
Relationship Violence in Lesbian/Gay/ Bisexual/Transgender/Queer [LGBTQ] Communities

Moving Beyond a Gender-Based Frame- work

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"It was my first relationship. First long-term relationship. But you know I was - I was head over heels madly in love and I thought this is the relationship for life. And it started out really good. This woman was nine years older than myself. It was verbally abusive to start off with and then physically, I was, quite often had black eyes and she tried--she almost killed me once. Strangled me and then this went on for three years ...I was too young and insecure about the whole relationship--gay relationships, whatever. Anybody could have walked all over me." (Ellen)

—Ellen

"I feel like I can't talk about it, I mean how many therapists/social service providers are going to understand queer, s/m, abuse, intersexed, interracial [all features of her abusive relationship]--It's too complicated, there is too much explaining that I'd have to do." (Natalie)

—Natalie

Introduction

The opening quotations are from participants who took part in an interview research project conducted with lesbians who had experienced violence in their intimate relationships with other women (Ristock, 2002). Their words reveal some of the challenges to addressing relationship violence within lesbian/gay/bisexual/transgendered/queer (lgbtq) communities. (See Appendix A for glossary of terms). For example, Ellen describes her experiences of violence that occurred within a particular context of isolation and vulnerability that she faced as a young gay woman in her first relationship. Her story dispels some of the misconceptions that suggest violence in same-sex relationships is not as bad as violence in heterosexual relationships or that it is "mutual battering." In the second quotation, Natalie talks about her reluctance to seek supportive services because of the complicated

and marginalized features of her relationship that are not reflected or understood within mainstream services that respond to domestic violence. Her story suggests that in spite of all the important work done by feminists to address male violence against women, the largely gender-exclusive framework that has been developed (the one that focuses on the roots of violence within sexism and patriarchy) ends up ignoring or misunderstanding violence in lgbtq people's lives. Acknowledging violence in lgbtq communities, then, requires an understanding of the way relationship violence is connected to homophobia, biphobia, transphobia and heterosexism along with other forms of prejudice and oppression including (but not limited to) sexism, racism and classism. [See Appendix A for definitions of terms].

We live in a society where discrimination and prejudice are routinely directed towards anyone who is not part of a dominant cultural group. For lgbtq people, the experience of homophobia, biphobia, transphobia and heterosexism can make it harder to address violence in relationships and to get the support that is needed. There are often concerns within lgbtq communities that any public discussion of violence in same-sex relationships will only add to the negative stereotypes that already exist about lgbtq people as "sick" or "perverted." For example, some gay men may have difficulty talking about being a victim of physical violence because society's definition of what it means to be a man often includes the assumption that "normal" men should be able to defend themselves. Being a victim of relationship violence might serve to reinforce a related stereotype that gay men are effeminate. For lgbtq people of color, societal racism often means other people stereotypically attribute their experiences of violence to their cultural background, making it extremely difficult for people of color to talk about or report their experiences of relationship violence.

This paper provides a critical overview of some of the current research that has been done to better understand the contexts, dynamics and impact of relationship violence within lgbtq communities and also identifies several barriers that still exist within support services when responding to this form of violence. The paper concludes by offering recommendations and considerations for the criminal justice and social service community and provides examples of innovative responses and programs that have been developed within lgbtq communities that might serve as models.

Defining Lesbian/Gay/Bisexual/Transgender/Queer Relationship Violence

Violence in lgbtq relationships may be referred to as partner violence, relationship violence, or same-sex/same-gender domestic violence. The term "domestic violence," however, has been most strongly associated with heterosexual relationships and assumes certain gendered roles (male batterers, female victims); therefore it can work against acknowledging violence that occurs in same-sex/same-gender relationships. It is a term that some members of lgbtq communities cannot relate to because of these assumptions (see for example Chung & Lee, 1999). However, some researchers and lgbtq groups continue to use the term "domestic violence" in order to draw parallels to and make comparisons with heterosexual domestic violence.

Lgbtq relationship violence is violence that occurs in the context of same-gender or queer intimate relationships. It is important to acknowledge that some people identify their gender outside the

gender binary system of male and female, therefore finding the most accurate language to describe intimate partner violence can be difficult because language itself is not neutral and reflects many assumptions that are embedded within dominant culture.

Like heterosexual domestic violence, violence in lgbtq relationships involves the conscious manipulation and control of one person by another through the use of threats, coercion, humiliation and/or force (Hart, 1986; Island & Lettelier, 1991). Some individuals within same-sex relationships will define themselves as lesbians or gay men whereas others may identify as bisexual or queer. The term "queer" has been reclaimed in a positive way to reflect the diversity of sexual and gender identities which can include transgender people, intersex people, genderqueers, and people who consider themselves heterosexual and engage in same-sex sex even though they do not identify as bisexual or gay.

