Connie Burk, Northwest Network¹ of Bisexual, Trans, Lesbian and Gay Survivors of Abuse (NW Network) Executive Director

My first day with the NW Network was Pride Day 1997. My partner and I had just pulled in from Kansas the night before. Still tired from our cross-country trek in a Ryder truck stuffed with all our worldly belongings, we walked the one block from our new apartment to the Pride March route. When all the Dykes on Bikes, Entre Hermanos fabulous floats, candidates running for office, city officials, police and fire chiefs, the Thai Community Association’s Youth Drill Team, and the Library Bookmobile with its attending gay librarians went past, waving to the crowd, beaming smiles bright as day, I thought, “We are NOT in Kansas anymore” and stepped off the curb into my new role as Executive Director and a “professionally gay” person.

I have seen a lot of changes in the past 15 years. When I started at the NW Network, virtually no survivor we worked with wanted to call law enforcement or involve the courts in their lives in any way. The pervasive negative stigma, state repression, and institutional bias made the idea of trying to access these systems seem naive and best, fatal at worst. The stories from people who, back against the wall, had called 911 were scary. Most survivors who had had contact with the police had been arrested, often in a ‘dual arrest’. Feeling entitled to fair, compassionate, or respectful treatment from state or social institutions was a luxury well out of reach, being left alone was enough.

Now, lesbian, gay, bisexual, and transgender (LGBT) survivors and community members believe that we should receive fair, compassionate, and respectful treatment from law enforcement, the courts, child protection services, schools, and other institutions—-even if we still don’t expect we will.

How did we get here? Survivors led the hard work of increasing LGBT self-determination and safety, and expanding culturally competent, relevant, community led responses to the bias and violence faced by our community every day. It was important to share a positive vision. Not a story of how sad or broken or vulnerable we were, but the evidence of the strength and resilience we build when we honor our communities and one another.

The NW Network, as LGBT survivors from diverse backgrounds and perspectives, works across the Spectrum of Prevention: advocating with other survivors, engaging communities for change, educating providers, fostering networks and coalitions, and advancing policy for systems and social change. Collaboration and partnerships at the center, we shared what we learned with other LGBT anti-violence organizations and domestic violence/sexual assault programs. Hundreds of advocates have attended our National Q&A Institute over the years, and our webinars in recent months, carrying back a commitment to change and the tools

¹ The Northwest (NW) Network works to end abuse in diverse lesbian, gay, bisexual, and transgendered communities (LGBT). For over 25 years, the NW Network has increased communities’ capacities to support the self-determination and safety of LGBT survivors of abuse.
to make it happen in their programs across the country (and around the globe).

Yes, there were hard years when few people wanted to risk talking about (much less funding) LGBT services. Times when we had to stop and retool to meet the needs of our diverse community. Times when we struggled to make inroads. Significantly, most confidential domestic violence shelters persisted in simply not offering shelter services for transgendered people, gay and bisexual men, or LGBT children and teens experiencing violence from family members. LGBT people were largely turned away from support groups and other non-shelter services in mainstream programs as well.

So, despite many notable triumphs, comprehensive, appropriate, compassionate, and skilled advocacy for LGBT people of all genders remained a doubtful aspiration. And then...came an exciting time for LGBT inclusion in the movement to end family violence, domestic violence, and sexual assault!

Earlier this year, the Office of the Family Violence Prevention Services Act and the reauthorization of the Violence Against Women Act called on grantees to commit to true inclusion—regardless of sexual orientation or gender identity and expression—across all programs. Meanwhile, the Centers for Disease Control and Prevention released a groundbreaking report on sexual orientation and intimate partner violence, documenting the urgent need for culturally competent services. And, the National Council of Juvenile and Family Court Judges (NCJFCJ) partnered with the NW Network to host focus groups on LGBT access and community issues and produce this issue of Synergy.

As a result, more advocates are and will be inspired to act. From every corner, folks are reaching out and searching for tools and information to create lasting change on the ground, and to open doors for survivors of all genders and sexual orientations. This issue of Synergy is part of this growing national conversation, sparked by the on-going collaboration between NCJFCJ and the NW Network.

Like NCJFCJ, the NW Network is a National Training and Technical Assistance provider. Our staff are consultants to the National Domestic Violence Hotline, the Asian Pacific Islander Institute on Domestic Violence, the National Center on Domestic Violence, Trauma and Mental Health, the Center for Disease Control, numerous institutes, state coalitions, and many local programs. We share a positive vision for growth everywhere we go. We understand the experiences of survivors AND the challenges facing the anti-violence field. We know advocates want to help LGBT survivors, but are often overwhelmed by the barriers and backlash facing their agencies. We believe that a robust gender analysis—not a ‘gender neutral’ approach—is needed to understand domestic violence and sexual assault and meet the needs of LGBT survivors.

Please check out our website at www.nwnetwork.org, and keep this issue and us in mind as your community commits to excellent services for survivors of all gender identities and expressions and sexual orientations! You can do it. We can help!

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2 In 2013, the NW Network has active projects with Alaska, Florida, Tennessee, Nevada, Washington State and Idaho coalitions.
What was the first message you received about lesbian, gay, bisexual, queer, and/or transgender (LGBQ/T) people? How old were you? Where did this message come from? Was this message positive, negative, or neutral? For many, the first message came when they were quite young and from people they had great respect for. Many early messages were not positive or affirming and often, the messages condemned LGBQ/T identities and individuals as shameful, dangerous, or wrong and justified rather than challenged bias and discrimination targeted against LGBQ/T people. In some cases, LGBQ/T people were not referred to or acknowledged at all. Still others, heard messages that encouraged equality over hate, justice over marginalization, and community and love over isolation. Whether straight or gay, these messages influence how one understands and experiences the social and legal systems. In many cases, the essence of the negative messages are codified across the country in repressive laws and policies that render LGBQ/T families invisible and overtly deny LGBQ/T people and families basic protections. This article will provide an introduction to the patchwork of legal protections and censors that govern the rights and recognition of LGBQ/T individuals and families in this country.

