RECOGNISE & RESPOND:

Strengthening advocacy for LGBT+ survivors of domestic abuse

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ACKNOWLEDGEMENTS FROM THE AUTHORS

A report like this does not get written without the support and cooperation of many different people. This report is no exception.

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IN MEMORIAM

This report is dedicated to Joanne Simpson, former director of Independent Choices Manchester. Joanne has made valuable contributions to Recognise & Respond project and was instrumental in helping to grow the Lesbian, Gay, Bisexual, transsexual, questioning (LGBTQ) Independent Domestic Violence Adviser Service (IDVA) at Independent Choices Greater Manchester.

RECOGNISE & RESPOND

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ABOUT GALOP

Galop is the UK’s LGBT+ anti-violence charity. For over 35 years we have been providing advice, support and advocacy to LGBT+ survivors and campaigning to end anti-LGBT+ abuse and discrimination. Galop works around 3 key areas: hate crime, domestic abuse and sexual violence. Our mission is to make life safe, just and fair for LGBT+ people. We work to help LGBT+ people achieve positive changes to their current situation, through practical and emotional support, to develop resilience and to build lives free from violence and abuse.

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LGBT+ people have a lived experience of prejudice and discrimination, where in law, policy and practice, it is our recent history not only to have our needs not included, but our lives actively discriminated against for who we are and who we love. Galop's history is rooted in our communities' activism to combat this and for over 35 years, Galop has worked to make life ‘Just, Safe and Fair’ for lesbian, gay, bisexual and trans (LGBT+) victims and survivors.

Our direct work with LGBT+ victims and survivors will always be at the core of what we do at Galop, but in the last 5 years we set the strategic aim to develop our ‘evidence and insights’ offering. As the UK’s specialist LGBT+ anti-violence service we recognise the important role we can play using our practise-based evidence to ensure that the needs and experiences of LGBT+ communities are heard at a strategic level and that we are protected by law, visible in policy and our experiences recognised in initiatives striving for best practice.

This report is a vital step in Galop's work to deliver against this ambition. The report has the simple but vital aim; to improve the understanding of LGBT+ people's experience of domestic abuse and ensure that services meet the needs of survivors who identify as LGBT+.

The report findings highlight that more than one in four gay men and lesbian women and more than one in three bisexual people have reported at least one form of domestic abuse since the age of 16. In addition, prevalence rates of domestic abuse may be higher for transgender people than any other section of the population. Despite these stark levels of domestic violence and abuse the report evidences that LGBT+ survivors are disproportionally under-represented in voluntary and statutory services, including criminal justice services. The report also gives insight into the distinct systemic and personal barriers LGBT+ communities face in accessing services, due to their sexual orientation and gender identity.

While the current demand for LGBT+ specialist interventions is increasing, findings also highlight that there are currently only six LGBT+ specialist domestic abuse projects based in England and none in Wales. Despite a lack of funding, these projects often work beyond their capacity and geographical area to provide much needed support to LGBT+ victims and survivors.

The recommendations in this report highlight strategic and practical initiatives relevant to statutory and voluntary sector service providers, policy makers, funders and commissioners, that if acted on show a clear pathway to break down these systemic and personal barriers.
and strengthen future responses for LGBT+ victims and survivors of domestic abuse.

I would like to take this opportunity to thank Dr Jasna Magić and Peter Kelley for producing this report and the whole of the Galop team for their continued hard work to make life safe, just and fair for LGBT+ people.

Bob Green OBE Chief Executive, Stonewall Housing

Stonewall Housing and Galop have worked very closely together since the 1980s to deliver advice, advocacy and support to lesbian, gay, bisexual and trans (LGBT+) people who are victims of hate crime and domestic abuse.

As we enter a new decade, this thought-provoking Recognise & Respond report is a challenge to us all. Despite recent legal advances in the Equality Act (2010) and equal marriage, this report shows that LGBT+ people who experience domestic abuse are not being served by current services and instead of living in safety, they face uncertainty and the risk of more abuse and violence.

