



National LGBTQ Institute on Intimate Partner Violence

A PROJECT OF THE LOS ANGELES LGBT CENTER

In partnership with the National Coalition of Anti-Violence Programs and In Our Own Voices, Inc.

*Toolkit for*

**INCREASING**

**SHELTER**

**ACCESS**

*to LGBTQ Survivors of  
Domestic Violence*

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# Intro

The National LGBTQ Institute on Intimate Partner Violence (Institute) was created to significantly enhance the safety, well-being, support, and health of LGBTQ intimate partner and domestic violence survivors throughout the United States. The Institute is a project of the Los Angeles LGBT Center, the nation's oldest and largest community-based LGBTQ service and support organization, in partnership with the National Coalition of Anti-Violence Programs (NCAVP) and In Our Own Voices Inc. The Institute delivers state-of-the-art training and technical assistance that expand the capacity of public and private agencies to provide culturally relevant, survivor-centered LGBTQ intimate partner violence intervention and prevention services. The Institute conducts research to identify evidence-informed interventions and uses these to generate effective policy and legal initiatives at the local, state, and national level that expand the quality and accessibility of LGBTQ intimate partner violence services while expanding the rights of LGBTQ IPV survivors.

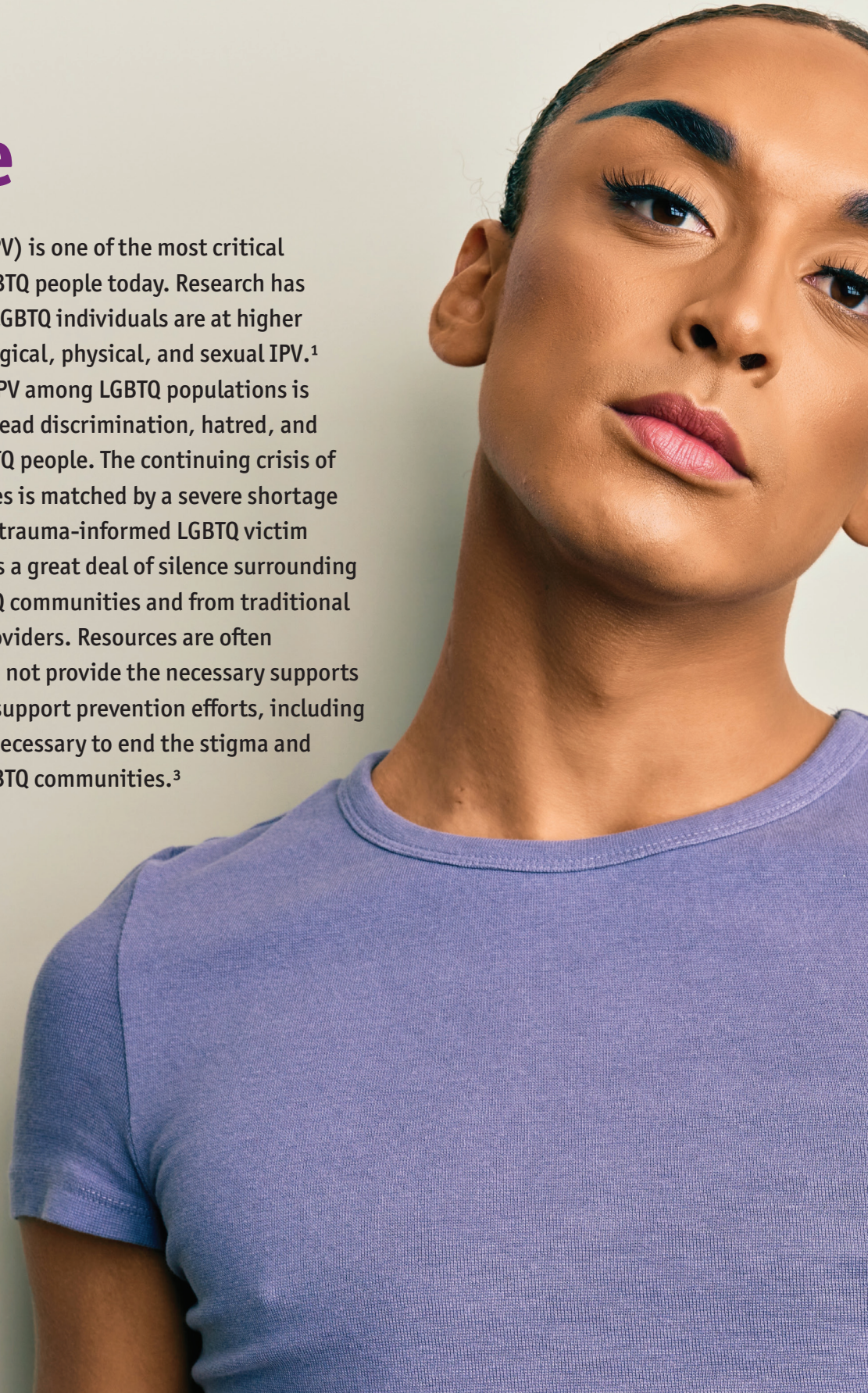