Overview

Today, as many as six million American children and adults have an LGBQ/T parent.¹ The highest proportions of same-sex couples raising biological, adopted, or step-children live in the states of Mississippi (26%), Wyoming (25%), Alaska (23%), Idaho (22%), and Montana (22%) and the cities of Salt Lake City, Memphis, and San Antonio. Each of these areas is governed by constitutional amendments that ban marriage for same-sex couples.² Thirteen states and the District of Columbia recognize marriage equality,³ and overall acceptance by U.S. residents of LGBQ/T identities is at over 60%.⁴ Yet, vehement defenses of bias against and inequity for LGBQ/T families persist. There is hope and momentum for change in the everyday victories of LGBQ/T families and their allies as more jurisdictions move towards marriage equality and statewide non-discrimination provisions for LGBQ/T individuals, and most of all in the millions of LGBQ/T families who live and thrive all across the country. On June 26, 2013, LGBQ/T individuals and families secured a tremendous victory when the U.S. Supreme Court issued a decision in United States v. Windsor, 570 U.S. ___ (2013) (Docket No. 12-307) declaring unconstitutional a key provision of the Defense of Marriage Act (DOMA), which prevented federal recognition of same-sex marriage. The opinion stated that the law violates the guarantees of equal protection and due process. In an accompanying decision in Hollingsworth v. Perry, 570 U.S. ____ (2013) (Docket No. 12-144), Proposition 8, a constitutional amendment barring same-sex marriage in California, was also rendered invalid. This double victory gives incredible momentum to the struggle to obtain full and comprehensive recognition of LGBQ/T families throughout the United States.

Despite anti-LGBQ/T laws around the country, limited, piece-meal extensions of basic civil rights and relationship recognition for LGBQ/T individuals and families are emerging in victories small and large. Hospitals are drafting new policies to allow same-sex partners access to support and decision making, discrimination based on sexual orientation and gender identity has been banned in federal employment, and more schools are allowing students to organize Gay Straight Alliance clubs and are opening high school rites of passage like proms to same-sex couples.

Still, the basic rights and recognition taken for granted by most American families are often fraught with uncertainty and insecurity and remain out of reach for LGBQ/T people across the country. Additionally, these barriers compound to have potentially devastating consequences for LGBQ/T survivors of domestic violence, stalking, and sexual assault. To understand the daily lived realities of LQBQ/T families, it is important to understand the myriad of ways in which discrimination still persists across a range of issues from employment to health care and beyond.

“...it is important to understand the myriad of ways in which discrimination still persists across a range of issues...”
Economic security, the ability to earn a living and provide for dependents, is critical for happy, healthy, and stable families, however, LGBQ/T people experience employment discrimination at high rates. Discrimination against LGBQ/T individuals by employers is largely legal. Only 16 states and the District of Columbia have laws that specifically ban workplace discrimination based on sexual orientation and gender identity. Another five have laws that ban discrimination based on sexual orientation only. While such discrimination is now prohibited against federal employees, to date, the Employment Non-Discrimination Act, a proposed federal law that would prevent discrimination on the basis of sexual orientation and/or gender identity has yet to be passed. This is true despite 75% of Americans supporting full non-discrimination in employment for LGBTQ individuals. Amidst regular headlines of celebrities coming out as LGBQ/T or in support of same-sex marriage, the absence of comprehensive non-discrimination laws for LGBQ/T people is hard to believe. In fact, a recent survey found that 90% of voters incorrectly believed that a federal law protecting LGBQ/T people from employment discrimination was already in existence. This same study reported that 15-43% of lesbian or gay people and 90% of transgender individuals have experienced some form of discrimination, harassment, or mistreatment in the workplace.

Anti-discrimination protections that explicitly protect individuals from discrimination on the basis of gender identity and/or expression exist in 16 states and the District of Columbia. The 2012 National Trans Discrimination Survey found overwhelming incidence of discrimination against trans individuals in a number of arenas with particular compounding impacts for trans people of color.

Focusing on the devastating impact of the intersection of anti-transgender bias and persistent structural racism, the report found that people of color in general face far greater marginalization than white participants, with African American transgender survey participants faring far worse than all others. Transgender individuals are more likely to live in extreme poverty and were four times more likely to have a household income of less than $10,000 a year compared to the general population. Forty-one percent of survey respondents reported attempting suicide compared to 1.6% of the general population, with rates rising for those who lost a job due to bias, were harassed/bullied in school, had low household income, or were the victim of physical or sexual assault. These numbers illustrate the need to listen more deeply to the experiences of inequity in the lives of LGBQ/T individuals and families and to challenge structural inequities with better advocacy for change.

Bias motivated violence and harassment still happens against LGBQ/T communities at alarming rates. In 2012, there were 2,016 reported bias motivated violent incidents against LGBQ/T individuals including 25 homicides of LGBQ/T individuals, the fourth highest number ever reported. Transgender people and people of color were significantly more likely to experience hate violence. Victims of violence or threats of violence need to be able to access help from law enforcement, hospitals, courts, and other institutions without fear of further harm or discrimination. Yet, bias in these institutions is very much a reality for LGBQ/T people, and especially for queer people of color, LGBQ/T people in rural areas, and transgender people. In 2012, of survivors reporting violence to the police, 48% reported incidents of police misconduct, an increase from 2011 (32%). Of those survivors who interacted with the police, 26.8% reported that the police attitudes were hostile, an 18% increase from 2011. While many jurisdictions have worked hard to overcome bias through trainings, community engagement, and outreach, the stories and experiences of discrimination reverberate around the country and directly inform whether LGBQ/T survivors will feel safe to turn to these institutions in their own community.
Queer Youth

Homophobia and transphobia have tremendous impact on the lives of LGBTQ/T youth. Up to 40% of homeless youth are LGBTQ/T identified. Many LGBTQ/T youth face neglect or abuse from their families of origin because of their sexual orientation or gender identity; a recent study found that over 30% of LGBTQ/T youth reported suffering physical violence at the hands of a family member after coming out. In addition, many LGBT youth, 40% according to one study, are forced to leave their families of origin as a result of conflicts with their parents regarding their sexual orientation or gender identity. Of LGBTQ/T homeless youth, 62% have attempted suicide compared to 29% of their homeless heterosexual peers. These numbers offer a glimpse into the marginalization and desperation that characterize the lives of many LGBTQ/T youth.