It is alarming that LGBT+ people, who are more at risk of domestic abuse, do not report these incidents and that they do not access services because they do not consider the services are ‘for them’.

It is disappointing that as we end the 2010s that sexual orientation or gender identity have not been systematically recorded in the census or by many public sector agencies.

I hope that local, regional and national government, commissioners and service providers work together to implement the report’s recommendations. We should work together to recognise the different experiences of those who identify as LGBT+ and experience domestic abuse. More research is needed on groups that face further marginalisation.

Commissioners, policy makers and providers should respond to the new experiences shared within this report to develop a more coordinated and personalised approach to supporting LGBT+ victims of domestic abuse.

I hope that this report will be put into practice, so that in the 2020s more LGBT+ people who experience domestic abuse will feel confident to report incidents and then find safe housing and services that are developed for them and with them.
DOMESTIC ABUSE

The Government definition of domestic violence and abuse\(^1\) is:

“Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.”

The Government definition, which is not a legal definition, includes so-called ‘honour’-based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

In this report we use the term ‘survivor’ rather than ‘victim’, whenever possible, to describe those who have lived through domestic abuse, as they move from victim to survivor.

The term ‘domestic abuse service’ refers to a range of non-LGBT+ specific services across England and Wales, which provide a wide range of information, support and advocacy to survivors of domestic abuse, including helplines, outreach, specialist children and young people services, drop-in support, floating support, refuge accommodation and other services. This term encompasses services that might be perceived mainstream or generic domestic abuse services, as well as specialist women and men’s services.
Sexual orientation and gender identity

**Bi or Bisexual** is an umbrella term used to describe an emotional, romantic and/or sexual orientation towards more than one gender.

**Cisgender or cis** is someone whose gender identity is the same as the sex they were assigned at birth. Non-trans is also used by some people.

**Gay** refers to a man who has an emotional, romantic and/or sexual orientation towards men. Also a generic term for lesbian and gay sexuality – some women define themselves as gay rather than lesbian.

**Gender identity** is a person’s innate sense of their own gender, whether male, female or something else, which may or may not correspond to the sex assigned at birth.

**Lesbian** refers to a woman who has an emotional, romantic and/or sexual orientation towards women.

**LGBT+** is the acronym for lesbian, gay, bi and trans people.

**Non-binary** is an umbrella term for people whose gender identity doesn’t sit comfortably with ‘man’ or ‘woman’. Non-binary identities are varied and can include people who identify with some aspects of binary identities, while others reject them entirely.

**Sexual orientation** is a person’s emotional, romantic and/or sexual attraction to another person.

**Trans** is an umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Trans people may describe themselves using one or more of a wide variety of terms, including (but not limited to) transgender, transsexual, gender-queer (GQ), gender-fluid, non-binary, gender-variant, crossdresser, genderless, agender, nongender, third gender, two-spirit, bi-gender, trans man, trans woman, trans masculine and trans feminine.
This report aims to improve the understanding of LGBT+ people’s experience of domestic abuse and ensure that services meet the needs of survivors who identify as LGBT+.

The authors draw on a number of UK-based studies, original LGBT+ service user datasets and a series of interviews with LGBT+ domestic abuse advocates to:

- Further insights into the scope, distinct nature of abuse and barriers experienced by LGBT+ survivors in access to services.
- Increase understanding of LGBT+ survivors accessing LGBT+ specialist services.
- Highlight the value and role of LGBT+ specialist programs in addressing domestic abuse.

The report also outlines recommendations relevant to statutory and voluntary sector service providers, local, regional and national policy makers, funders and commissioners. The recommendations noted below highlight six key strategic and practical initiatives to strengthen future responses for LGBT+ victims and survivors of domestic abuse.