## Acknowledgement

The toolkit was created by the National LGBTQ Institute on Intimate Partner Violence in an effort to address concerns that staff members at traditional domestic violence programs may have regarding sheltering survivors of intimate partner violence whose gender and/or sexual identity may be different from the majority of survivors most often served by the shelter. This toolkit was built with knowledge from the New York State LGBTQ Intimate Partner Violence Network and would not be possible without them.



# The Issue

Intimate partner violence (IPV) is one of the most critical health issues confronting LGBTQ people today. Research has consistently concluded that LGBTQ individuals are at higher risk of experiencing psychological, physical, and sexual IPV.<sup>1</sup> The increased prevalence of IPV among LGBTQ populations is related in part to the widespread discrimination, hatred, and violence experienced by LGBTQ people. The continuing crisis of IPV within LGBTQ communities is matched by a severe shortage of tailored, appropriate, and trauma-informed LGBTQ victim services nationwide.<sup>2</sup> There is a great deal of silence surrounding LGBTQ IPV, both within LGBTQ communities and from traditional domestic violence service providers. Resources are often prioritized in a way that does not provide the necessary supports to LGBTQ survivors, nor that support prevention efforts, including the cultural transformation necessary to end the stigma and silence around IPV within LGBTQ communities.<sup>3</sup>



<sup>1</sup> Messinger, Adam M., *LGBTQ Intimate Partner Violence: Lessons for Policy, Practice, and Research*, University of California Press, Oakland, 2017.