Lgbtq partner violence can take many of the same forms as heterosexual domestic violence. For example, physical abuse can include actions such as hitting, punching, slapping, biting, restraining, and pushing. Sexual abuse may involve forcing someone to have sex against their will, raping someone with an object or weapon, and/or making demeaning sexual comments. Emotional abuse can include manipulation, isolation, humiliation, lying, threats to kill, threats to commit suicide, racial attacks, and intimidation. Verbal abuse may consist of insults, name calling, and yelling. Financial abuse may also be part of the dynamic when one person creates debts, steals money or uses money to control another person. The violence can also be lethal.

Violence in relationships can have a significant impact on the health and well-being of survivors. This includes physical injuries that may range from bruises, broken bones, or burns, as well as emotional effects that can include depression, anger, shame, fear, suicidal ideation, and post-traumatic stress. Violence affects people in different ways resulting in a wide-range of emotional responses (Cruz, 2001; Ristock, 2002).

Sometimes there is a pattern to the violence with violent episodes occurring in cycles and increasing in intensity and frequency over time. In other cases there does not seem to be a pattern to the abusive behaviors and the violence is more sporadic (Ristock, 2002). Sometimes the power dynamics may seem confusing because same-gendered partners might be relatively the same size and strength. Many victims report using physical violence in self-defense or even to retaliate (Ristock, 2002; Marujo & Kreger, 1996). These actions go against mainstream constructions of victims as passive. This is not to suggest that violence in same-gender relationships is mutual; however, it does point to the complexities of dynamics in some abusive relationships. Further mainstream constructions of victim and abuser often assume the more "masculine" or "butch" partner will be the abuser and the "femme" the victim. These misconceptions reveal the ways that heterosexist thinking is often wrongly applied to lgbtq relationships. Physical appearance cannot be used to determine who is acting abusively nor can gender binaries (male role/female role) be assumed to operate within lgbtq relationships.

Although many of the tactics used in abusive relationships are the same as those used in abusive heterosexual relationships, there are some specific abusive behaviors that reflect the larger context of homophobia, biphobia, transphobia, and heterosexism surrounding lgbtq relationships. These

behaviors include threats to reveal the sexual or gender identity of a partner to one's boss, landlord, or family member; threats to jeopardize custody of children because of a person's sexual or gender identity; threats to jeopardize immigration because of sexual orientation, and/or threats to reveal the HIV/AIDS status of a partner.

The above are examples of abusive tactics that are specific to lgbtq relationship violence (Cruz, 2003; Renzetti, 2001). A person who is acting abusively and who wishes to control the thoughts and actions of their intimate partner may try using these types of threats precisely because they are particularly effective in a society that does not fully support the rights of lgbtq people. Further, both survivors and perpetrators of lgbtq violence can be isolated from the wider, yet marginalized lgbtq communities. Many lgbtq survivors feel a great deal of shame and self-blame for being in an abusive relationship. People who are known to have been in abusive relationships may also be ostracized by members of lgbtq communities, which can lead to a loss of support that may negatively affect long-term recovery.

Determining the Magnitude of Lesbian/Gay/Bisexual/Transgender/Queer Partner Violence

It has been difficult to determine the prevalence of this form of abuse. The issue of lgbtq partner violence has been difficult to research because of the larger homophobic, biphobic, transphobic, and heterosexist context. Most lgbtq violence is not reported to the police or to mainstream crisis organizations. Lesbians, gay men, bisexual, transgender and queer people may be reluctant to report abuse because they do not want to be seen as betraying the lgbtq community and/or they may be concerned with homophobic and/or transphobic responses. Thus statistics from official sources are likely to indicate very minimal levels of violence. Many large-scale studies on domestic violence have not included gays and lesbians or even considered the experiences of transgender, intersex, bisexual and/or queer people (ACON, 2004; Tully, 2000; Cruz, 2003; Renzetti, 2001).