Often, when attempting to access services for homeless minors, youth are confronted with the same types of discrimination, harassment, or violence because of their sexual or gender identity from which they fled. When LGBTQ/T youth in foster care programs report or experience bias motivated violence, the results and interventions are varied. Oftentimes, the program’s lack of culturally competent services results in the effective denial of safety and stability for the queer youth survivors. Documented examples of bias towards LGBTQ/T youth include overt transphobia by group home staff who fail to intervene when residents harass and abuse a transgender youth because they believe he “asked for it” by being open about his gender identity. Other examples include child welfare personnel placing queer youth in isolation from others in the program “for their protection” or repeatedly moving a queer youth from one placement to another, subjecting her to constant rejection and discrimination and depriving her any sense of permanence, home, or family. Still other examples highlight a lack of comfort on the part of child welfare program staff when assessing and responding to queer youth.

Developmentally, adolescence is a time for exploration, testing boundaries, and questioning authority; tasks that promote the independence and critical thinking needed in adulthood. While these developmental tasks may be encouraged among youth who are perceived as “in synch” with societal expectations, these same behaviors exhibited by LGBTQ/T youth may be met with resistance, censure, criminalization, and pathology. In one example, a youth serving agency sought consultation because staff were concerned about “potential self-mutilating” behavior by a young gay man in their program. The behavior in question turned out to be “wearing heavy eyeliner.” The worker rejected the youth’s explanation of gender-play and felt that the eyeliner represented potentially violent self-hatred.

As a result of pervasive bias and a generalized sense of LGBTQ/T youth as both dangerous and “in danger,” LGBTQ/T youth may face greater surveillance and scrutiny by state institutions such as schools, child protective services, and law enforcement, greater barriers to culturally competent services, and harsher consequences when they make mistakes or break the law. Despite great strides made by child welfare agencies towards identifying and remedying systemic
inadequacies in services for queer youth, these and other examples highlight the need for ongoing work to ensure access to supportive, culturally appropriate services for homeless LGBQ/T youth.

Relationship Recognition Over the Lifetime

LGBQ/T individuals and families confront many challenges related to bias and inequitable civil protections when navigating their daily lives. The lack of civil legal and policy uniformity on LGBQ/T families creates a state of constant flux that serves to destabilize our families on every level.

Recognition of Same-Sex Marriage

Until June 26, 2013, the Defense of Marriage Act (DOMA) restricted federal benefits incident to marriage to marriages between one man and one woman. As a result of the recent Supreme Court decision striking down Section 3 of DOMA, federal benefits granted to married couples including insurance benefits for government employees, Social Security survivors’ benefits, immigration benefits for spouses, and the benefits associated with the filing of joint tax returns should now be available to LGBQ/T couples married in states that recognize same-sex marriage. In addition to 13 states and the District of Columbia, three Native American tribes have legalized same-sex marriage. Six states grant same-sex couples broad protections that fall short of marriage – they are Oregon, Nevada, Hawaii, Illinois, Colorado, and New Jersey. Four states do not recognize same-sex marriage, but recognize out-of-state same-sex marriages in some form such as a civil union or domestic partnership. These states are: Hawaii, Illinois, New Jersey, and New Mexico. Currently, 29 states have constitutional amendments prohibiting marriage equality. Despite the recent victory before the U.S. Supreme Court, these constitutional amendments prohibiting marriage equality remain unchanged.

The ability to travel freely throughout one’s own country is a basic right under the United Nations Charter of Human
Rights, and a freedom that most U.S. citizens take for granted. For survivors who may need to flee an abusive relationship across state borders, the importance of this freedom cannot be overstated. The lack of uniform relationship recognition means that survivors who need to relocate are unlikely to land in a jurisdiction that recognizes their relationship in the same manner as their home state. LGBQ/T survivors may not enjoy the same rights and protections or be able to dissolve their marriage, civil union, or domestic partnership contracts or resolve custody or property issues. This legal limbo gives abusive LGBQ/T people more leverage to control, threaten, extort, and exploit their partners.

Recognition of Parental Rights and Children in LGBQ/T Families

Sleepless nights, first smiles, first steps, and countless photos are the stuff of new parenthood for many U.S. residents. Anxieties about bedtime routines and feeding schedules may rate high, but the legal recognition of one co-parent to make decisions concerning the care of their child is not typically among the many concerns that occupy most new parents’ minds. Not so for LGBQ/T families. Many states do not allow a child to have two legal parents of the same gender. For many LGBQ/T couples who choose to become parents together, only one parent is allowed to be the legal parent of the child. When one member of the couple has a biological connection to a child (such as a biological mother or father), that parent is conferred the legal status of “parent.” For children adopted into an LGBQ/T family, only one parent may be allowed to legally adopt the child even though both parents may have to participate in background checks and other vetting. Other states (and many countries that allow trans-national adoptions in the U.S.) go beyond from not allowing a child to have two legal parents of the same gender to actively prohibiting LGBQ/T people from fostering or adopting children.24

Second-parent or co-parent adoption is a process that allows a child of a same-sex couple to have two legal parents. In jurisdictions where second parent adoption is available, parents may voluntarily become adoptive parents of their own children to ensure their parental rights will be recognized across state lines. Currently, about one half of states and the District of Columbia allow some type of second-parent adoption. Seven states explicitly restrict second parent or co-parent adoption for LGBQ/T families. In the remaining states, the law remains uncertain with outcomes varying by court, judge, or locality.25 The vast majority of LGBQ/T families live in areas where the legal recognition of one co-parent remains uncertain.

