV/IPV programs may be open to serving survivors across all gender and sexual orientation identities, LGBTQ-specific DV/IPV programs focus their efforts on serving these specific cultural communities. Many of these programs are “by and for,” meaning that their services are provided *by* LGBTQ communities, *for* LGBTQ communities.

Despite the important role of LGBTQ-specific agencies, little systematic research has examined the unique services, experiences, or approaches of these agencies. The current report presents findings from a survey that aimed to do exactly this. The National LGBTQ Institute on IPV (then acting as the National LGBTQ Capacity Building Learning Center) conducted the survey, drawing upon the National Coalition of Anti-Violence Programs’ (NCAVP)³ membership of local, LGBTQ-specific anti-violence programs. We distributed an online survey through the NCAVP listserv that 24 LGBTQ-specific agencies completed. The survey asked respondents about:

- Organization & participants’ demographics and needs
- Direct services to survivors
- Training and technical assistance to non-LGBTQ agencies
- Skills to enhance their services

Further details about the study methodology can be found in Appendix A, including details on the survey development, and data collection and analysis processes.

1. Walters, M.L., Chen J., & Breiding, M.J. (2013). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Findings on Victimization by Sexual Orientation. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

2. Renzetti, C. M. (1996). The poverty of services for battered lesbians. In C.M. Renzetti & C.H. Miley (Eds.), *Violence in Gay and Lesbian Domestic Partnerships*. New York: Haworth Press, Inc.

3. NCAVP is a national coalition of over 50 local member programs dedicated to ending violence in all its forms against LGBTQ people.

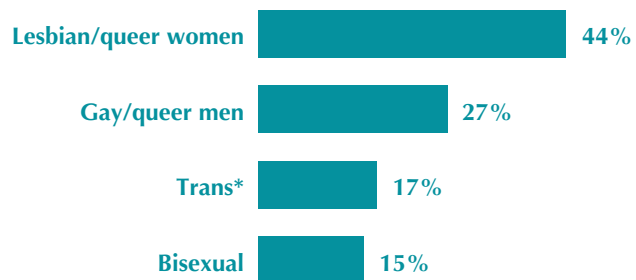
WHO PARTICIPATED: BY AND FOR ORGANIZATIONS

Twenty-four LGBTQ-specific DV/IPV organizations completed the survey. The agencies worked in states across all major regions of the U.S. The median number of paid staff across agencies was five, though agency size ranged widely. Some agencies only had volunteers (i.e., no paid staff) while one had up to 30 paid employees.

We asked several demographic questions about the staff at agencies. We found that on average, 40% of staff identified as people of color and 28% were bilingual. We asked the percentage of staff that identified as different sexual orientation and gender identities at each agency. The figure below shows the average percentages across all agencies. Recognizing that people may use multiple identities to describe their gender identity and sexual orientation, these questions were open-ended (i.e., fill in the blank) and did not need to sum to 100%

Most commonly, staff at LGBTQ-specific agencies identify as lesbian or queer women or as gay or queer men.

Staff are least likely to identify as bisexual.



AVERAGE % OF STAFF AT LGBTQ-SPECIFIC AGENCIES

Using the same strategy as above, we also asked agencies to estimate the demographics of the DV/IPV survivors with whom they worked during the previous year. Agencies reported that they most commonly served survivors who identified as lesbian, gay, or queer. Agencies least commonly worked with bisexuals and trans men.



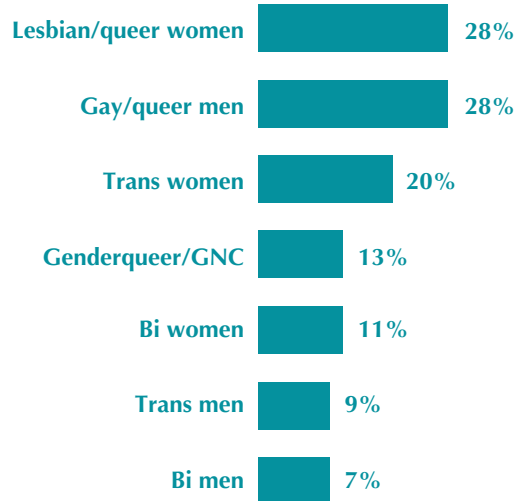
The staff demographic questions were open-ended and did not need to sum to 100%. This allowed respondents to report the gender and sexual identity of staff with greater nuance.



Lesbian/queer women and gay/queer men were the most common survivors with whom LGBTQ-specific agencies worked.

LGBTQ-specific agencies most commonly served lesbian, gay, and queer-identified survivors.

Agencies least commonly worked with bisexuals and trans men.



AVERAGE % OF SURVIVORS THAT AGENCIES WORK WITH



The National Network to End Domestic Violence (NNEDV) is the national coalition of state domestic violence coalitions.

The Domestic Violence Counts Survey is a one-day census of domestic violence programs in the United States. NNEDV has conducted this survey every year since 2006.