Those studies that have been done present a range of relationship violence rates reported amongst lesbian and gay couples from 17% to 52% (see for example, Waldner-Haugrud, Vaden Gratch & Magruder, 1997; Stahly & Lie, 1995; Lockhart, White, Causby & Isaac, 1994; Lie & Gentlewarrier, 1991). Very few studies have included people who identify as transgender or intersex. One study found that one in ten transgender people had experienced relationship violence (Xavier, 2000). Another survey of transgender and intersex people found that 50% had been raped or assaulted by an intimate partner. Yet only 62% (31% of the total sample) of those raped or assaulted identified as survivors of domestic violence when asked directly (Courvant & Cook-Daniels, 2000). Research on violence experienced by people who identify as bisexual is lacking and their experiences tend to be lumped into the category of lesbian or gay men (Research and Advocacy Digest, 2003). Further, most of the research remains focused on white gay men and lesbians who are often in their mid-twenties or thirties and college educated (Kanuha, 1990; Butler, 1999; Mahoney, Williams & West, 2001).

Despite the gaps in our knowledge, many researchers and service providers have concluded that violence in lgbtq relationships occurs at the same rate as or in even higher rates than heterosexual

violence. Yet we have to interpret the results of the existing research carefully. These studies rely on individuals self-selecting and self-reporting violence and are therefore not true prevalence studies. Further, they use different definitions of relationship violence with some restricting the definition to physical violence while others encompass a broad definition and do not differentiate between emotional, verbal, and physical forms of violence. In addition, we do not have a consistent language to describe intimate partner violence. For example, lgbtq women may be reluctant to disclose sexual assault by another woman because the term 'rape' is seen to imply penile penetration and they fear that they will not be believed (Ristock, 2002). Given these difficulties, we simply cannot say for certain what the prevalence rates of violence are in lgbtq relationships. However, the research certainly suggests this is a problem that we should be concerned about and that it is not an anomaly.

Other sources of data that provide important information on the scope of this form of violence include the annual reports of the US National Coalition of Anti-Violence Projects (NCAVP). The NCAVP collects statistics from programs that provide services specifically for lgbt (they do not include the category queer in their descriptions) relationship violence in many cities throughout the country. In 2003, twelve NCAVP member organizations along with several affiliated programs reported 6,253 lgbt domestic violence incidents. Of these 3,344 cases (44%) were men who had been victimized while 2,357 (33%) were women; 161 (2%) identified as male-to-female transgender and 31 were female-to-male. The great majority of these cases involved victims who identified as gay or lesbian (82%). In 263 instances (4%) the victims identified as bisexual and 263 cases included victims who identified as heterosexual (a category that may include transgender individuals) while 44 cases said they questioned their sexual identity or did not define. NCAVP agencies also attempt to record the "race" and ethnicity of victims of domestic violence cases using their services. Of the victims for whom this information was known 44% were white, 25% were Latino, 15% were of African descent, 5% were Asian/Pacific Islander and 4% were multiracial. These statistics are a reflection of who is served by these programs, but they also show the magnitude of lgbtq relationship violence. While this report does not break down the types of violence experienced by their clients, it documents six murders that occurred in the context of lgbt relationship violence in 2003, a fact which serves to underscore the severity of relationship violence and the need for services and responses from the criminal justice system (NCAVP, 2003).

A report based on the National Violence Against Women Survey (Tjaden & Thoennes, 2000) compared intimate partner victimization rates between same-sex and opposite-sex couples. They conducted a telephone survey with a nationally representative sample of 8,000 women and 8,000 men about their experiences as victims of various forms of violence including intimate partner violence. They found that women living with female intimate partners experience less intimate partner violence than women living with male intimate partners. Nearly 25% of surveyed women said they were raped and/or physically assaulted by their male partner while slightly more than 11% of the women who lived with a woman reported being raped, physically assaulted, and/or stalked by their female intimate partners.

On the other hand, men living with male intimate partners, reported more violence than men who lived with female intimate partners. Approximately 15% of the men who have lived with a male intimate partner reported being raped, physically assaulted and/or stalked by a male partner while

7.7% of men who lived with women reported such violence by their female partner. When looking at overall patterns the report concludes that "intimate partner violence is perpetrated primarily by men, whether against male or female intimates. Thus, strategies for preventing intimate partner violence should focus on risks posed by men" (p. v). However, the lower rates of violence by women should not be used to justify inattention from the legal and social services communities. Whatever the rates, people are being harmed and need help. The patterns and differences in experiences of violence in heterosexual, gay, lesbian, transgender relationships need to be carefully examined in order to develop the best understandings, intervention, and prevention strategies. If we view all relationship violence as the same, we run the risk of treating all cases of relationship violence as equivalent and interchangeable when that does not seem to be the case (Ristock, 2002).