In jurisdictions where same-sex marriage is allowed, children born into that marriage are automatically presumed to have two legal parents. However, reliance on the legal status conferred in these states is not sufficient to protect LGBQ/T families. If a married lesbian couple with one child in Washington state...
other institutions must be challenged by advocates who understand the stakes.

Finally, bi-national couples face additional stressors of familial recognition. In addition to the issues outlined above, for these couples, the certainty of being permitted to remain jointly in this country is absent. Immigration policy is oriented, in part, to prioritize family unity. Towards this goal, U.S. Citizens and Lawful Permanent Residents may petition to have their immigrant spouses and certain family members granted lawful status to remain and work in the U.S. This policy helps ensure that children of a bi-national couple will be guaranteed some level of permanence and stability as a result of their parent’s secure immigration status. Until the recent U.S. Supreme Court victory striking down section 3 of DOMA, children being raised by LGBQ/T bi-national parents were prohibited by federal law, specifically DOMA, from accessing family unity benefits under federal immigration law even if their parents were married in a state or country that recognized same-sex marriage. Today, same-sex married couples can now access all immigration benefits on the same terms as opposite-sex married couples.27

Access for LGBQ/T Families in Health Care Settings

The admissions desk at a hospital is an infamously nerve-wracking place. It is hard to focus on paperwork when a loved one is in pain or is afraid. It can be stressful to find the right insurance card or get all the medications and health conditions recorded correctly. Heterosexual couples are not exempt from this stress, but they do not have to produce a copy of their marriage license to gain access to a hospital room, be briefed on treatments, or be informed of how to help in recovery. For LGBQ/T families, the simple desire to be by a loved one’s side in a hospital setting is not guaranteed.

Hospitals, citing internal policies that define immediate family members as related by birth or marriage and HIPPA guidelines that set strict rules for patient confidentiality, have turned away partners from patient rooms, participation in case consults, and medical decisions. In 2006, Kate Fleming drowned in her basement recording studio during a flash flood in Seattle, Washington. Her partner, Charlene Strong, who was also injured in the flood, was initially denied access to Kate because the trauma center did not have

For survivors of partner abuse and their children, the consequences of these policies are many fold. Many survivors who are parents without legal ties to their children cannot leave the abusive relationship without leaving their children behind and risking no chance at custody or visitation rights. In many jurisdictions, even when a survivor has established legal status as a co-parent, a biological co-parent’s right will be privileged by the court over a non-biological co-parent. These survivors may be in need of an “18 year” safety plan. Safety planning that focuses on harm reduction while maintaining the relationship with an abusive partner, rather than safety planning that emphasizes leaving the relationship, is vital for these survivors. Further, expectations that a survivor should “leave instead of going back” by courts, child protection services, or
policies in place to recognize domestic partnerships. It was not until Kate’s parents explained Charlene and Kate’s relationship to the hospital that Charlene gained access to Kate’s bedside. Of course, many LGBTQ/T people cannot rely on their legal “next of kin” to vouch for their LGBTQ/T partners, as Kate’s did. In January 2011, President Obama, citing Kate and Charlene’s story among others, required all hospitals participating in Medicare and Medicaid reimbursements to allow their patients to designate, for themselves, who they wished to have by their side in a hospital setting.

“For LGBQ/T families, the simple desire to be by a loved one’s side in a hospital setting is not guaranteed.”

Even with this mandate, however, many LGBTQ/T families are all too aware of the on the ground realities of confronting hetero-/bi-/trans-phobia in a variety of institutional settings. Those with the resources to do so, can arm themselves with wills, powers of attorney, marriage certificates, domestic partnership recognitions, co-parenting agreements, and more to increase the possibility that their wishes and families will be honored. This phenomenon of over-papering LGBTQ/T families is often costly and not accessible for many. Whether armed with these patchwork protections or not, the uncertainty of whether one’s family unit will be recognized and given protection when they are most vulnerable is an anxiety that no family should be forced to face.

LGBQ/T Survivors of Partner Abuse

In January 2013, the Centers for Disease Control and Prevention published its groundbreaking report on the rates of intimate partner violence (IPV) and domestic violence based on sexual orientation. The study found that lifetime prevalence of IPV (rape, sexual assault, physical assault, and stalking) among lesbian (43.8%) and bisexual women (61.1%) were greater than for other groups including heterosexual women (35%) and men regardless of sexual orientation (gay 26%, bisexual 37%, and heterosexual 29%). Notably, bisexual women experience the highest rates of IPV of any group.28 The persistence of stigma concerning domestic violence or partner abuse can be a barrier for any survivor seeking support. For LGBQ/T survivors, those barriers to support and legal protection are heightened by limitations in the recognition of the very partnership from which a survivor may seek protection.

With the harrowing legal landscape facing LGBQ/T people, a batterer might manipulate systems or threaten their partner to increase control. An abusive partner may “out” the survivor and trigger a range of consequences such as job loss, social stigma, isolation, custody problems with former partners, and scrutiny of immigration authorities or other institutions. Survivors might become easily overwhelmed or discouraged when seeking services or support because the existence of LGBQ/T relationships is questioned in so many contexts and recognizing, naming, and disclosing partner abuse in LGBQ/T relationships can certainly feel daunting.

“With the harrowing legal landscape facing LGBQ/T people, a batterer might manipulate systems or threaten their partner to increase control.”

Partner abuse in LGBQ/T relationships, just as in heterosexual relationships, is characterized by one partner’s exercise of abusive power and control over another through a range of tactics. The size, physical strength, masculinity or femininity, or any other such factor is irrelevant to determining who is an abusive partner in a LGBQ/T relationship. Service providers cannot rely on gender, assumptions based on gender, or a list of “behaviors on the wheel” to determine who is surviving or who is establishing coercive control in an abusive relationship. Assessing for partner abuse in a
relationship requires careful consideration of the context of particular incidents, intent behind the incidents, and the effect on each partner. When skilled assessment does not take place, batterers gain access to confidential survivor services and increase their abusive control, while survivors are denied vital protections and are placed in greater danger.