SERVICES PROVIDED

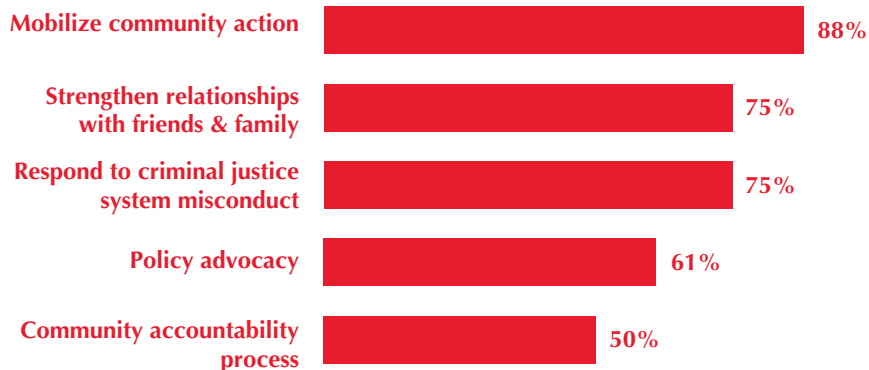
We provided agencies with a list of 37 services and asked which ones they provided the day before and throughout the year (see Appendix C for full list of services). We based the list on the Domestic Violence Counts survey conducted annually by the National Network to End Domestic Violence (NNEDV). This one-day census provides a snapshot of the DV/IPV services offered by predominantly non-LGBTQ DV/IPV agencies and programs across the country. We added five services to the NNEDV survey (in the box below) based on anecdotal evidence that LGBTQ-specific organizations often provide these.

CULTURALLY SPECIFIC SERVICES

1. Support to mobilize community action (e.g. social media response)
2. Support to strengthen relationships with friends and family
3. Assistance to response to criminal justice system misconduct
4. Policy advocacy
5. Assistance with community accountability process

These culturally specific services focus on making community and system level changes. Culturally specific organizations work with survivors to effect changes to social networks, communities, policies, and even the criminal justice system. The figure below shows that the majority of LGBTQ-specific agencies provided each type of culturally specific service.

Most LGBTQ organizations provide services that aim to create community-level change for LGBTQ survivors.



% OF LGBTQ-SPECIFIC AGENCIES



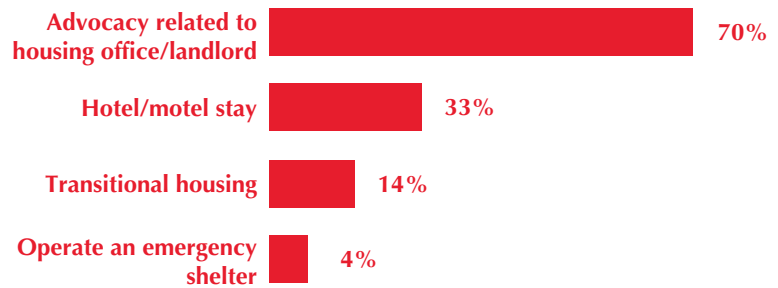
86% of LGBTQ-specific agencies said survivors' housing needs are among the hardest to meet.

44% of LGBTQ-specific agencies said that the demand for individual and group support/advocacy exceeded what they could provide.

In addition to providing community-level services, many LGBTQ-specific DV/IPV agencies also take unique approaches to housing. As demonstrated in the figure below, most LGBTQ-specific agencies (70%) provide advocacy related to housing, and one-third provide hotel/motel stays. Only one of LGBTQ-specific agencies operated its own emergency shelter. Given the historic centrality of emergency shelters within the domestic violence field, it is important to highlight its near absence from the services provided by LGBTQ-specific agencies. The data suggest that LGBTQ-specific DV/IPV agencies have either not chosen to or have not had the option of centering a shelter at the center of their services for survivors. Instead, programs have addressed needs for short and long term housing in other ways. However when we asked LGBTQ-specific agencies which survivors needs were hardest to meet, 86% said housing.

The most common types of housing assistance provided by LGBTQ-specific agencies are advocacy with landlords and hotel/motel stays.

Only one LGBTQ organization operated an emergency shelter*.



% OF AGENCIES THAT PROVIDE SERVICE THROUGHOUT THE YEAR

**This program has since folded and closed their shelter.*

The demand for advocacy is high among LGBTQ survivors.

Like most mainstream DV/IPV programs, the vast majority of LGBTQ-specific DV/IPV agencies provide individual advocacy (88%) and group support (75%) throughout the year. Despite the prevalence of this service, nearly half (44%) of LGBTQ agencies report that the demand for these services exceeds what their agency can provide. This illustrates a substantial need across organizations for more resources to be able to meet the advocacy needs of LGBTQ survivors.



Non-LGBTQ agencies refers to agencies that do not specialize in or specifically serve LGBTQ people.

TTA: training and technical assistance

Training & Technical Assistance

In addition to the services they provide, many LGBTQ agencies regularly provide training and technical assistance (TTA) to non-LGBTQ providers and agencies. Sometimes the TTA takes the form of formal cultural competency trainings, but other times agencies provide this TTA informally, such as during the course of advocating for survivors. To gather more systematic information about these experiences, we asked agencies a series of closed- and open-ended questions about the frequency, context, and type of TTA they provide to non-LGBTQ agencies.