Differing Contexts of Relationship Violence

Several small studies have been conducted that show the need to consider the particular and specific contexts that surround people's experiences of relationship violence. (It is important to note that the exclusive emphasis on a gender-based analysis of violence can obscure the differing contexts surrounding heterosexual violence as well). Research explores the impact of contexts such as one or both partners dealing with a stigmatized illness such as HIV/AIDS; the effects of alcohol and drug use; social isolation in rural communities; experiences of dislocation as recent immigrants; and experiencing the combined effects of racism, classism, and violence. Although these differing contexts are not exhaustive and may overlap with one another, they reveal the ways that violence is reinforced in a larger context of social structures that create and sustain inequalities and disadvantages.

Dealing with Stigma: HIV/AIDS

HIV/AIDS is both a disease and a progressive disability that carries with it great social stigma (Hanson & Maroney, 1999). HIV/AIDS may be an issue along with domestic violence in any relationship, but given the major impact of HIV on gay and bisexual men's communities, it is a particular issue for bisexual and gay men. While HIV does not cause domestic violence, it may be a contextual factor in the abuse that occurs. Lettelier (1996) reports, for example, that abusive partners may withhold medication from their HIV positive partner or threaten to reveal their status as HIV positive. Further victims of domestic violence who are HIV positive may feel that they have no support available to them apart from their abuser. They often perceive themselves as 'damaged goods' or 'tainted' and feel that no one else would want them. If they are particularly ill, leaving an abusive partner may not be an option, especially if they have no other supports. Partners who are on the 'down low' (hiding their same-sex relationship) may neglect or not value their relationships with an HIV positive gay partner and may abandon them without support (King, 2004). Merrill and Wolfe (2000) found that 60% of the HIV positive gay men in their study cited fear of becoming sick and dying as a major influence on their decision to remain within an abusive relationship. If both partners are HIV positive, they may depend on joint incomes for their survival and they may be unwilling to put themselves or their partners out of their homes and onto the street. If the abusive partner is HIV positive, the victim may feel guilty about reporting to the police or feel like they would be abandoning them (Cruz, 2003; Hanson & Maroney, 1999).

The Effects of Drugs and Alcohol

Similarly, while drugs and alcohol do not cause domestic violence they can be a factor in creating a context in which violence is normalized or triggered within relationships (Renzetti, 1992; Island & Letellier, 1991). Most recently a small number of gay and AIDS groups are reporting an increase in violence that involves the use of crystal methamphetamine. It is seen as increasing the risk and intensity of physical violence (Gay City News, 2005).

In a study on lesbian relationship violence, several women reported using drugs and alcohol in different ways. In some cases, both partners drank and/or used drugs and reported an increase in arguing which often escalated into physical violence. In extreme cases, both partners passed out and could not fully remember the details of the incident. In other cases, victims reported drinking as a way to cope or to make themselves numb in order to endure their abusive relationships, while in other examples, victims reported that their abusive partners who used drugs or alcohol, became physically violent and then blamed their actions on substances rather than taking responsibility for their abusive behaviors (Ristock, 2002).

Social Isolation in Rural Communities

Even though there have been many gains made in human rights and visibility for lgbtq issues, rural communities are areas in which many people conceal their sexual identity or their identity as transgender for fear of negative repercussions such as violence or discrimination. Several studies have suggested that lgbtq people in small rural communities may be particularly vulnerable to violence because of increased isolation, lack of services and supports, and even the increased presence of firearms. (ACON, 2004; Mahoney, Williams & West, 2001).

Experiencing Dislocation as a Recent Immigrant

A few studies suggest that for recent immigrants, facing cultural barriers and anti-immigrant attitudes can create social isolation that can contribute to domestic violence and make it very difficult for a victim to leave a relationship or find supportive services. As well, being from a small marginalized ethno-cultural community can create feelings of social vulnerability. Two lgbtq people in a relationship from the same cultural background may be the only support that they each have in their new country. Perpetrators can use this context to further threaten and control their partner while victims may feel that they must not betray their partners, or bring shame to their families, and therefore endure the abuse (Chung & Lee, 1999; Balsam, 2001). Further, an abusive partner who is a citizen or who is a legal permanent resident may use their partner's immigrant status, limited English, and/or lack of knowledge of the legal system against them by threatening to have them deported or by leading them to believe they could be arrested or lose custody of their children if their same-gender relationship was revealed. Another related tactic is using someone's racial or cultural background to make the person being victimized feel inferior and/or using white privilege as a way for the abusive partner to feel "superior."