**EXECUTIVE SUMMARY**

**KEY RECOMMENDATIONS**

FOR STATUTORY AND VOLUNTARY SECTOR SERVICE PROVIDERS, POLICY MAKERS, FUNDERS AND COMMISSIONERS:

1. Ensure that LGBT+ people’s needs are clearly visible in the national, regional and local policy frameworks.
2. Improve national monitoring mechanisms.
3. Improve access to LGBT+ specialist domestic abuse services.
4. Actively increase local program capacity to meet the needs of LGBT+ survivors in culturally relevant ways.
5. Establish a national point of contact to raise awareness and provide capacity building to statutory and voluntary services in improving their responses to LGBT+ survivors.
6. Build research regarding advocacy and LGBT+ specialist initiatives.
PREVALENCE, NATURE OF ABUSE AND BARRIERS IN ACCESS TO SERVICES

It is estimated that more than one in four gay men and lesbian women and more than one in three bisexual people report at least one form of domestic abuse since the age of 16. While lesbian women report similar rates of domestic abuse to that of heterosexual women, gay and bisexual men might be twice as likely to experience domestic abuse compared to heterosexual men. Similarly, bisexual women are twice as likely to disclose intimate partner violence compared to heterosexual women. Evidence also suggest prevalence rates of domestic abuse may be higher for transgender people than any other section of the population.

LGBT+ victims/survivors share similar types of domestic abuse as their heterosexual cisgender peers and disclose abuse from both intimate partners and family members. Experiences of abuse may include physical, sexual, emotional and financial abuse, forced marriage, so-called ‘honour’-based violence and other forms of violence and abuse that sit within the framework of gender-based violence.

In addition to abuse rooted in patriarchy and harmful and negative gender stereotypes, lesbian, gay, bisexual and transgender survivors may also experience abuse of power and control closely linked to their sexual orientation and gender identity. These additional factors often underpin the complexity of issues LGBT+ survivors face and include a range of distinct abusive behaviours, where sexuality and gender identity can be used as specific tools to abuse. When considering the nature of abuse, it is also important that LGBT+ survivors are not seen as a single homogenous group.
LGBT+ domestic abuse appears vastly underreported and LGBT+ survivors are disproportionally underrepresented in voluntary and statutory services, including criminal justice services. Underreporting is often a result of a range of distinct personal and structural barriers. Personal barriers most typically relate to a survivor’s perception of the abuse and of the support system, while systemic barriers relate to structural and cultural levels of service provision that might give the impression that services are not culturally sensitive to LGBT+ people’s specific needs.

2 LGBT+ SURVIVORS ACCESSING LGBT+ DOMESTIC ABUSE SPECIALIST SERVICES

Those most likely to access help and support are LGBT+ survivors between ages 25-49. Services reported between 55% and 69% of all clients belonged to this age group. Key findings also suggest, LGBT+ survivors under 24 and those over 50 are disproportionately underrepresented in LGBT+ specialist service provision. More nuanced approaches may be needed to increase access to services of younger and older LGBT+ survivors.

On average, services reported between 50% and 65% of clients identified as male. This suggests gay, bisexual and trans men are more likely than other gender groups to access LGBT+ specialist services. The authors suggest that GBT+ male survivors may perceive domestic abuse services as primarily designed to support women which can lead this group to question whether the service is for them and may thus prefer to access LGBT+ specialist services.

The rates at which trans people access LGBT+ specialist or trans advocacy services vary from 3% to 8% for services based outside of London and from 10% to 14% for those based in London. In contrast, domestic abuse services record less than 1% of all clients identifying as trans. This difference suggests that like gay and bi men, trans survivors are considerably more likely to access LGBT+ specialist services over other domestic abuse support because
they may be (or fear) being denied support due to gaps in policy, anti-trans prejudice, or they could be turned away because of their gender history.