Most agencies (79%) regularly provide basic LGBTQ information to other providers in the course of advocating for survivors.

1 in 5 agencies say they must always provide this information to other providers while advocating for survivors. No agencies said they never have to do this.

How often do you provide basic information about LGBTQ DV/IPV or LGBTQ issues to another provider/agency in the course of advocating for an LGBTQ survivor? (n=19)



We asked respondents to identify the top three topic areas with which non-LGBTQ organizations need the most help. Almost 8 out of 10 (79%) agencies reported that non-LGBTQ agencies needed the most help with gender identity and trans* community issues. Over half (58%) of agencies said that non-LGBTQ agencies also needed help understanding unique issues for LGBTQ survivors when they seek services. Finally, 42% identified assessing for primary batterer/survivor in LGBTQ relationships as another area where non-LGBTQ programs needed help.



Working with the shelters, I have consistently had to explain gender identity for transgender people. Oftentimes the administration will at least partially understand the issues, but front line staff need to be trained and I end up providing this both formally and informally on a consistent basis.



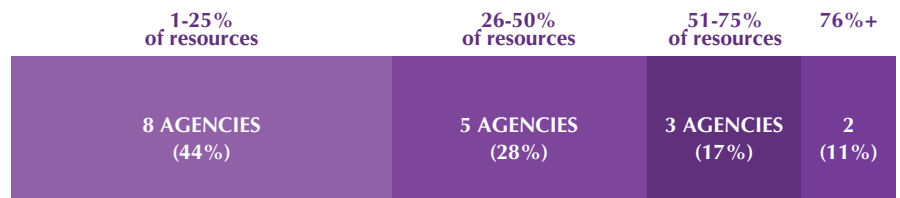
Over a quarter of agencies spend most of their resources providing TTA to non-LGBTQ organizations.

Many LGBTQ-specific agencies also provide TTA to non-LGBTQ agencies outside of the context of advocating for survivors. To learn more about the resources that agencies devote to providing this type of TTA, we used an open-ended (i.e., fill-in-the-blank) question that asked agencies to estimate the percentage of their organizational resources that go towards providing this type of TTA.

More than 1 in 4 agencies (28%) spend the majority of their organizational resources providing TTA to non-LGBTQ agencies.

100% of the agencies spend at least some of their resources providing TTA to non-LGBTQ agencies.

What percentage of your organization's resources go towards providing TTA to non-LGBTQ organizations? (n=18)



Many LGBTQ-specific agencies devote a substantial portion of their organizational resources to providing TTA to non-LGBTQ agencies. Only 44% of agencies spend a quarter or less of their resources on providing this TTA. This suggests a need for considerable TTA to non-LGBTQ agencies about LGBTQ issues, especially those relating to gender identity and trans* communities.

SURVIVORS MISIDENTIFIED BY CRIMINAL LEGAL SYSTEM

Research indicates that many LGBTQ survivors are reluctant to turn to the criminal legal system for help for a myriad of reasons, including past negative experiences and fears about negative repercussions of system involvement.^{4,5} Agencies reported that roughly one-third of survivors they worked with were involved in the criminal legal system in some way



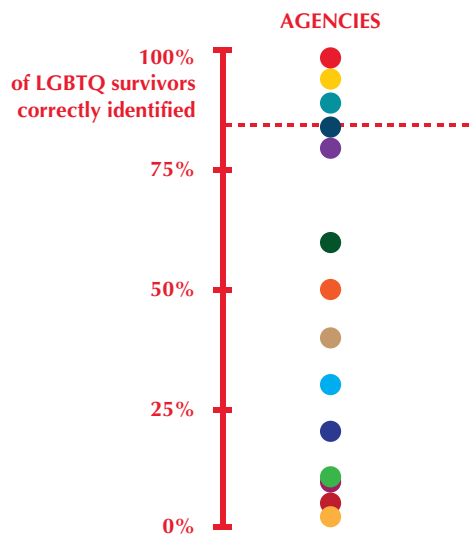
Of the survivors that LGBTQ-specific agencies work with, about one-third were involved in the criminal legal system in some way.

Some of the many challenges LGBTQ DV/IPV survivors face in the criminal legal system include being misidentified as the perpetrator or misclassified as the victim of a different crime than domestic violence. To understand the extent of this problem, we asked agencies what percentage of DV/IPV survivors they worked with over the previous year were correctly identified by the criminal legal system. We received a wide range of estimates. One agency said that the criminal legal system only correctly identified 2% of survivors they worked with whereas another thought that 100% were correctly identified. The figure below shows the range of responses across agencies. Further, it demonstrates how less than a third of agencies estimated that the criminal legal system met a general goal of correctly identifying at least 90% of LGBTQ survivors.

Agencies differed widely in the percentage of LGBTQ survivors that they estimated were correctly identified by the criminal legal system.