A National Institute of Justice study that conducted an assessment of the experiences and needs of lesbian, bisexual, and transgender victims of domestic violence found a need for capacity building and greater understanding across all domains of the anti-violence field from first responders, to law enforcement, prosecution and the courts, to victim services and community engagement. Study participants expressed doubts about the capacity of general programs to keep them safe, and as a result, few attempted to access mainstream victim services of any kind. No victims sought shelter services, for example. Many reported that they did not consider seeking support at domestic violence shelters because coming out and possibly facing stigmatizing or homophobic reactions created insurmountable barriers. Overall, study participants reported that they did not access non-LGBQ/T specific programs because the agencies are ill-equipped to handle the complex intersections of homophobia, violence, and isolation common for bisexual, lesbian, trans, and gay victims of violent crime.

Civil protection orders offer many survivors the security of civil legal protection from abuse by their partner. The availability of civil protection orders falls into the same legal uncertainty as many of the issues previously discussed in this article. Currently 20 of the 50 states and the District of Columbia have civil protective order laws that explicitly include same-sex relationships, while four states explicitly deny such protection. The remaining 27 states are silent on the matter, meaning that a LGBQ/T survivor may or may not be issued a civil protections order and receive the legal protection other domestic violence victims receive. Even where protection orders are granted to current or former partners in an abusive LGBQ/T relationship, because of lack of proper assessment to determine which partner is abusive and which partner is the survivor in the relationship, the prevalence of the issuance of mutual protection orders is quite high. Mutual protection orders render a survivor even more vulnerable to an abuser’s retaliatory tactics.

Similarly, LGBQ/T competent assessment of incidents by law enforcement and prosecutors are particularly critical, as dual arrests are often the default in response to same-sex domestic violence calls to 911, with attending collateral consequences to survivors. The 2011 Report on Intimate Partner Violence in Lesbian, Gay, Bisexual, Transgender, Queer, and HIV-Affected Communities in the U.S. found that police arrested survivors or both individuals in 28.4% of incidents involving the police. Dual arrests such as these put survivors in additional danger at the hands of their partners and discourage survivors of utilizing law enforcement in urgent or violent situations. Higher rates of self-medication through drug or alcohol use, higher rates of survival sex work, and less stable housing options increase potential collateral consequences for law enforcement and court involvement making it difficult for LGBQ/T people to take the risk to access protection from police and/or legal services. Access to culturally relevant community-based advocacy services for LGBQ/T survivors, including individual advocacy, legal advocacy, confidential emergency shelter, support groups, and other services, are limited in many areas. That compounded with bias within and lack of access to traditional social safety nets and social services leave more LGBQ/T survivors vulnerable to criminalization/pathologizing.

**Momentum**

An opportunity exists to transform the current piece-meal gains into system-wide improvements that will foster greater stability for LGBQ/T people and ensure greater access to justice and safety for survivors. The past two years has seen the end of Don’t Ask Don’t Tell, the restrictive policy barring LGBQ/T people from serving in the military. Hospitals are now directed to allow partners access to their patients by federal regulation, and the first federal legislation explicitly naming and including LGBQ/T survivors was passed in the Violence Against Women Act Reauthorization of 2013.

In states that have achieved marriage equality, local coalitions are continuing to organize, demanding justice and dignity for queer youth to transgender individuals, survivors of LGBQ/T partner abuse, and elders. The impact of the recent U.S. Supreme Court victory significantly increases equity for LGBQ/T families by removing federal restrictions on the recognition of same-sex marriage. The impact of the decisions in these cases will continue to unfold in the coming months and years, expanding with each new challenge and new victory the reach of the dialogue concerning marriage equality, recognition of LGBQ/T families, and system inequalities and discrimination.

Id.

3 The 13 states that currently allow same-sex marriage are: CA, CT, DE, IA, ME, MD, MA, MN, NH, NY, RI, VT, and WA; the District of Columbia has the freedom to marry for same-sex couples.


6 Id.


8 Id.

9 Id.


12 Supra note 16, at 4.


15 Id. at 89.


"The LGBTQ Access Project aims to strengthen skills among individual service providers; build agency-level capacities; and increase relevant and culturally meaningful services countywide."

Introduction

As a result of trauma, injury, material loss, and basic imposition, many crime victims experience a host of residual consequences. Survivors deal with lasting impacts to their physical and emotional health, social networks, cognitive functioning, employment and employability, economic stability, housing, intimate partnerships, parenting, and community connections. Most survivors require support beyond a single agency to repair the ripples of harm set in motion by a crime. Crime victim advocates reflexively rely on a regional response, a web of interlacing formal services and informal supports, to create the plans and assemble the resources needed to help crime victims reestablish safety, stability and foster well-being.

To respond, the King County Coalition Against Domestic Violence partnered with the Northwest Network to launch the Lesbian, Gay, Transgender, and Queer Demonstrate Access Project (LGBTQ Access Project) in January 2012. The LGBTQ Access Project aims to strengthen skills among individual service providers; build agency-level capacities; and increase relevant and culturally meaningful services countywide. It is part of a national initiative of the U.S. Office for Victims of Crime to form a ground-breaking effort to mobilize an entire region's service system to understand and address the needs of LGBTQ survivors of crime.

Six Pace-Setters, community-based organizations and programs engaged as key demonstration sites, and nearly 20 additional participating organizations are involved in the project as part of the national initiative which is independently evaluated by Dr. Valli Kalei Kanuha. The participating organizations work together and with field experts to adopt promising practices aimed at increasing LGBTQ access across the continuum of support services.

The Pace-Setters Program

In many communities, one organization may take up the charge to increase access. It may open its shelter program to transgender people and men, establish an all-gender support group, or address the unique challenges of bisexual victims. But then it faces the inevitable need to refer a male shelter resident to transitional housing, or find resources for a queer youth, or access one of the countless formal and informal interlacing supports relied upon to make advocacy function, and hits a brick wall.