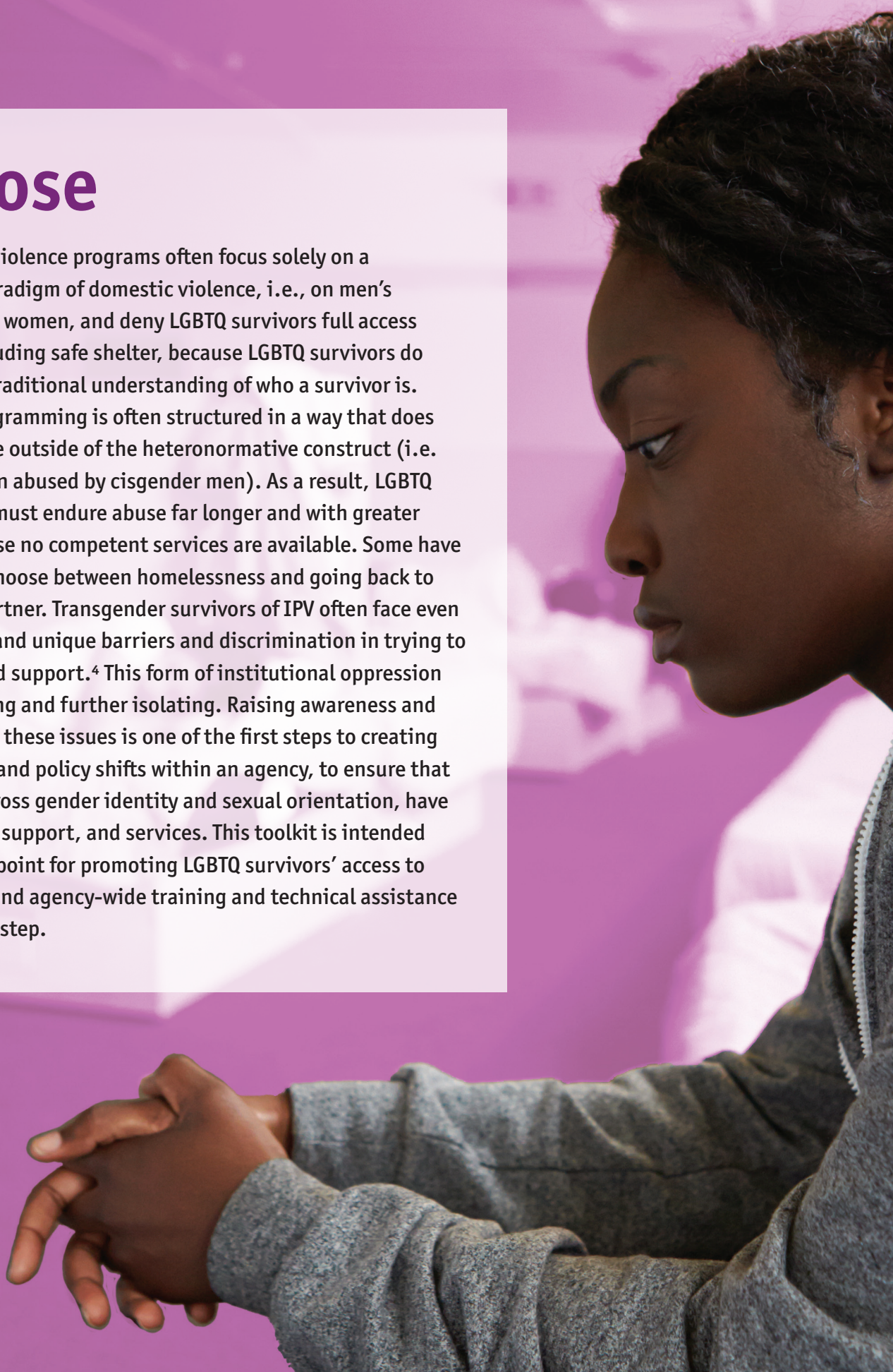
<sup>2</sup> Aulivola, Michelle, “Outing Domestic Violence”, *Family Court Review* 42, No. 1 (2004): 162-177

<sup>3</sup> Holt, Susan PsyD; Whirry, Robert. “Finding Safety: A Report About LGBTQ Domestic Violence and Sexual Assault”, Los Angeles LGBT Center. September, 2022. [https://stopviolence.lalgbtcenter.org/wp-content/uploads/2022/08/Finding\\_Safety.pdf](https://stopviolence.lalgbtcenter.org/wp-content/uploads/2022/08/Finding_Safety.pdf)



# Purpose

Many domestic violence programs often focus solely on a heterosexual paradigm of domestic violence, i.e., on men's violence against women, and deny LGBTQ survivors full access to services, including safe shelter, because LGBTQ survivors do not meet their traditional understanding of who a survivor is. In addition, programming is often structured in a way that does not assist people outside of the heteronormative construct (i.e. cisgender women abused by cisgender men). As a result, LGBTQ survivors often must endure abuse far longer and with greater intensity, because no competent services are available. Some have been forced to choose between homelessness and going back to their abusive partner. Transgender survivors of IPV often face even more pervasive and unique barriers and discrimination in trying to access safety and support.<sup>4</sup> This form of institutional oppression is re-traumatizing and further isolating. Raising awareness and education about these issues is one of the first steps to creating cultural change and policy shifts within an agency, to ensure that all survivors, across gender identity and sexual orientation, have access to safety, support, and services. This toolkit is intended to be a starting point for promoting LGBTQ survivors' access to shelter spaces, and agency-wide training and technical assistance is a critical next step.