Most agencies (69%) estimated that less than 90% of the survivors they worked with were correctly identified as survivors.

What percentage of LGBTQ survivors were correctly identified?



4. Cabral, A., & Coffey, D. (1999). Creating courtroom accessibility. In B. Leventhal & S. E. Lundy (Eds.), *Same-Sex domestic violence strategies*. Thousand Oaks: Sage Publications.
5. Waldron, C. M. (1996). Lesbians of color and the domestic violence movement. In C. M. Renzetti & C. H. Miley (Eds.), *Violence in Gay and Lesbian Domestic Partnerships*. New York: The Haworth Press, Inc.

Agencies explained their estimated percentage in numerous ways. Some centered on the perceived over-reliance of traditional gender norms in determining who is the survivor and who is the batterer. In other instances, language barriers led to some survivors being misidentified as batterers. Other agencies cited how DV/IPV in LGBTQ relationships often gets misclassified as “mutual abuse” or a crime other than domestic violence.



We definitely see that those who identify outside the heteronormative gender binary paradigm... are often misidentified as abusive partners when they are survivors.



Many of our clients were incorrectly identified as a perpetrator/batterer, or as not being a "real" victim because responding officers did not speak their language, and they could not or would not find an interpreter



We see men and people of transgender experience misidentified as in mutually abusive relationships, as opposed to the classic IPV.



PROGRAM INTERACTION WITH LAW ENFORCEMENT

The current study revealed that the vast majority of LGBTQ-specific agencies (95%) worked with law enforcement over the previous year and did so in a variety of capacities. These included:

- advocating for individual survivors
- providing cultural competency training
- consulting with trusted police officers
- serving on community task forces or workgroups
- advocating for system-level changes to improve criminal-legal responses to LGBTQ survivors and communities.



95% of LGBTQ-specific agencies worked with law enforcement over the last year.

LGBTQ-specific agencies work with law enforcement in many different ways.

We frequently work with LGBTQ liaisons within the police department, providing advocacy on individual cases.... We do extensive systemic advocacy with (and sometimes against) the police, to improve police response to LGBTQ communities, particularly LGBTQ communities of color and trans and gender-nonconforming communities.



[We] sit on work groups, have meetings with law enforcement, attend community forums, directly advocate for survivors at police stations. We have significant involvement.





LGBTQ-specific agencies identified numerous models, programs, and approaches that they see as working well to address LGBTQ domestic violence.

PROMISING LGBTQ DV/IPV MODELS

Hallmarks of culturally specific agencies include their responsiveness to emerging issues and ability to create programming that closely aligns with community priorities. While created *by and for* LGBT communities, these efforts often produce promising interventions that could advance the broad anti-violence field. These innovative programs face multiple obstacles in reaching broader audiences, however. For example, one avenue for building awareness of promising DV/IPV programs is to conduct rigorous evaluations and publish the findings in peer-reviewed journals. This strategy remains out of reach for many culturally specific programs. Most cannot devote the extensive resources and/or do not have the skills required to conduct and publish these kinds of evaluations. Researchers interested in working with programs to evaluate outcomes have limited means to know which programs have promising practices that are ready for evaluation.

In light of this, we used the survey to create an avenue to identify promising LGBTQ DV/IPV programs. Agencies listed any models, programs, or approaches they knew of that were working well to address LGBTQ DV/IPV. These could include not only those of their own organization, but also those of other agencies they knew of.

LGBTQ-specific agencies listed dozens of models, programs, and approaches that are working well to address LGBTQ domestic violence. They ranged widely in terms of focus, targets, and goals.

Some were unique approaches to training,



We created the Training Contract System, a bi-directional approach to training that focuses on long-term engagements, data collection/analysis, and full agency buy-in toward shifting agency culture and practices.

models for providing advocacy,



Community United Against Violence’s approaches to healing and wellness (including curriculum to highlight and work on self-determination, self-love, decision-making, and boundary-setting.)

and community accountability projects.



We collaborate on an Arts Project for survivors that acts partly as an accountability project using various tactics and strategies grounded in art theory — especially performance art theory — to publicize a survivors' words.

In the future, the National LGBTQ Institute on IPV plans to examine these models and approaches in greater detail and propose strategies to support culturally responsive evaluations that document promising work and identify effective approaches.



VISIONING BEYOND SCARCITY

We asked respondents what they would like to see their agency do if it received unlimited funds for ten years. We wanted to understand what additional services or programs they would offer or how they might approach the work differently if funding were not a barrier.

Agencies generated an impressively large array of ideas for how to use the funding, illustrating innovative future directions for the field. Although the ideas ranged widely, a few common themes emerged.

1. Expanding housing options for LGBTQ survivors and especially trans* survivors.

Given that most programs identified housing as a need survivors had that they found it difficult to meet, some imagined using expanded resources to provide survivors safety and stability. Nearly a third who answered this question talked about expanding housing in some form, whether by increasing flexible funds for supports and relocation, expanding emergency and transitional shelter options, or buying properties for permanent housing. Several respondents focused on expanding work with mainstream programs to ensure inclusion and access for LGBTQ survivors.