One LGBTQ welcoming service in a community is better than none, but no single service program can functionally address all of a survivor's potential needs alone. Clearly the context in which LGBTQ people experience crime victimization is complex. Discrimination, bias, and violence create daunting barriers to healing and justice. Individual agencies, no matter how committed, cannot realistically overcome these barriers acting in silos.

Through its Pace-Setter program, the LGBTQ Access Project will test a Regional Response Model over a 3-year period that:

1) ensures LGBTQ people access to meaningful victim services on a regional scale, including mainstream organizations, and

2) is locally sustainable and nationally replicable.

The Pace-Setter Program combines in-depth consultation, collaboration, planning, and evaluation to increase LGBTQ access. Since May 2012, the demonstration sites have worked together in a cross-agency cohort to build leadership, address shared challenges, and influence changes to
policy and practice county-wide. They commit to make significant changes in their own programs and to support regional efforts for improvement.

**Meeting Access Goals**

Through deep collaboration, the LGBTQ Access Project is poised to create

1) **regional capacity:** the knowledge, skills, internal and intra-agency practice and policy, and

2) **regional commitment:** the institutional will to persevere through allocating resources, time, and workers, as well as communicating the commitment to funders, stakeholders, and constituents needed to achieve the goal of access.

In June of 2013, the LGBTQ Access Project hosted the LGBTQ Access Summit that provided sessions on Queer space, community connection, and addressing system barriers among other topics. Planning for the 2014 LGBTQ Access Summit is currently underway. The annual summits and policy and practice workgroups further augment the project goals.

To sign up to receive the LGBTQ Access Project newsletter or periodic email notices about upcoming trainings and other professional development opportunities for providers in King County and beyond visit [http://www.demonstrateaccess.org/contact-us/join-the-mailing-list/](http://www.demonstrateaccess.org/contact-us/join-the-mailing-list/).

At the culmination of the three project years, evaluated practices will be documented in a Replication Toolkit to enable other communities to adapt the successes of the model to their community.

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King County Coalition Against Domestic Violence

KCCADV is a membership organization that provides leadership on behalf of community-based victim service agencies and their allies in county-wide public policy and education efforts. KCCADV leads community-wide efforts to improve service accessibility and responsiveness to domestic violence and sexual assault victims facing a number of significant barriers, including mental health and chemical dependency issues, discrimination, incarceration, and homelessness.
I. Introduction

Thirteen states\(^1\) and the District of Columbia currently allow same sex marriages within their jurisdictions. Until recently, federal law required the federal government to discriminate against same sex marriages even when they were recognized by the home states of the marriage partners. A recent court case, reviewed below, found this discrimination unconstitutional.

**U.S. v. Windsor, 133 S. Ct. 2675, 2013 WL 3196928 12 (June 2013)**

II. Facts and Procedural History


Ms. Spyer passed in 2009. She left her entire estate to Ms. Windsor. Ms. Windsor sought to claim the estate tax exemption for married spouses. Federal law, the Defense of Marriage Act\(^2\) (DOMA), does not permit the exemption for same sex spouses. Ms. Windsor paid the tax and then sought a refund. The Internal Revenue Service denied the refund based upon Section 3 of DOMA.\(^3\) Ms. Windsor then commenced suit in federal district court asking for the refund. She argued that DOMA is unconstitutional because it violates equal protection as applied through the 5th Amendment.

Section 3 of DOMA reads: “In determining the meaning of any Act of Congress, or of any ruling, regulation, or interpretation of the various administrative bureaus and agencies of the United States, the word ‘marriage’ means only a legal union between one man and one woman as husband and wife, and the word ‘spouse’ refers only to a person of the opposite sex who is a husband or a wife.” This law applied to over 1,000 federal statutes.

While the suit was pending, The Attorney General of the United States wrote to Congress notifying them of the Administration’s decision to no longer defend the constitutionality of DOMA. However, the Administration also decided that they would still apply Section 3 until the courts made a final decision on the constitutionality question.

The House of Representatives, through their Bipartisan Legal Advisory Group (BLAG), requested that the District Court allow them to become a party to the case so they could defend the constitutionality of Section 3. The Administration did not oppose BLAG’s request, and the District Court granted their admission to the lawsuit as an interested party.

The District Court ruled in favor of Ms. Windsor, held Section 3 unconstitutional, and ordered the U.S. to pay the refund. Both the Administration and BLAG filed notices of appeal in the 2nd Circuit Court of Appeals, which upheld the District Court’s decision.

The United States Supreme Court (Supreme Court) accepted the case onto its docket to determine the constitutionality of Section 3 of DOMA. Besides the constitutional question, the Supreme Court also asked the parties to explain whether BLAG was an appropriate party and whether the Administration’s agreement with the position that Ms. Windsor took means that the Supreme Court should not hear the case.
III. The Supreme Court’s Analysis and Reasoning

The Supreme Court first answered the questions whether it should hear the case and if so, was BLAG an appropriate party. The U.S. Constitution requires that before federal courts can hear a case, the parties must have “standing.” This means that there must be an actual case and controversy. The Supreme Court has interpreted an actual case or controversy to mean that the plaintiff has suffered an injury that is concrete, particularized, and actual or imminent. There must also be a causal connection between the injury and the relief requested. Finally, the relief must be likely to redress the injury. The Supreme Court ruled that the United States had standing and that the case could proceed with BLAG as a party.

The Supreme Court then turned to an analysis of DOMA and its constitutionality. The majority starts with the proposition that historically states have decided questions of whom can or cannot marry, not the federal government. DOMA upsets this historical tradition.

“[T]he State’s decision to give this class of persons the right to marry conferred upon them a dignity and status of immense import. When the State used its historic and essential authority to define the marital relation in this way, its role and its power in making the decision enhanced the recognition, dignity, and protection of the class in their own community.”