<sup>4</sup> Holt, Susan PsyD; Whirry, Robert. "Finding Safety: A Report About LGBTQ Domestic Violence and Sexual Assault", Los Angeles LGBT Center. September, 2022. [https://stopviolence.lalgbtcenter.org/wp-content/uploads/2022/08/Finding\\_Safety.pdf](https://stopviolence.lalgbtcenter.org/wp-content/uploads/2022/08/Finding_Safety.pdf)



# Inclusive Services

Inclusion means actual and meaningful access to residential and non-residential core services and other programming that IPV programs are licensed, approved, or otherwise funded to provide, including:

- **Hotline Assistance**
- **Emergency and/or Transitional Housing**
- **Information & Referral**
- **Advocacy**
- **Counseling & Support Groups**
- **Community Education & Outreach**
- **Children's Services**
- **Legal Services**
- **Transportation**
- **Translation & Interpretation Services**
- **Other Specialized Services**



## Inclusive Intake Process

The intake process is one of the earliest points of contact a survivor has with your program. It is important that it be a welcoming and affirming experience for all survivors. By letting new people know that your space welcomes all survivors of domestic violence you flag it as a safe space if the person identifies as LGBTQ. This also lets non-LGBTQ identified survivors know that the space is open to any survivor of IPV and that your organization prioritizes safety and respect for everyone, regardless of sexual or gender identity. You can begin with a simple examination of your space. Does it include posters and references to LGBTQ relationships, safety, and inclusion? In addition, collecting certain information on sexual orientation and gender identity at intake can help your organization provide more tailored, responsive, and supportive services to clients.

# Inclusive Intake Process (continued)

*Here are a few tips on how to make your intake forms and process more inclusive:*

- Affirm someone's sexual orientation or gender identity by asking questions with respect, rather than making assumptions based on their appearance or mannerisms.
- Ask for the survivor's gender pronouns and ensure you and all staff use them. Do this regardless of what you may see on the person's identification as not all identification may accurately reflect their identity. If you do not know their pronouns, then do not assign one to them. Use "they/them" or their name in place of an assumed pronoun.
- If for legal reasons, you need to gather information about a survivor's legal name, you should avoid asking "what is your real name" and instead ask "what is your legal name?"
- Make sure that is explicitly communicated with the client, verbally or written on the intake, that questions around sexual orientation, gender identity, and pronouns are optional. Not all LGBTQ survivors will feel safe or comfortable disclosing this information.

**DATA COLLECTION AND INTAKE FORMS** should be presented to all clients and consistently ask about sexual orientation, gender identity, and pronouns in a way that includes expansive multiple choice options following LGBTQ-expert guidelines for clients to choose from along with space for client to write in an identity that may not be listed. There should be a "decline to answer" option for clients who do not wish to self-disclose. While not meant to be an exclusive list, here are some examples of how to ask about gender identity, sexual orientation, and pronouns:

## HOW DO YOU IDENTIFY YOUR GENDER?

- ▶ Woman
- ▶ Man
- ▶ Transgender Woman
- ▶ Transgender Man
- ▶ Nonbinary
- ▶ Gender Non-Conforming
- ▶ Genderqueer
- ▶ Self-ID \_\_\_\_\_
- ▶ Decline to answer

## WHAT IS YOUR SEXUAL ORIENTATION?

- ▶ Heterosexual
- ▶ Gay
- ▶ Lesbian
- ▶ Bisexual
- ▶ Queer
- ▶ Questioning
- ▶ Pansexual
- ▶ Asexual
- ▶ Self-ID \_\_\_\_\_
- ▶ Decline to answer