The rate of self-reported disability varied from 30% to 55%. This suggests that at a minimum, one in three LGBT+ survivors will present with at least one form of disability or health problem. Evidence also suggests immigration issues are more common among LGBT+ survivors, compared to non-LGBT+ survivors. Insecure immigration status can be a significant challenge for LGBT+ survivors, who might be faced with deportation to countries that are extremely hostile towards LGBT+ communities.

Between 25% and 49% of LGBT+ clients identified as black and minority ethnicity (BME). Despite a relatively solid representation of BME survivors across services, it is important to
note the intersection of race, ethnicity and LGBT+ identity which may result in a number of distinct barriers in access to services. LGBT+ BME people’s experiences of reaching out to services may be compounded by the intersection of racism, homophobia and transphobia. Evidence also suggest that BME people are at a disproportionate risk of abuse from family members in comparison to clients with white background. This includes specific forms of domestic abuse such as forced marriage and ‘honour’-based violence.

3 LGBT+ SPECIALIST FRONTLINE SERVICES

LGBT+ specialist domestic abuse services are largely unavailable within many local authority areas in England and Wales.

By end of June 2019 there were six voluntary sector providers delivering LGBT+ specialist support based in Birmingham, Brighton & Hove, London and Manchester.

LGBT+ specialist services often work outside of their geographical remit and beyond their capacity. In addition to providing a broad range of services to survivors, these services also often work on many intersecting social issues, support statutory and voluntary sector bodies, and crucially, inform policy agendas.

LGBT+ specialist services exist in a variety of organisational settings. They are delivered by LGBT+ organisations, domestic abuse services, or have been set up within a specific partnership, consortium or network. Where they are successfully integrated into a domestic abuse service, LGBT+ specialist programs can have positive impact on a service, as well as survivors.

The range of support across services most typically includes, an Independent Domestic Violence Advisor (IDVA) advocacy service that can offer practical help and advice, safety planning, assistance when dealing with the criminal/civil justice system and emotional support, including counselling or therapeutic support. Services also offer practical housing advice, while The National Domestic Abuse Helpline hosted by Galop is the only UK-wide LGBT+ specialist helpline.

Out of 900 full time IDVAs working in England & Wales only four are hosted within specialist LGBT+ services.
There are currently around 900 full time IDVAs working in England and Wales. Out of these only four are hosted within specialist LGBT+ services. LGBT+ survivors also often face great challenges in accessing specialist refuge places. There are limited emergency facilities for LGBT+ people and housing providers do not always recognise that they have a duty towards LGBT+ survivors. Gay, bisexual and trans men are particularly affected by this, as options for this group specifically are almost non-existent.

Funding and commissioning are major challenges for LGBT+ specialist services. LGBT+ specialists are typically left out of commissioning and funding frameworks. Even though the experiences of services are not homogenous in this area, many function without consistent, sustainable funds.

LGBT+ specialist services have learned to sustain themselves largely by the support of trusts and foundations, and spend a considerable amount of time and resources looking for opportunities to secure continuity and sustainability of their programming. The current commissioning frameworks have created great insecurity, especially for LGBT+ specialist refuge providers and those with a focus on accommodation-based provision.

Wherever practically feasible, LGBT+ specialist services are encouraged to work in partnerships so as to reduce duplication and ensure resource efficiency.

LGBT+ DOMESTIC ABUSE SERVICES:

Nationally: National LGBT+ Domestic Abuse Helpline (Galop)

Greater London:
LGBT Domestic Abuse Partnership (Galop, Stonewall Housing)
Angelou Tri-borough VAWG Partnership (Galop)
London Integrated Victim and Witness Service (Galop)

South East (Brighton & Hove): LGBT+ Refuge and Housing Support Service (RISE)

Independent Domestic Violence Advocacy and Support (RISE)

West Midlands (Birmingham):
Independent Domestic Violence Advocacy and Support (Birmingham LGBT)

North West (Manchester):
Domestic Abuse Support (LGBT Foundation)
Independent Domestic Violence Advocacy and Support (Independent Choices Greater Manchester)
Significant progress has been made, driven largely by the women’s movement, in transforming domestic abuse from being seen as a private issue, to being recognised as a crime and a serious public problem that should be ‘everyone’s business’. However, when we think about domestic abuse, traditionally there’s an assumption that it only happens to cisgender women within heterosexual relationships. While there is no doubt that domestic abuse disproportionally affects women and children, it is nevertheless important to raise awareness and increase understanding that this is by no means the only circumstance in which it exists.