The Supreme Court said DOMA restricted and put limitations on state sanctioned marriages and injured the same sex marriage partners. Thus, the Supreme Court ruled that DOMA violates equal protection and due process.

The Supreme Court noted that DOMA creates a stigma. The purpose of DOMA was to lessen the quality of same sex marriage as against heterosexual marriages. The legislative history of DOMA shows it was intended to defend heterosexual marriages. The House said DOMA expresses the House’s moral opposition to same sex marriage. The title of the act itself, Defense of Marriage Act, conveys this meaning. DOMA wrote inequality into the whole of federal law.

In ruling that Section 3 of DOMA is unconstitutional, the Supreme Court also recognized that DOMA humiliates thousands of children of same sex marriages. “The law in question makes it even more difficult for the children to understand the integrity and closeness of their own family and its concord with other families in their community and in their daily lives.”

“Until recently, federal law required the federal government to discriminate against same sex marriages even when they were recognized by the home states of the marriage partners.”

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1 California, Connecticut, Delaware, Iowa, Maine, Maryland, Massachusetts, Minnesota, New Hampshire, New York, Rhode Island, Vermont, and Washington.
4 This is the same legal rationale the Supreme Court used to decline hearing the merits in the Californian Proposition 8 case. Hollingsworth v. Perry, 133 S. Ct. 2652, 81 USLW 4618 (June 2013) (decided the same day as U.S. v. Windsor).
5 U.S. Const. art. III, § 2, cl. 1.
6 U.S. v. Windsor, 133 S. Ct. 2675, 2692 (June 2013).
7 Id. at 2694.
IV. Conclusion

Acceptance of same sex marriage has taken one large step forward. Not only because of the Supreme Court’s ruling, but also because of the American Academy of Pediatrics (AAP) recently published Technical Report titled “Promoting the Well-Being of Children Whose Parents Are Gay or Lesbian.” The report states it is important to “recognize that laws restricting competent adults of the same gender from codifying their commitment to each other and their children via civil marriage may result not only in pain and hardship for their children but also in legal, economic, psychological, social, and health disparities that can no longer be justified.” The report points out that non-recognition of same sex marriages may mean the inability to accompany a minor to get health care, make medical records inaccessible, and block a parent from making health care decisions for a child of the marriage.

“A large body of scientific literature demonstrates that children and adolescents who grow up with gay and/or lesbian parents fare as well in emotional, cognitive, social, and sexual functioning as do children whose parents are heterosexual.” The AAP concludes “it is in the best interests of children that they be able to partake in the security of permanent nurturing and care that comes with the civil marriage of their parents, without regard to their parents’ gender or sexual orientation” and that “[w]hen marriage of their parents is not a viable option, child[ren] should not be deprived of the opportunity for temporary foster care or adoption by single parents or couples, irrespective of their sexual orientation.”

Between the Supreme Court’s ruling and the AAP’s report, institutions that routinely oppose same sex couples’ custody and family structures with variations on a “crimes against nature” theme should rethink their positions. The science shows there are no negative health or social outcomes related to having same-sex parents, and the Supreme Court ruling signifies an end to discrimination against same sex married couples under federal law. 

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8 This Technical Report is available at http://pediatrics.aappublications.org/content/131/4/e1374.full.html. The AAP and other leading national medical and psychological organizations also filed an amicus brief in U.S. v. Windsor taking the position that Section 3 of DOMA is unconstitutional.
9 Id. at e1374.
10 Id. at e1377.
The data is mounting and it looks good for children raised by LGBT people and same-sex couples. In past generations, little data existed and doctors, courts, schools, child protective workers and others were free to assert children raised by LGBT people would suffer, and to promote policies that upheld those beliefs. Institutions often oppose LGBT people’s custody and family structures with variations on a “crimes against nature” theme. But contrary to that biased and stigmatizing “prevailing wisdom,” the science illustrates that there is simply no base of evidence of negative health or social outcomes related to having same-sex parents.

While bias against LGBT people presents a hurdle for kids in these families, by and large children of LGBT people successfully cope with these challenges. As a result, support for removing barriers and stigma, and recognizing LGBT families has grown. In one significant example, leading national medical and psychological organizations filed an amicus brief against the Defense of Marriage Act in recent Supreme Court hearings. Their argument is that children are not harmed by having same-sex parents, but rather by federal laws that prohibit the legal recognition of their parents’ relationship. The brief was jointly filed by the American Psychological Association, the American Medical Association, the American Psychiatric Association, the California Psychological Association, the National Association of Social Workers, the American Academy of Pediatrics, and the American Psychoanalytic Association.

The Williams Institute, a national think tank, at the UCLA Law School is dedicated to conducting rigorous, independent research on sexual orientation and gender identity law and public policy. They have compiled a significant body of research documenting the experiences of children raised by LGBT people or in same-sex families, including:

- There are an estimated 6 million Americans (children and adults) with an LGBT parent in the United States.
- Among couples with children, same-sex couples are four times more likely than different-sex couples to be raising an adopted child and six times more likely to be raising foster children.
- Adopted children raised by same-sex and different-sex couples develop in typical ways, as measured by both parents and teachers.
- Teens with lesbian mothers are psychologically well-adjusted, academically successful, and report strong family bonds and quality social relationships with their peers.
- Many adolescents with lesbian mothers report having male role models in their lives, but even those without male role models evidence good psychological functioning and show no differences in traditionally masculine or feminine traits.
- Despite experiencing stigmatization because of the sexual orientation of their parents, children with lesbian mothers do not experience significantly more teasing than their heterosexual peers and are able to successfully cope with these challenges.
- Adolescents raised by lesbian mothers report their quality of life as equal to that of peers raised by heterosexual couples.
- Children’s psychological adjustment is related to the amount of stress their parents experience and the quality of the couple’s relationship, regardless of the sexual orientation of their parents.
- Married couples in Massachusetts report positive effects of marriage on their children – children were happier, felt more secure and protected, and saw their families validated by society as a result of their parents being able to marry.

