## SHELTER ACCESS

TOOLKIT



INCREASING SHELTER ACCESS
TO LGBTQ SURVIVORS
OF INTIMATE PARTNER VIOLENCE

## **INTRO**

The New York State LGBTQ Intimate Partner Violence Network (the Network) seeks to raise awareness of and improve response to the intimate partner violence that impacts lesbian, gay, bisexual, transgender and queer (LGBTQ) communities throughout the state. The Network supports service providers, advocates, policymakers and others by providing education and advocacy, fostering collaboration, and identifying and working towards needed change. This toolkit is a guide to help you begin to make your shelter space LGBTQ inclusive and ensure that LGBTQ survivors have better access to services statewide.

The toolkit was created by the Network's Shelter Access Committee 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 (i.e. cisgender¹ women abused by cisgender men). Anti-discrimination mandates under state and federal law, and often present in organizational funding streams, require that domestic violence programs shelter all survivors, regardless of their sexual or gender identity. We suggest reading the VAWA 2013 FAQ DOCUMENT² and the FVPSA LGBTQ ACCESSIBILITY POLICY³ for more information.

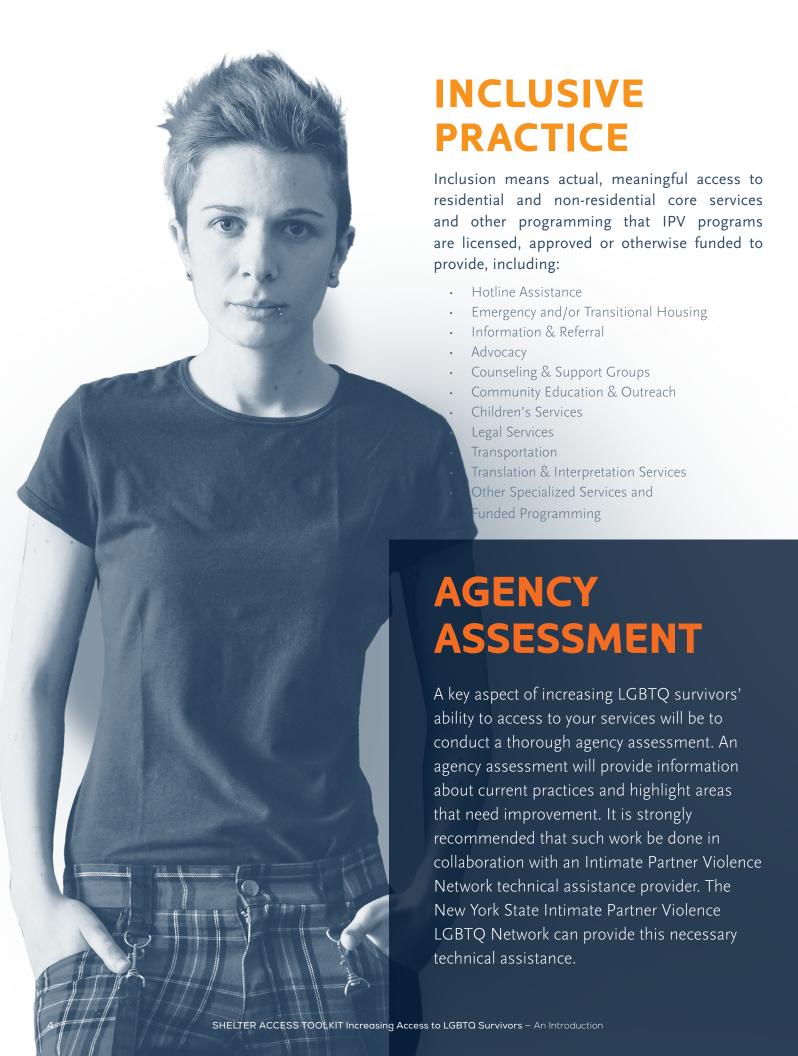
<sup>1.</sup> **ACISGENDER PERSON** is someone who identifies as the gender/sex they were assigned at birth. For example, someone who's birth certificate says female, and who identifies as a woman.

 $<sup>2. \</sup>quad United States Department of Justice. 2014. Non discrimination Grant Condition In The Violence Against Women Reauthorization Actor 2013. Retrieved from http://www.justice.gov/sites/default/files/ovw/legacy/2014/06/20/faqs-ngc-vawa.pdf$ 

 $<sup>3. \</sup>quad United States Government Publishing Office. 2013. Appendix B: LGBTQAccessibility Policy. Retrieved from http://www.gpo.gov/fdsys/pkg/FR-2013-04-18/pdf/2013-09093.pdf$ 

#### THE ISSUE

INTIMATE PARTNER VIOLENCE (IPV) affects many LGBTQ people, but there is a great deal of silence surrounding IPV, both within LGBTQ communities and from traditional domestic violence service providers. Resources are often prioritized in a way that do 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. Many domestic violence programs in New York State often focus solely on a heteronormative 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. 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 your agency, to ensure that all survivors, across gender identity and sexual orientation, have access to safety, support, and services.