Research shows that domestic abuse significantly impacts the LGBT+ communities and that LGBT+ people face distinct systemic and personal barriers in accessing services. While some services are increasingly exploring options to make their programs more inclusive and welcoming to LGBT+ communities, practice-based evidence highlights many still struggle to understand the multitude of individual circumstances that inform LGBT+ survivor’s experiences of and responses to violence and abuse.

This report aims to go some way to address this gap, by bringing together some of the key learnings of research undertaken within the framework of the Recognise & Respond project. Since July 2017, Recognise & Respond worked closely with a number of stakeholders, policy influencers, LGBT+ and domestic abuse services, to identify and address gaps in policy and practice and remove barriers in access to services as experienced by LGBT+ survivors. Our ambition is that the key findings and recommendations from this report will support the stakeholders by increasing their understanding and encouraging them to develop consistent and tailored support services that make LGBT+ survivors feel safe and meets their needs.

This report is published at a time when the government has brought forward draft legislation challenging the acceptability of domestic abuse and addressing some of the underlying attitudes and norms that perpetuate it. We know LGBT+ survivors share similar forms of domestic abuse as their heterosexual cisgender peers and disclose abuse from both intimate partners and family members. LGBT+ people also disclose experiences of sexual violence and/or harassment and stalking, risk of/forced marriage or so-called ‘honour’-based violence. These practices are forms of gender-based violence, rooted in patriarchy, gender inequality and deep-rooted social norms, attitudes and behaviours that discriminate and oppress women and
girls across all communities and also impact on men and boys. In this context, LGBT+ inclusive responses should not be regarded as incompatible with programs tackling gender-based violence and violence against women and girls, or indeed those working with men and boys. On the contrary, developing a greater understanding of the experiences and needs of LGBT+ survivors can invigorate and meaningfully inform the endeavours striving to end all identity-based violence.

1.1 DATA COLLECTION

The collection of data presented in this report was made possible by the close collaboration between Galop staff, the Recognise & Respond steering group and members of the national LGBT+ Domestic Abuse Network. This includes practitioners and experts working in the domestic abuse sector, ending violence against women and girls (VAWG) sector and LGBT+ sector, representing multiple disciplines, including research, advocacy and public policy.

A programme of activities took place between July 2017 and June 2019, to inform this report. Data has been collated from the following sources:

- **A literature review** that sought to map knowledge around the prevalence and nature of domestic abuse and barriers in access to services as experienced by LGBT+ survivors. The literature review included peer-reviewed articles and community studies and reports, based in the UK, available online and published after 2006.

- **LGBT+ service user datasets** shared by four LGBT+ specialist domestic abuse services and three non-LGBT+ services running LGBT+ domestic abuse specialist projects based in England and Wales.

- A series of interviews, and meetings with LGBT+ domestic abuse advocates and experts representing domestic abuse and LGBT+ services based in Birmingham, Brighton & Hove, Cardiff, London and Manchester.

- A Joint Submission to Government Consultation on the proposed Domestic Abuse Bill (unpublished).

Additionally, this report also draws on information shared at:

- The LGBT+ thematic event, supporting the consultation on Domestic Abuse Bill which took place in April 2018 and was hosted by the Home Office’s Public Protection Unit.

- National LGBT+ Domestic Abuse Network meeting taking place in London during October 2018.