For more information from the Williams Institute including high-quality research with real-world relevance disseminated to judges, legislators, policymakers, the media, and the public please visit http://williamsinstitute.law.ucla.edu.
Sexual Violence and Individuals Who Identify as LGBTQ Information Packet

This information packet, published by the National Sexual Violence Resource Center, contains resources that are focused on serving, engaging, and collaborating with individuals and communities who identify as LGBTQ. The audience for this packet includes counselors, advocates, technical assistance providers, and allied professionals committed to affirming all individuals and communities. To download this packet, visit http://www.nsvrc.org/publications/nsvrc-publications-information-packets/sexual-violence-individuals-who-identify-lgbtq.

Special Collection: LGBTQ Communities and Domestic Violence

This special collection, Preventing and Responding to Domestic Violence in Lesbian, Gay, Bisexual, Transgender, or Queer (LGBTQ) Communities, by the Minnesota Center Against Violence and Abuse in partnership with the National Resource Center on Domestic Violence, features resources and research that illustrates the LGBTQ communities’ experiences with domestic violence within the United States. This collection is for LGBTQ individuals experiencing domestic violence and allies and professionals working to address the issue of domestic violence in LGBTQ communities. To view this collection, visit http://www.vawnet.org/special-collections/DVLGBTQ.php.

The National Intimate Partner and Sexual Violence Survey (NISVS) 2010 Findings on Victimization by Sexual Orientation

This study is the first to provide national data that examines intimate partner violence, sexual violence, and stalking by sexual orientation. The key findings of the Centers for Disease Control and Prevention study include:

- Lesbian women and gay men reported levels of intimate partner violence and sexual violence equal to or higher than those of heterosexuals.

Danger Assessment – Abusive Female Same-Sex Relationships

This tool is a predictor of risk of re-assault in abusive female same-sex relationships, not of lethality. This tool has been evaluated and includes eight items from Jacquelyn Campbell’s original danger assessment and 10 new items. To learn more about and to download this tool, visit http://www.dangerassessments.com/DATools.aspx

My Girlfriend Did It

This documentary, produced by Casa de Esperanza, explores intimate partner violence in lesbian relationships. It highlights the struggles and resilience of women who share the impact of violence in their lives. The documentary was released in 2008 and is accompanied with a bilingual facilitator’s guide providing definitions, discussion questions, group activities, role plays, and case scenarios. To learn more about this documentary, visit http://www.casadeesperanza.org/downloads-links/downloadsdescargas.

Promoting the Well-Being of Children Whose Parents Are Gay or Lesbian

This technical report, in Pediatrics the official journal of the American Academy of Pediatrics, concludes that “it is in the best interests of children that they be able to partake in the security of permanent nurturing and care that comes with the civil marriage of their parents, without regard to their parents’ gender or sexual orientation.” The report goes on to state that “[w]hen marriage of their parents is not a viable option, child should not be deprived of the opportunity for temporary foster care or adoption by single parents or couples, irrespective of their sexual orientation.” To read the full report, visit http://pediatrics.aappublications.org/content/131/4/e1374.full.html.

Resources
Bisexual women had a significantly higher lifetime prevalence of rape, physical violence, and/or stalking by an intimate partner when compared with both lesbian and heterosexual women. More than three-quarters of gay men and about two-thirds of bisexual men who experienced sexual violence, other than rape, identified male perpetrators.

For the full report, fact sheets, and frequently asked questions, visit http://www.cdc.gov/violenceprevention/nisvs/specialreports.html.

Tool for Attorneys Working with LGBT Survivors of Domestic Violence

This tool, developed by the ABA Commission on Domestic Violence in collaboration with The National LGBT Bar Association, provides an overview of the dynamics of domestic violence in LGBT relationships, explains the civil legal protections for LGBT survivors, and gives tips and strategies for making services welcoming to LGBT survivors and interviewing LGBT clients. This tool is available at http://www.americanbar.org/groups/domestic_violence/publications.html.

Transgender Basics

Transgender Basics is a 20-minute educational video for service providers and others working with the LGBTQ community on the concepts of gender and transgender people. Service providers discuss basic concepts, including sex, identity, and gender roles, and three transgender community members share their personal experiences of being trans and genderqueer. To view this video, visit http://www.gaycenter.org/gip/transbasics/video.

What Rights Do I Have as an LGBT Victim of Domestic Violence?

This brochure, developed by the ABA Commission on Domestic Violence in collaboration with The National LGBT Bar Association, is for LGBT victims of domestic violence. The brochure addresses how LGBT people can identify if they are in an abusive relationship; the difference between domestic violence in LGBT relationships and in heterosexual relationships; and the legal options available, including civil protection orders and criminal orders of protection. This brochure is available at http://www.americanbar.org/groups/domestic_violence/publications.html.

New Family Violence and Domestic Relations (FVDR) Program Employees

Christina Kim, JD, joins the FVDR Program as a Staff Attorney. Christina is a graduate of the University of California Los Angeles School of Law where she focused her studies in the area of public policy law and critical race studies. Before joining NCJFCJ, Christina worked with Nevada Legal Services, a non-profit organization providing free legal services to low income Nevadans, representing clients in matters related to housing, public benefits, immigration, family, and estate planning.

Melissa Mangiaracina, JD, joins the FVDR Program as a Senior Policy Analyst. With a law degree from the University of Denver College of Law, Melissa spent the last seven years working as a Child Advocate Attorney for Washoe Legal Services. Prior to that, she focused her efforts on grassroots development by serving two years with the Peace Corps in the Dominican Republic and organizing a variety of cross-cultural programs for at-risk youth.

Karen Zavora, JD, joins the FVDR Program as a Senior Policy Analyst. Prior to joining the NCJFCJ, Karen was a child advocacy attorney for children in foster care in the Reno area. She has also worked as a legal services attorney serving low-income clients in Northern Nevada. Karen received her JD in 2005 from Seattle University School of Law and her BA in Sociology in 2002 from Whitman College.