## WHAT PRONOUNS DO YOU USE?

- ▶ He/him/his
- ▶ She/her/hers
- ▶ They/them/theirs
- ▶ Ze/hir/hirs
- ▶ Name only
- ▶ Self-ID \_\_\_\_\_
- ▶ Decline to answer

## HOW TO HANDLE POSSIBLE QUESTIONS

**Client asks:** “Why are you asking me that question?”

**Response:** “We are an LGBTQ inclusive provider and work with individuals from many experiences and backgrounds; therefore we collect a wide array of various demographic information and data on everyone to help us assure that we are providing tailored services.”

**Client asks:** “Why does that question matter for me to receive services?”

**Response:** “Please know that all of the questions are totally optional to answer and not required to receive services. All of the information that you choose to provide to us is helpful in determining how best we can support you.”

## Creating a Welcoming Space

Creating gender inclusive space is vital to ensuring your services are LGBTQ inclusive. Here are a few tips on how to make your space more welcoming:

- Display LGBTQ flags and LGBTQ-supporting stickers, posters, and other visual indicators of support around the office prominently. These visual cues of LGBTQ inclusivity should ideally be set up specifically in welcome, waiting, and communal areas. These visual cues should be intentionally and explicitly inclusive to the transgender community.
- Use the term “survivors,” “clients,” or other gender inclusive language rather than “women” when referring to the people accessing services.
- Use gender neutral language such as “partner” or “ex-partner” as opposed to “man” or “batterer”. Use a variety of pronouns that reflect the unique genders of all survivors.
- Shelter staff can take an active role in creating safety for LGBTQ survivors rather than putting the onus on a survivor to self-disclose. It’s the responsibility of the shelter to educate everyone to ensure safety for LGBTQ survivors. Consider ways you can communicate to residents that your facility is inclusive, beginning at intake, when you describe your shelter practices and protocols. Let residents know that this is an LGBTQ+ inclusive space and that you accept survivors of all gender identities and sexual orientations. Set clear rules about how residents are expected to treat one another, and convey that bias and discrimination are not allowed.
- Provide a variety of support group options for residents to choose from that will be inclusive to the different communities you serve. Be flexible so that you can offer groups that meet the needs of the people currently in your program. One option could be a specific support group for LGBTQ survivors. Another option could be a non-gendered, explicitly LGBTQ inclusive, support group for all survivors.





## Creating a Welcoming Space (continued)

- If residents say or do something anti-LGBTQ, address the issue in the same way you would any other biased or discriminatory remarks or behaviors (e.g. just as you would with racist, sexist, or anti-immigrant slurs). Treat these incidents as opportunities to educate and give residents a chance to change their attitudes and behavior, but always address harmful language and actions.
- Provide in-depth staff training and discussion about how to support the specific needs of LGBTQ survivors, especially disproportionately impacted communities such as transgender, bisexual, and Black, Indigenous, and people of color (BIPOC) survivors.
- Mirror the language that clients are using to talk about themselves, their gender identity, their sexual orientation, and their past/present partners.
- It is essential that all LGBTQ people be understood, accepted, and addressed as the gender with which they identify, regardless of how you interpret their presentation. This is similar to any other protocol around respect and non-discriminatory behavior.

# Structuring Shelter Spaces

## **BEST PRACTICE:** Studio Spaces

If funding and space is available to create new shelter spaces, establish best practice shelter spaces that are private rooms or studio spaces with a door that closes.

## **EFFECTIVE PRACTICE:** Multiple Congregate Shelter Spaces

An option for congregate or dorm-style shelter spaces could be to have shelter space divided into wings or sections, or for there to be multiple shelter locations. These spaces can be divided into “men,” “women,” and “LGBTQ” options that survivors can self-select based on which option feels most safe (e.g.: an LGBTQ woman could choose to be in the shelter space for women if she wanted to and would not have the LGBTQ shelter space selected for her by staff). All options should be explicitly LGBTQ inclusive and have visual cues of LGBTQ inclusivity throughout common spaces.