Grappling with the Combined Effects of Racism, Classism, and Violence

Finally when considering violence in lgbtq relationships it is also important to recognize the larger backdrop of violence and oppression in many lgbtq people's lives. For many people domestic violence is just one form of violence that they have experienced. Survey research by Herek, Gillis, Cogan and Glunt (1997) found that 20% of women and 25% of men had experienced victimization based on their sexual orientation. Many lesbian and bisexual women have experienced sexual abuse and/or male violence in addition to the violence in their same-sex relationships (Renzetti, 1992). Other research suggests 60% of all transsexual/transgender people have been victimized by hate violence (Moran & Sharpe, 2004). Another large-scale study of transgender people's experience with violence and discrimination found that over half of those surveyed (n=402) had experienced some form of harassment over their lifetime, with one quarter of participants experiencing a violent incident that resulted in some form of injury. This study also reports a strong association between economic discrimination and transgender violence (Lombardi, Wilchins, Priesing & Malouf, 2001).

When we consider contexts of racism including colonization of indigenous peoples and colonialism, we can see how lgbtq people of color experience the combined effects of discrimination, oppression and social control that affect their relationships. As Lola Butler (1999) writes, "to experience the difficulties associated with developing and maintaining a relationship compounded by an environment that devalues you because of your multiple ascribed statuses is a double burden that over time injures your psyche. Over time an injured psyche may seek to injure others. Such is the situation with African American lesbians experiencing partner abuse" (p. 203). Butler is not offering excuses for same-sex partner violence; rather she is pointing to the way people's lives are shaped differently by the effects of racism, sexism, classism, and homophobia. We need to consider the impact of differing contexts while still holding people accountable for engaging in abusive behaviors. Another example to consider is the differing effects of violence on small, close-knit queer communities of color. When a couple is in an abusive relationship, community members may align themselves with one or the other person in that relationship and thereby factionalize the community. The break-up of the couple becomes a break-up of the community.

In focusing on the differing contexts that surround people's experiences of relationship violence we can move away from tendencies to homogenize understandings of relationship violence. Carefully examining differing contexts means recognizing the diversity of spaces in which violence occurs and the way violence is linked to hierarchies of inequality. Similarly, researchers Almeida, Woods, Messineo, Font, and Heer (1994) challenge the public and private dichotomy commonly made when addressing forms of violence and suggest we must look at the violence enacted on gays and lesbians and people of color from different sites and multiple sources. They explain that white heterosexual women may benefit from the public illumination of intimate partner violence, but lgbtq and people of color, who live in a context in which their lives are pre-judged as inferior by dominant culture, do not.

Using a Framework of Intersectionality

The writings of Butler (1999) and Almeida et al. (1994) are examples of what is meant by the term intersectionality. A framework of intersectionality includes an analysis of contexts, the multiple

nature of identity, and the interlocking nature of systems of privilege and oppression to show how the categories of race, class, sex, gender, and sexuality rely on each other to function within systems of domination (Crenshaw, 1994; Razack, 1998). Intersectionality when applied to relationship violence is not an additive model where we simply add lgbtq abuse to our current understandings of domestic violence; nor is it an approach that falsely compartmentalizes experiences of abuse into separate special cases (lgbtq abuse/women of color abuse/people with disabilities abuse) while keeping white heterosexual women's experiences as the norm and at the forefront. This framework challenges the oversimplified either/or binaries (e.g., us/them, male/female, good/bad, victim/perpetrator) within which we often work. Balsam (2001) notes that all too often "helping systems respond to complex social problems by organizing experiences into categories of 'good' and 'bad'" (p. 34). Yet these categories often reflect certain gendered and racialized views of what it means to be a victim or perpetrator; those who do not fit those norms or standards will be blamed and/or excluded. A framework of intersectionality expands a gender-based analysis of violence to one that considers the connection of relationship violence to all systems of oppression and that takes a both/and stance (Russo, 2001). For example, a report from the Queer Asian and Pacific Islander Women's Program of the Asian Women's Shelter in San Francisco explains the need to both hold abusers accountable for their actions and recognize the way the needs of survivors are linked with the needs of perpetrators, particularly when considering the context of small queer Asian communities (Chung & Lee, 1999). One woman spoke about this issue in a focus group that the shelter conducted: "It's easy to see the batterer as the enemy, but it is not that easy when she is more than a batterer, but an immigrant who does work in our community" (p.11). Her comments illustrate the need to resist seeing the label "batterer" (or any label) as representing the total role or essence of that person. This larger anti-oppression framework is much needed within services and systems that have been set up to respond to relationship violence.