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3. The steering group provided insights on issues concerning the development and the delivery of the Recognise & Respond project. The group consisted of five members: Dr Jasna Magić, Peter Kelly and Lisa Doyle (Galop), Camille Kumar (Women and Girls Network) and Bob Green (Stonewall Housing). The group met six times between July 2017 and June 2019.

4. This is a provisional name that refers to ongoing collaboration of the following organisations: Galop (London), Stonewall Housing (London), RISE (Brighton & Hove), Birmingham LGBT (Birmingham), LGBT Foundation (Manchester), Independent Choices Greater Manchester (Manchester), Victim Support (Wales) and Prof Catherine Donovan (University of Durham) and James Rowlands (Independent Consultant).

5. The submission was coordinated by Galop and submitted to the Home Office on 31 May 2018. It outlined key LGBT+ priorities for the Domestic Abuse Bill as shared by 8 community services and 2 individual experts: Galop, Stonewall Housing, RISE, Birmingham LGBT, LGBT Foundation, Independent Choices Greater Manchester, Rainbow Bridge (Cardiff), Safer Wales Dyn Project (Cardiff), Prof Catherine Donovan and James Rowlands.

6. The meeting was attended by: Birmingham LGBT, RISE, Galop, Stonewall Housing, LGBT Foundation, Safer Wales, Rainbow Bridge, Prof Catherine Donovan and James Rowlands.
National LGBT+ Domestic Abuse Conference, hosted by Galop, which took place in London during May 2019.

Limitations

There are a number of limitations related to the data and key findings presented in this report that must be considered.

Firstly, there are limited data available on the experiences of LGBT+ people with domestic abuse. The community studies we draw on differ in geographical scope, sampling and methods of data collection and the associated key findings are often limited by underreporting and inconsistent monitoring of sexual orientation and gender identity by the services. This means that the conclusions on the nature of abuse and barriers in access to services, outlined in the report, should be interpreted with caution and should not be generalised to represent experiences, needs and priorities of all LGBT+ survivors.

In addition, Chapter 3 draws on service user datasets produced separately by seven different community services based in England and Wales. The demographics was collected over different timescales, services often use different wording on monitoring forms and may use varied methods to identify and categorise cases. Although data is not directly comparable, it provides valuable insight into some of the shared characteristics of LGBT+ service users reporting domestic abuse.

Finally, we recognise that in addition to services highlighted in Section 4, there are numerous other services and programs across England and Wales that work with and support LGBT+ survivors. By prioritising those that provide a specific and substantive service to LGBT+ survivors we aimed to draw an indicative map of current service provision and inspire development of LGBT+ specialist models that appropriately meet the needs of LGBT+ survivors.

1.2 STRUCTURE AND AIM OF THE REPORT

The report has two fundamental aims:

- To provide information for statutory and voluntary services to improve their understanding of LGBT+ people’s experience of domestic abuse, tailor their provision and ensure their programs remain inclusive for all those who identify as LGBT+.

- To ensure that commissioners and policy makers with strategic responsibility for funding and commissioning specialist domestic abuse services and programs have the evidence and insights needed to inform commissioning strategies.
The report consists of four key sections.

**Section 1** Sets the context, introduces data collection methods, limitations and report aims/outline.

**Section 2** Provides data on the prevalence and nature of abuse and barriers in access to services.

**Section 3** Contrasts and discusses data on LGBT+ survivors disclosing domestic abuse.

**Section 4** Maps LGBT+ specialist provision and highlights some of the initiatives that specifically meet the needs of LGBT+ survivors.

In the conclusion, we propose a set of recommendations aimed at strengthening responses and enhancing the safety of LGBT+ survivors.
This section introduces some of the main insights gained from the research on the prevalence and nature of LGBT+ domestic abuse, along with the barriers in access to services. The findings highlighted in this chapter and summarised below, synthesize existing knowledge to further the insights into the experiences of LGBT+ victims and survivors. The review draws on UK-based studies and reports available online and published after 2006.