Permanent housing and relocation



To provide short and long term housing for trans* survivors, thus creating a space receptive to the needs of all survivors!

2. Providing training to a diversity of community partners whose actions impact LGBTQ survivors.

LGBTQ-specific agencies described wanting to provide training to a range of community partners and stakeholders. These included some traditional and partners (e.g., mainstream DV/IPV providers and therapists), but also nontraditional partners like business owners. The desire to use funds to provide additional trainings aligns with what agencies shared about the amount of technical assistance they provide to a number of partners during the course of advocating for survivors.



Fund training for us to do for all mainstream providers in the state to bring them into compliance with VAWA.



Providing training... to business owners that will help them provide good workplaces in order to increase economic security of community members



Train therapists to deal with complex trauma



3. Creating structural changes to systems and institutions that affect LGBTQ survivors.

In accordance with how structural determinants impact LGBTQ vulnerability to IPV⁶, several programs had specific agendas to impact those systems and institutions in their communities. These included the criminal-legal system, religious institutions, workplaces, and service systems. Some described wanting to expand their community organizing efforts, that is, strategies tied to effecting community and structural changes.

Provide at least one staff member to each DV and sexual assault victim service organization and law enforcement agency in the state whose job is to focus exclusively on improving LGBTQ inclusion and accountability at that organization...

Decreasing criminal/legal system impacts

Our organizing work is vital and mostly unfunded. Having unlimited funds would allow us to expand our organizing efforts exponentially.

4. Expanding the current programs and services that agencies offer.

Consistent with the feeling many organizations had that they could not meet the current needs of their community, several envisioned expansion of existing services to increase the scope of their impact and number of survivors they could serve.

Just to expand the services provided. More housing, education, counseling and community involvement

We would open up offices statewide in at least 3-4 [new] areas

6. CSDH (2008). Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Geneva, World Health Organization.

SUPPORTS AND SKILLS TO ENHANCE SERVICES

Finally, we asked agencies what kinds of support, education, and skills would enhance their organization's ability to provide quality services for LGBTQ people experiencing DV/IPV. The box below highlights some of the common types of supports that agencies listed.



1. Increased funding in general, particularly flexible funding to provide financial assistance to survivors

2. TTA and resources on:

- a. Navigating the court system
- b. Community accountability
- c. Restorative & transformative justice
- d. Self-care
- e. Sexual assault and rape
- f. Research
- g. Strategies for providing TTA to communities

3. Increase the number of bilingual advocates

4. Information on other LGBTQ programs (particularly from other countries)

5. Access to and resources for mental health clinicians



CONCLUSIONS

The survey findings shed important light on unique strengths, needs, and approaches of LGBTQ-specific DV/IPV organizations. Below is a brief summary of key findings from the survey and their implications for how the field can expand access to competent and supportive DV/IPV services for LGBTQ communities.



LGBTQ-specific DV/IPV organizations find themselves balancing between providing services to their community and offering trainings to mainstream organizations.

It is striking that almost half of responding organizations reported that demand for their services (e.g., advocacy and support) exceeded their capacity. At the same time, more than half of the agencies reported spending substantial amounts of time (26 to 100%) providing training and TA to other community organizations to try to improve their capacities to meet survivors' needs. Keeping in mind that most agencies reported staffs of 6 or fewer people, this paints a picture of small organizations juggling many demands with few resources.



Bisexuals make up a relatively small proportion of survivors that LGBTQ-specific DV/IPV organizations serve.

Organizations most commonly serve survivors who identify as lesbian/queer women or gay/queer men and, to a lesser extent, trans women, and that they serve few bisexual survivors. This is troubling given the strong evidence that bisexuals (and especially bisexual women) experience domestic violence sexual assault and stalking at starkly higher rates than lesbian, gay, or heterosexual people⁷. Growing evidence suggests that bisexual survivors often do not feel comfortable seeking services at LGBTQ-specific organizations. Thus, LGBTQ-specific DV/IPV organizations⁸ should assess how their services, staff demographics, and outreach materials may affect comfort and access for all members of LGBTQ communities, particularly bisexual survivors.



Most LGBTQ-specific organizations provide services aiming to create community-level changes for LGBTQ survivors.

Between 50 and 88% of organizations reported that they work to effect change at the community level. This includes targeting changes to social



7. Walters, M.L., Chen J., & Breiding, M.J. (2013). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Findings on Victimization by Sexual Orientation. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

8. Hotline survey report from Learning Center



networks, communities, policies, and even the criminal justice system. This illustrates a unique strength and approach of LGBTQ-specific organizations, a commitment to and expertise in creating community and societal level change even in the course of advocating for individual survivors. It also demonstrates the commitment of culturally specific organizations to address the social determinants of DV/ IPV. Future work should examine these strategies to learn more about how agencies provide them, the infrastructure and resources needed to do so, and their impact on LGBTQ survivors and communities.



LGBTQ-specific agencies provide housing assistance in innovative ways.