Barriers in Services

Perhaps the most significant impact of a larger context of homophobia, biphobia, transphobia and heterosexism is in the barriers that they create for accessing support. For example, it can be very difficult for lgbtq persons to tell family members, co-workers, neighbors what is happening if they are in an abusive relationship because of the fear that the violence will be seen as evidence that their sexual identity or gender identity is unhealthy. Several studies have reported on the many barriers lgbtq people experience when accessing services, such as perceived or actual homophobia (Scherzer, 1998), transphobia, and racism (Kanuha, 1990; Waldron, 1996). These studies comment on the inability of most services to fully respond to same-sex partner violence because of mainstream heterosexual approaches and assumptions (Ristock, 1994; Russo, 1999). For example, a gay or bisexual man presenting at a hospital with physical injuries is less likely to be asked about domestic violence than a woman who presents with physical injuries (Island & Letellier, 1991).

Several survey studies report that lgbtq people who do access formal services are more likely to turn to counselors for therapy or to informal supports (friends) rather than call the police, use the criminal justice system, access health care services, or turn to shelters for battered women (Renzetti, 1992; Ristock, 1994, 1998, 2001; Scherzer, 1998; Turell, 1999). Gay men and lesbians have historically had a low level of reporting any type of crime to the police (Thompson, 1995). For lgbtq people from diverse cultural backgrounds there may be a history of poor relations with the police

as well as discrimination in service provision (Waldron, 1996). Lgbtq people with non-legal immigration status may have additional fears of police and authorities (Mendez, 1996). Participants in focus groups for Queer Asian women revealed that they were very reluctant to use traditional enforcement systems (police, District Attorney, restraining orders, etc.) because of concerns with homophobia and racism both towards themselves and their abusive partners (subjecting them to an unjust system) (Chung & Lee, 1999).

The many services that operate to provide assistance to victims of heterosexual domestic violence often use language that does not reflect an awareness of same-sex relationships and same-sex partner abuse. This creates an impression that these services are for heterosexuals only. Lgbtq people often have great concerns over how and if confidentiality will be maintained (Ristock, 2001). Further, there are very few places that gay and bisexual men or transgender people can specifically turn to as victims of violence because most support services have been set up to address the more common problem of biological men committing violence against biological women. A recent report suggests that lgbtq people leaving abusive situations are at risk of homelessness because of the limited housing and shelter options available (ACON, 2004). Finally, there are very few programs for lgbtq perpetrators of violence, again because the focus has been on responding to heterosexual domestic violence and offering programs for heterosexual men's use of violence. Overall, there remains a strong need to develop more effective service provision in all sectors (criminal justice, social services, and health care) in order to better respond to lgbtq relationship violence (Chung & Lee, 1999; ACON, 2004).

Recommendations and Guidelines for Responding to LGBTQ Relationship Violence

Providing services to lgbtq people who have experienced relationship violence first requires, at minimum, the development of cultural competency. Organizations need to ensure that they offer ongoing anti-oppression training that acknowledges same-sex relationships, as well as sexual and gender diversity. Clear policies need to be in place for addressing homophobia, transphobia, biphobia, harassment and discrimination for clients, staff, and volunteers. Non-heterosexist, lgbtq-inclusive language also has to be in place in all communication and advertising materials so that lgbtq people know that they are welcome to receive supportive services (Renzetti, 2001; ACON, 2004). The criminal justice system in particular has to be willing to understand the larger context of why the lgbtq community has been reluctant to turn to the police or courts for support. This includes critically examining the assumptions, barriers and gaps that currently exist in policies and practices.

A flexible range of programs, services, and community responses is perhaps what is most needed to respond to lgbtq relationship violence. This includes information on legal options, counseling, accommodation, programs for survivors, programs for perpetrators, outreach efforts to lgbtq communities, friends and families as well as preventive efforts such as workshops on building healthy relationships (Ristock, 2002; Patterson, 2004). Where one service is unable to offer all things we can build co-coordinated efforts between programs and services and establish referral networks to better assist lgbtq people in making connections with other services and resources. For example, lgbtq services, HIV/AIDS services, addiction programs, women's shelters and anti-violence services,

agencies that serve the needs of specific ethno-cultural groups, health care services, legal aid programs, etc. can be part of any organization's referral list. It may be necessary for organizations to play an advocacy role and establish reliable contacts (such as police and lawyers) within institutionalized systems that have a history of inherent racism and classism and to prepare lgbtq people for this (Ristock, 2002).

Collaborations that include sharing expertise and resources may be the most creative way to develop effective intervention and prevention strategies (Hamberger, 1994; ACON 2004). Organizations can join or start a coalition or network of service providers to discuss issues, share dilemmas and insights and develop innovative programs and approaches.