## **INCLUSIVE INTAKES**

The intake process is one of the earliest points of contact a survivor has with your program. It's 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 both flag it as a safe space if the person identifies as LGBTQ, while also

letting 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, appropriate and supportive services to clients. Here are a few tips on how to make your intake forms and process more inclusive:

### **SAMPLE IDENTITY QUESTIONS:**

- "How do you identify your gender?"
- "What pronouns do you prefer?"
- "What is your sexual orientation?"

#### **AFFIRMING A SURVIVOR'S IDENTITY:**

- You cannot and should not judge or assess someone's orientation or gender identity based on their appearance or mannerisms.
- Ask for the survivor's preferred name and 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 preferred pronoun, then do not assign one to them. Use 'they' or 'that person' or their name in place of an assumed pronoun.
- If for legal reasons, you need to gather information about a survivors legal name, you should avoid asking "what is your real name" and instead ask "what is your given name."



## WELCOMING SPACE

Creating gender neutral space is vital to ensuring your services are LGBTQ inclusive. Here are several tips:

- **USE THE TERM "SURVIVORS"** rather than "women" when referring to the people you serve. Use a variety of pronouns that reflect the unique genders of all survivors.
- **USE THE TERM "ABUSIVE PARTNER"** as opposed to man, or batterer. Use a variety of pronouns that reflect the unique genders of all survivors.
- 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. Encourage an understanding of the common experience of survivors.
- CREATE RESIDENTIAL ROOMS THAT CAN BE CONNECTED OR SEPARATED via locked doors 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 alike. If you do not have the ability to alter your space, USE YOUR EXISTING SPACE CREATIVELY so LGBTQ people are not excluded.
- PROVIDE GENDER NEUTRAL OR PRIVATE BATHROOMS.
- CONSIDER WAYS YOU CAN COMMUNICATE WITH RESIDENTS that your facility is inclusive, beginning at intake, when you describe your shelter practices and protocols.
- If residents say or do something homophobic or transphobic, **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.)
- PROVIDE IN-DEPTH STAFF TRAINING and discussion about how to support the specific needs of LGBTQ residents, especially transgender and male identified residents.
- 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.

#### **SCREENING**

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 data4 from the CENTERS FOR DISEASE **CONTROL** (CDC), 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. 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 the gender as the sole indicator of victimization or perpetration.

## A FEW KEY PRINCIPLES OF EFFECTIVE, INCLUSIVE SCREENING INCLUDE:

#### PRIMARY AGGRESSOR ASSESSMENT

— Any IPV assessment should include an analysis of power and control dynamics in a relationship, so as 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? Who is arrested or held accountable for the violence?

- 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 in order to avoid further conflicts/abuse?

# DON'T ASK WHY. ASK WHAT, WHO, HOW, WHERE AND WHEN.

do when you get upset? What happened during the argument? What was the argument about? How are decisions made? Who are your friends, family and other supports? Where do you work/go to school? Where does your partner work/go to school?

- CONTEXT Is the coercive or aggressive behavior about trying to survive or about trying to control?
- EFFECT How did the behavior affect the person being interviewed?
- INTENT Remember that it is not about figuring out who has done what to whom, but rather, it is about determining which person is exercising systematic power and control over the other.



<sup>4</sup> Centers for Disease Control. 2012.
UnderstandingIntimatePartnerViolenceFact
Sheet. Retrieved from http://www.cdc.gov/
violenceprevention/ndf/IPV factsheet-a.pd/

## TRAININGS & TECHNICAL ASSISTANCE 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 a free training from the New York State Intimate Partner Violence LGBTQ Training and Technical Assistance Center.

#### **TAKE ACTION!**

If your organization is interested in taking on-going action please consider applying to join the

**NEW YORK STATE** 

LGBTQ Intimate Partner Violence Network.





## This toolkit was created by the NEW YORK STATE LGBTQ INTIMATE PARTNER VIOLENCE NETWORK'S SHELTER ACCESS COMMITTEE

and would not have been possible without the work of:

CORBIN STREETT,
CHRISTINE RODRIGUEZ,
YASMIN SAFDIE,
CATHERINE HODES,
CATHERINE SHUGRUE DOS SANTOS,
AMY SCHWARTZ,
RACHEL GOLDSMITH,
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