LGBTQ-specific agencies consistently provide flexible forms of housing assistance, such as advocacy with landlords and hotel/motel stays. The DV/IPV field could benefit from continuing to explore and invest in alternative, cost-effective and sustainable DV/IPV housing models. As funding opportunities for more flexible forms of sheltering arise, LGBTQ specific agencies should be in a strong position to illustrate their expertise and experience and to acquire funding to expand and/or evaluate their innovative housing approaches.



LGBTQ-specific agencies spend considerable resources providing training and TA to non-LGBTQ organizations.

Survey responses revealed the burden on many LGBTQ-specific agencies to provide education on LGBTQ-related topics both formally and informally to non-LGBTQ agencies. For example, 79% of organizations said they must regularly educate non-LGBTQ providers on LGBTQ topics during the course of advocating for a survivor. Nearly 1 in 5 said they must always do this. This kind of unplanned training and education occurs in addition to the myriad of other services they provide. Furthermore, we have anecdotal evidence that this work is largely unfunded, creating a strain for many LGBTQ DV/IPV providers and agencies. Clearly non-LGBTQ agencies need further training on LGBTQ issues. Increasing their capacity to serve LGBTQ survivors would relieve some of the burden on LGBTQ-specific agencies.



LGBTQ survivors and LGBTQ-specific organizations have considerable involvement with the criminal legal system.

Roughly a third of survivors that LGBTQ-specific agencies work with are involved in the criminal legal system as they seek help. Further, nearly all LGBTQ DV/IPV agencies themselves interact with law enforcement in a variety of ways, including through survivor advocacy, cultural competency training, and community collaborations. Despite this consistent involvement and interaction with law enforcement, agencies





ranged widely in their estimate of how often the criminal legal system correctly identifies the survivors they work with as victims of DV/IPV. More comprehensive and extensive training and technical assistance may be needed to improve the DV/IPV assessment process conducted by law enforcement in cases of LGBTQ DV/IPV. Recognizing the challenges LGBTQ survivors face with the criminal legal system, many agencies remain committed to expanding alternatives to the criminal legal system, including prevention efforts and developing methods for community accountability and transformative justice.



LGBTQ-specific agencies see large discrepancies in the accuracy with which the criminal legal system identifies LGBTQ survivors.



LGBTQ-specific agencies estimated between 2% and 100% of the survivors they worked with were correctly identified by the criminal legal system. The majority of organizations thought less than 90% of the survivors they worked with were correctly identified. These results raise questions for further exploration. For example, what drives the differences in these perceptions? To what extent do these differences reflect widely varying capacities of law enforcement officers to accurately assess primary victims and perpetrators in cases of LGBTQ DV/IPV? What are the characteristics of criminal legal systems that agencies see as doing an exceptionally good job in identifying LGBTQ survivors from those that are not? Additional examination into these issues can help to identify potentially fruitful opportunities for training for or reforms and alternatives to criminal legal systems' involvement in LGBTQ DV/IPV.



Many promising programs already exist to address domestic violence in LGBTQ communities.



A wealth of knowledge and expertise exists in LGBTQ communities about DV/IPV programs that work for our communities. Survey respondents listed dozens of models, programs, and approaches that they consider to be successful at addressing DV/IPV in LGBTQ communities. Researchers describe the value of programs developed by and for communities⁹, outlining their advantage over adapted mainstream programs in terms of community ownership and cultural relevancy¹⁰. The DV/IPV field would benefit from investing resources to study these culturally specific approaches further, not only to identify their efficacy and readiness for dissemination, but also key features that may span across approaches.



9. Wandersman, A., Duffy, J., Flaspohler, P., Noonan, R., Lubell, K., Stillman, L., Blachman, M., Dunville, R., Saul, J. (2008). Bridging the gap between prevention research and practice: The interactive systems framework for dissemination and implementation. *American Journal of Community Psychology* (41), 171-181.

10. Miller, R.N., Shinn, M. (2005). Learning from communities: Overcoming difficulties in dissemination of prevention and promotion efforts. *American Journal of Community Psychology* (35) 3/4, 169-183.





LGBTQ-specific agencies need additional funding to expand their work.

LGBTQ DV/IPV organizations consistently identified a need for greater funding to build and deepen their “by and for” work in LGBTQ communities. Providing more financial resources to LGBTQ DV/IPV agencies could benefit the entire DV/IPV field. It would support these agencies to continue developing and sharing their innovative DV/IPV approaches with the field, increasing our collective capacity to serve all DV/IPV survivors.

ACKNOWLEDGEMENTS

We would like to thank all of the representatives from LGBTQ-specific DV/IPV agencies that completed the survey. We appreciate you taking the time to help us understand more about your experiences and about the important work that you do.

Thanks also to the planning and steering committees of the National LGBTQ DV/IPV Capacity Building Learning Center for your assistance in the development of the study and the interpretation of the findings.