But in order to ensure that these recommendations for improving services are not just an add-on gesture, all service providers need to be willing to ask themselves a set of critically reflexive questions. We need to reflect on and challenge the dominant and normative assumptions that often operate in organizations and in individuals and that work against responding effectively to lgbtq relationship violence.

For example, service providers might consider the following questions:

- Who benefits from the way we currently talk about relationship violence and what difference does that make?
- Whose voices are heard and not heard when we use the category heterosexual domestic violence; family violence; violence against women; lgbtq relationship violence, etc. and what difference does that make?
- Who is telling me their story, from what social location and in what social context?
- How can we think and work outside the gender binary system?
- What does a framework of intersectionality bring to my work?

These questions can help to make us more accountable and can provoke us to consider what we may not fully understand (Ristock, 2002).

Innovative Approaches

There are several examples of innovative programs that try to work outside the box of established heterosexual domestic violence protocols. Many of these programs are developed by and within lgbtq communities. They are, for example, broadening victim-only mandates and serving both survivors and perpetrators (in ways that still strongly consider the safety concerns of survivors). Some are offering court-mandated batterer intervention programs for lgbtq abusers as well as advocacy programs to help lgbtq people better access the legal and criminal justice system (see, for example, the LA Gay and Lesbian Centre).

The Queer Asian Women's Shelter has documented their approach to understanding the needs of Queer Asian women and made several recommendations on how to better respond to relationship violence and address the complexities of being part of a small marginalized community (see Chung & Lee, 1999). Similarly another project uncovered the particular needs of Queer Asian and Pacific Islander women and developed strategies for addressing those needs since they found that very few Asian Pacific Islander women were turning to service providers for help (Lee & Utarti, 2003). A significant theme that emerged in their meetings was "the need to build friendship networks and community ties in order to empower community members to support their friends who struggle with domestic violence" (p. 5). The handbook they published includes a description of two community projects that use community building as a way to address partner violence (Lee & Utarti, 2003). Similarly, the Washington State Coalition Against Domestic Violence has developed a protocol for working with friends and family members of domestic violence victims (Patterson, 2004). The protocol was developed because they recognized that survivors are more likely to turn to friends and family before accessing services. Their document suggests ways that anti-violence organizations can take their work into people's homes, work sites, and schools.

Other community-based outreach initiatives involve holding workshops and forums to address healthy relationships. One group of service providers tried to offer a support group for survivors of lgbtq relationship violence but found that very few women came forward to be part of the group. They learned that there were many concerns over confidentiality given the small size of the lgbtq community in that city. Instead they hosted an evening discussion on building healthy relationships and had a very large turnout of lgbtq women. The conversation covered a number of topics and abuse was one of them. Rather than identifying who in the room had experienced abuse, the discussion explored issues such as expectations in relationships, negotiating differences, power issues, warning signs of abuse, while also addressing the lack of institutional and social supports surrounding lgbtq relationships. The forum offered an important shift in strategy from organizational intervention to a community-based prevention and educational initiative that supported healthy relationships (Ristock, 2002). Another example of a community-based response, is the use of popular theatre to provide education and information to lgbtq communities. A play called Bruised presents four different scenes of lgbtq relationship violence. After the play there is a discussion with the actors and writers. Members of the lgbtq community who have some knowledge of lgbtq partner violence issues are in attendance to help facilitate and to answer questions. The play has traveled to different cities and has been performed in lgbtq bars and community centers reaching different parts of lgbtq communities (Ristock, 2002).

Many innovative programs have established web pages so that information on violent relationships is more easily accessible. For example, the Survivor Project addresses the needs of trans and intersex survivors of domestic violence. Their web-page provides information on how they work as "a multi-issue anti-oppression" organization, while also offering information on safety planning, links to other resources, and a guide to trans and intersex terminology and respectful language (<http://www.survivorproject.org/index.html>). The website for the Northwest Network for Bi, Trans, Lesbian, and Gay Survivors of Abuse (<http://www.nwnetwork.org/organizing.html>) is currently highlighting an innovative project called the Pink Martini Project. This was developed based on the results of a community survey of lgbtq bars in Seattle. Participating bars receive Pink Martini Bar Packs, which include posters, matchbooks and resource cards to increase awareness about relationship

violence and to highlight their commitment as community supporters who take a stand against violence in lgbtq communities. Other groups can develop similar initiatives designed to respond to the particular realities of their communities.