## **COMPREHENSIVE PRACTICE:** Single Congregate Shelter Space

For congregate or dorm-style shelter spaces where shelter spaces cannot sectioned or set in multiple locations, one option is to establish a shelter space that is non-gendered. This can be done by creating residential rooms that can be connected or separated via privacy screens or room dividers to create bigger or smaller private rooms as needed. This kind of design offers shelters the flexibility to offer privacy and safe housing to both individuals and families of all genders. Strategies to maximize privacy wherever possible should be implemented for residents’ comfort and safety. If you do not have the ability to alter your space with privacy screens or room-dividers, make sure to use the existing space creatively so LGBTQ people are not excluded.

## **PARTIALLY EFFECTIVE PRACTICE:** Hotel Space

If LGBTQ survivors are being sheltered in a temporary hotel space instead of the DV shelter space, ensure that all survivors have the same level of on-site access to advocates. Mitigate any added barriers to transportation, accessibility, and ease of accessing the resources and services available to survivors on-site at the shelter that a survivor may face when being sheltered in a separate hotel space. Confidentiality and safety of location of the hotel should be carefully considered, and relationships should be built with hotel management to provide for both DV and LGBTQ training.

## **INEFFECTIVE PRACTICE:** Referring Out to Homeless Shelters

Referring LGBTQ survivors to homeless shelters can be dangerous. Non-DV shelters are unlikely to screen abusive partners out and are often not confidential locations. Making these referrals can put LGBTQ survivors in dangerous situations that can jeopardize their safety.

# Screening/Assessment

Domestic violence programs have a commitment to providing supportive advocacy to survivors of domestic violence. Traditional programs have often strongly relied on the gender of the prospective client to help them determine if the person is a survivor or abuser. While this determination is based on widely accepted anecdotal and formal prevalence data, it can be highly problematic because it completely excludes the lived experiences of LGBTQ survivors and leaves advocates without the proper training necessary to identify victims and perpetrators within these communities. This can result in abusive partners being accepted into a shelter instead of a survivor or being accepted into the same shelter as a survivor due to lack of screening. Training in effective and inclusive screening practices is an essential part of service provision and gives advocates the opportunity to more accurately assess all potential clients' patterns of abuse, rather than merely relying upon gender as the sole indicator of victimization or perpetration. The Institute can provide more in-depth training and technical assistance on these types of assessments. However, a few key principles of effective, inclusive screening include:

## Abuser-Survivor Differentiation

Any IPV assessment should include an analysis of power and control dynamics in a relationship to identify who holds the majority of power and control in the relationship, and who does not, without relying on gender stereotypes or assumptions based on appearance. Below are key areas to consider during assessment:

### PHYSICAL VIOLENCE

- ▶ While more than one partner can use violence, assess what the purpose and the impact of the violence is.
- ▶ Is it in self-defense?
- ▶ Who has the more serious injuries?

### EMOTIONAL VIOLENCE

- ▶ Whose world is getting smaller?
- ▶ Who is more isolated?
- ▶ Who feels more responsible/guilty?

### ECONOMIC VIOLENCE

- ▶ Who has control of the finances?
- ▶ Even if one partner earns most of the income, do they control the finances?
- ▶ Are finances used as a means of power and control?

### SEXUAL VIOLENCE

- ▶ Who controls decisions around when and how the couple has sex?
- ▶ Does one person feel coerced into having sex?
- ▶ Does one person feel they have to have sex with their partner to avoid further conflicts/abuse?



# Trainings and Technical Assistance is Available

Remember, this toolkit is just a beginning.

As you work to create an inclusive shelter space,  
it is important to provide extensive training for all levels  
of your staff. You can request free training and technical assistance  
from the National LGBTQ Institute on Intimate Partner Violence.

For more information you can contact us at:

<https://lgbtqipvinstitute.org/contact-us/>

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