National LGBTQ Institute on IPV
A partnership of the NW Network and NCAVP
lgbtqipv.org

Additional Institute resources available at **nwnetwork.org** and **ncavp.org**

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APPENDIX A

Methodology

The survey team collaboratively developed the 21-question online survey completed by LGBTQ-specific DV/IPV organizations (found in Appendix B). The survey included a screening question at the beginning to ensure that respondents represented LGBTQ-specific DV/IPV organizations.

The survey also included a series of sub-questions about the services provided by each agency. The list and endorsement of the 37 services can be found in Appendix C. The list of services is based on the Domestic Violence Counts survey conducted annually by the National Network to End Domestic Violence (NNEDV/IPV). We modified the original NNEDV survey in two ways: we added five culturally specific services, and in an effort to reduce survey length, we removed several services that had been included in the NNEDV survey.

We used purposive sampling techniques to gather data from LGBTQ-specific organizations. A member of the survey team based at NCAVP emailed a link to the online survey via the organizational listserv to 54 member organizations of NCAVP. Ultimately 24 organizations completed the survey for a response rate of 45%.

We conducted descriptive analyses of the data. Although the findings cannot speak to statistically significant differences between groups, they provide a useful snapshot of the current landscape of LGBTQ-specific agencies.

Limitations

In an effort to reduce the total number of survey questions, when we asked about agencies' and survivors' demographics, we combined the identity categories lesbian and queer and the categories gay and queer. By doing so, we reduced our capacity to examine these distinct identities differently, combining individuals into the same category whose sexual orientations may clearly differ. Another limitation related to the demographics was the choice to have agencies estimate the demographics of the survivors they work with rather than use organizational statistics to get a more accurate count. We decided to ask the demographic question this way to reduce the burden on survey respondents; however, this may have reduced the accuracy of responses.

Our response rate (45%) is low and creates some challenges in generalizing the data. However, since NCAVP member programs constitute the vast majority of LGBTQ-specific DV/IPV and anti-violence agencies in the country, this response rate still represents a considerable percentage of all LGBTQ-specific DV/IPV agencies in the field. Further, the wide-ranging size, location, and makeup of agencies provides some assurances that a diversity of agencies completed the survey.

APPENDIX B

LGBTQ-Specific Organization Online Survey

Below is the list of questions on the LGBTQ-specific organization survey. Note: the formatting and appearance of the questions do not reflect the survey completed by participants because it was an online survey.

Do you work at an agency or program that works specifically with LGBTQ survivors of domestic violence or dating abuse?
 Yes No

For this first set of questions, we would like to learn about the services your organization or program provides for survivors of domestic violence. For each service listed below, please complete each of the 5 columns in the following way: **Column 1:** check the box if your agency/program provided the service yesterday (or the most recent work day). **Column 2:** check the box if your agency/program provided the service at some point throughout the year. **Column 3:** check the box if your agency/program is funded to provide the service. **Column 4:** check the box if the demand for the service exceeds what your agency/program can currently provide. **Column 5:** check the box if your agency/program does not provide this service.

	Service provided previous workday	Service offered throughout the year	We are funded to provide this service	Demand for this service exceeds what we can provide	NA. We do not provide this service
1. Individual support or advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Group support or advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Emergency shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Safe houses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Hotel/motel stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Transitional housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Children's support or advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Legal representation by an attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Court/legal accompaniment/ advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Support/advocacy to teen victims of dating violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Support/advocacy to victims of trafficking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Support/advocacy to elder victims of abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Support/advocacy specifically for bisexual survivors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Support/advocacy specifically for trans* survivors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Advocacy related to public benefits/TANF/welfare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Advocacy related to housing office/landlord	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Advocacy related to child welfare/protective services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Advocacy related to disability issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Advocacy related to immigration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Advocacy related to mental health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Advocacy related to substance abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Advocacy related to healthcare or healthcare systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Advocacy related to technology use (e.g., cyberstalking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Advocacy with the military	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Childcare/daycare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Bilingual advocacy (services provided by someone who is bilingual)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. HIV/AIDS information and/or support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Financial literacy/budgeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Job training/employment assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Therapy/counseling for adults (by a licensed practitioner)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Therapy/counseling for children (by a licensed practitioner)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Prevention services and/or educational programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Policy advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Support to strengthen relationships with friends & family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Assistance with a community accountability process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Support to mobilize community action (e.g., social media response)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Assistance to respond to criminal justice system misconduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Thinking about the last year and your domestic violence programming specifically, what agencies or programs have you worked with while advocating for LGBTQ survivors?

For this next set of questions, please think about the LGBTQ survivors of domestic violence that your agency worked with over the last year.

3. Roughly what percentage of these survivors would you estimate were:

Bisexual women _____ **Bisexual men** _____ **Trans women** _____ **Trans men** _____
Genderqueer/gender-nonconforming _____ **Lesbian/queer women** _____ **Gay/queer men** _____

4. What concrete needs do LGBTQ survivors have that your agency/program has the easiest time providing?

5. What concrete needs do LGBTQ survivors have that your agency/program has the hardest time providing?

6a. Please think about the LGBTQ survivors that your agency worked with last year. What percentage would you estimate were actively involved with the criminal legal system (either correctly or incorrectly identified) as a:

Victim/survivor of domestic violence _____ **Perpetrator/batterer of domestic violence** _____
Victim/survivor of another type of crime _____ **Perpetrator of another type of crime** _____

6b. Of these LGBTQ survivors involved with the criminal legal system that your agency worked with last year, what percentage would you estimate were correctly identified as either a victim/survivor or perpetrator/batterer?