Conclusion

Important work is being defined and organized by and within lgbtq communities, which will help to ensure that relationship violence is addressed with an understanding of the wider context of society's systemic oppression. As important and appropriate as it is for lgbtq groups to identify and respond to the needs of their own communities, we need to ensure that the same level of support from mainstream services offered to members of the heterosexual majority culture are available to members of lgbtq communities. We all need to keep imagining new community, legal, and social service responses so that we can continue to work toward stopping all forms of violence and abuse, in part by learning how not to force diversely situated people into the limited forms of heterosexist gender and sexual identities.

Overall, it is important to recognize that violence in lgbtq relationships is a political issue that can be used against lgbtq people. Further, we have to be willing to listen to lgbtq people's differing experiences and contexts of relationship violence and differing needs. Service providers need to resist the tendency to create universalizing approaches to relationship violence that assumes sameness. The ethical challenge of developing appropriate responses to lgbtq relationship violence is to think through a framework of intersectionality and to keep this work rooted in larger anti-oppression and social justice efforts.

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Appendix A

Glossary of terms used in the document

These definitions are not fixed and are always changing in meaning in society. The definitions seek to provide further clarity to the discussion paper. Readers should be aware that many individuals might have different definitions for their own identities, which are theirs to define.

anti-oppression work: work that is committed to ending oppressive hierarchical social relations (centre/margin social relations) and larger systems of oppressions such as racism, sexism, classism, and heterosexism.

biphobia: the negative attitudes, prejudices and stereotypes that exist about people whose sexual attraction to others cannot be contained fully within the categories gay or lesbian or heterosexual.

bisexual: a person who is physically and emotionally attracted to females and males or who expresses fluidity in their attraction to a particular gender. Some people who identify as bisexual define their sexuality as one in which they are attracted to people of all genders to include those who identify their gender to be beyond the gender binary of female and male. See omnisexual.

gay: a man who is physically and emotionally attracted to other men. It can also be used to describe men and women who have primarily same-sex desires.

genderqueer: those who identify their gender outside the gender binary system of male and female, who may be fluid with gender presentation or may not conform to gender norms and may use gender neutral pronouns such as "sie, hir, hir, hirs, hirsself" or "zie, zir, zir, zirs, zirsself" or choose to use the pronoun closest to the end of the masculine or feminine spectrum they are presenting. Other terms that gender nonconforming people use are boy dyke, dyke boy, boi, femme queens, butch boi, drags, or aggressives (AGs).

gender-based analysis: an analysis that focuses on gender relations and how sexism and patriarchy operate. In the field of violence this analysis would examine the strong pattern of male violence against women.

heterosexism: the assumption that everyone is heterosexual and that heterosexual relationships are natural, normal and worthy of support. These assumptions are systemic and institutionalized.

heterosexual: a person who is physically and emotionally attracted to people of a different sex and not to people of the same sex.

homophobia: the negative attitudes, stereotypes and prejudices that still exist in society about individuals who are not heterosexual. It is most often directed at individuals who are gay or lesbian or thought to be gay or lesbian.

intersex: a general term used to cover many different situations in which a person is born with reproductive or sexual anatomy that does not seem to fit typical definitions of male or female. Often they are subjected to surgical procedures to remove sexual ambiguity. This procedure can negatively alter and affect their adult lives. Although intersex is a fairly common anatomical variation, the existence of intersex people has been obscured by societal fear and prejudice.

intersectionality: an analytical framework used to understand the way multiple identities (for example, gender, race, class, sexuality) shape people's experiences of oppression and privilege. The analysis exposes the different types of discrimination and disadvantage that occur as a consequence of multiple identities.

lesbian: a woman who is physically and emotionally attracted to other women

omnisexual: a person who is physically and emotionally attracted to people of all genders, which could include people that identify as female, male, intersex, genderqueer, transgender, or transsexual.

queer: a formerly derogative term that has been reclaimed in a positive way to reflect the diversity and breadth of sexual and gender identities. This can include transgender, intersex and questioning people as well as people who consider themselves heterosexual and engage in same-sex sex even though they do not identify as bisexual or gay.

transgender: a person who feels their gender identity does not match their biological sex and/or who feels the gender they were assigned at birth does not match the gender with which they identify. The term transgender is used in many different ways. Other possibilities include people who perform genders or deliberately play with/on gender as well as being gender-variant in other ways. "MtF" (male-to-female, masculine-to-feminine) and "FtM" (female-to-male, feminine-to-masculine) are two of the common ways trans people describe themselves.

transphobia: the negative attitudes, stereotypes and prejudices that exist about individuals whose gender identity does not conform with the gender traditionally assigned to their biological sex.