6c. If needed, please explain your responses to the questions above.

7a. Over the last year, has your agency directly interacted with law enforcement agencies or officers?

Yes **No**

7b. If yes, in what ways did you interact with law enforcement?

8. What LGBTQ-specific models, programs, or approaches do you know of that are working well to address LGBTQ domestic violence? These can include your organization's approaches or other approaches that you know of. Please briefly describe the model or approach and who developed it, if known.

9. Over the past year, what percentage of your agency's resources were spent providing education, training, or technical assistance (formally or informally) to non-LGBTQ programs?

0% **1-25%** **26-50%** **51-75%** **76-100%** **Not sure**

10. Over the past year, what percentage of the education, training, or technical assistance to non-LGBTQ programs was provided for free?

0% **1-25%** **26-50%** **51-75%** **76-100%** **Not sure**

11. What topic areas did non-LGBTQ programs or providers need the most help with? You can check up to three.

- Basic information about sexual orientation**
- Basic information about gender identity or trans* communities**
- How to assess for primary batterer/survivor in LGBTQ relationships**
- LGBTQ-specific forms of domestic violence**
- Unique legal issues facing LGBTQ survivors**
- Unique issues LGBTQ survivors face when seeking services**
- Not sure**
- Something else, please specify: _____**

12. Over the last year, how often did you provide basic information about LGBTQ domestic violence and/or LGBTQ issues to a another provider or agency in the course of advocating for an LGBTQ survivor of domestic violence?

Never **Rarely** **Sometimes** **Often** **Always** **NA**

13. Please give an example of a time you provide basic education about LGBTQ domestic violence and/or LGBTQ issues to a service provider or agency during the course of advocating for an LGBTQ survivor of domestic violence. Who were you talking to and what did they need to know?

14. Imagine your organization received unlimited funds over the next ten years to address domestic violence in LGBTQ communities. The money can be used in any way imaginable. How would you like to see your organization use the money?

15. What kind of support, education, and skills would enhance your organization's ability to provide quality services for LGBTQ people experiencing domestic violence?

We would like to know a little more about the organization or program where you work. Again, this information will remain confidential and will not be shared with anyone outside of the research team.

16. What is the name of your organization?

17. In what city and state does your organization reside?

18. What geographic region does your organization serve?

19. How many people are employed in your program?

20. What percentage of your organization's paid staff are:

People of color _____ **Trans*** _____ **Bisexual** _____ **Lesbian/Queer women** _____
Gay/Queer men _____ **Bilingual** _____

21. How did you hear about this survey?

NCAVP listserv email **NW Network staff** **NCAVP staff** **Other (Please specify):**

APPENDIX C

Services Provided by LGBTQ Domestic Violence & Anti-Violence Programs

SERVICES PROVIDED	On day before	Throughout the year
Individual support or advocacy	88%	88%
Prevention services and/or educational programs	63%	88%
Advocacy related to healthcare or healthcare systems	46%	88%
HIV/AIDS information and/or support	46%	88%
Support to mobilize community action (e.g., social media response)	21%	88%
Support/advocacy specifically for trans* survivors	58%	83%
Advocacy related to mental health	50%	83%
Support/advocacy specifically for bisexual survivors	38%	79%
Support/advocacy to elder victims of abuse	8%	79%
Support to strengthen relationships with friends & family	54%	75%
Group support or advocacy	54%	75%
Support/advocacy to teen victims of dating violence	29%	75%
Advocacy related to disability issues	17%	75%
Assistance to respond to criminal justice system misconduct	13%	75%
Advocacy related to immigration	17%	74%
Court/legal accompaniment/advocacy	38%	71%
Advocacy related to technology use (e.g., cyberstalking)	29%	71%
Advocacy related to substance abuse	25%	71%
Advocacy related to housing office/landlord	26%	70%
Bilingual advocacy (services provided by someone who is bilingual)	46%	63%
Policy advocacy	30%	61%
Advocacy related to public benefits/TANF/welfare	13%	58%
Support/advocacy to victims of trafficking	13%	58%
Advocacy related to child welfare/protective services	4%	58%
Financial literacy/budgeting	17%	50%
Assistance with a community accountability process	13%	50%
Job training/employment assistance	22%	44%
Advocacy with the military	0%	38%
Therapy/counseling for adults (by a licensed practitioner)	44%	35%
Hotel/motel stay	4%	33%
Legal representation by an attorney	17%	21%
Children's support or advocacy	9%	17%
Transitional housing	8%	13%
Therapy/counseling for children (by a licensed practitioner)	4%	8%
Childcare/daycare	0%	8%
Emergency shelter	4%	4%



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