[ KEY FINDINGS ]

PREVALENCE

1. More than one in four gay men and lesbian women and more than one in three bisexual people report at least one form of domestic abuse since the age of 16.

2. Lesbian women report similar rates of domestic abuse to that of heterosexual women.

3. Bisexual women are twice as likely to disclose intimate partner violence compared to heterosexual women.

4. Gay and bisexual men might be twice as likely to experience domestic abuse compared to heterosexual men.

5. Prevalence rates of domestic abuse may be higher for transgender people than any other section of the population.

NATURE OF ABUSE

1. LGBT+ survivors share similar forms of domestic abuse as their heterosexual cisgender peers and disclose abuse from both intimate partners and family members.

2. Experiences of abuse may include physical, sexual, emotional and financial abuse, forced marriage, so-called ‘honour’-based violence and other forms of violence and abuse that sit within the framework of gender-based violence.

3. LGBT+ people’s experiences of abuse are frequently linked to their sexual orientation and gender identity.

4. LGBT+ survivors are not a homogenous group. Experiences of abuse differ across and between the subgroups.
### 2.1 PREVALENCE

Surveying the prevalence of domestic violence and abuse in a population, the Crime Survey for England and Wales (CSEW, year ending March 2015) notes that overall, 27% of women and 13% of men had experienced any domestic abuse since the age of 16 [1]. While this generally suggests that one in four women and one in eight men will suffer domestic abuse, prevalence of domestic abuse as experienced by LGBT+ people is difficult to quantify. This is because it is not currently possible to produce statistically relevant figures for the population of LGBT+ people, even though estimates suggest that somewhere between 0.35% and 1% of the adult population of the UK identifies as trans [2] and 2.5% to 5.9% of the adult population of England identifies as lesbian, gay, bisexual or ‘other’[3]. With 2.5% likely being an underestimate due to the perceived reluctance of LGBT+ people to self-identify in official surveys.

Official statistics on the number of LGBT+ people who have been affected by domestic abuse are limited. Evidence however suggest that domestic abuse greatly impacts on LGBT+ communities. In their 2018 publication of women most at risk of experiencing partner abuse in England and Wales [4], Office for National Statistics (ONS) found that bisexual women were nearly twice as likely to have experienced partner abuse in the last 12 months than heterosexual women (10.9% compared with 6.0%). Furthermore unofficial estimates produced by ONS in 2016 suggest that more than one in four (27.5%) gay men and lesbian women and more than one in three (37.3%) bisexual people report at least one form of domestic abuse since the age of 16 [7]. ONS figures do not include those identifying as trans and non-binary.

Some data around the scope of LGBT+ domestic abuse can also be found in community studies, which amongst other things also suggest that prevalence rates of domestic abuse may be higher for transgender people than any other section of the population.
LESGIAN, GAY AND BISEXUAL SURVIVORS

1 In a 2018* study, almost one third (29%) of all LGBT+ respondents disclosed an incident involving someone they lived with because they identified as LGBT+ [5].

2 In a 2013* study, 49% of all gay and bisexual men disclosed at least one incident of domestic abuse from a family member or partner since the age of 16 [6].

3 In a 2008* study 25% of lesbian and bi women disclosed domestic abuse from a current partner [7].

TRANS SURVIVORS

1 In a 2018* study 28% of all trans respondents disclosed intimate partner violence a year prior to study taking place [8].

2 In a 2010 study from Scotland, 80% of trans respondents disclosed emotionally, sexually, or physically abusive behaviour by a partner or ex-partner [9].

3 In a 2007 study based in England, trans people were almost twice as likely as their cisgender peers to disclose at least one experience of domestic abuse in their lifetime (overall LGBT+ 30%, trans people 64%) [10].

* denotes a UK-wide study.

2.2 NATURE OF ABUSE

There are many parallels between LGBT+ people’s experiences of domestic abuse and that of their heterosexual cisgender peers. This includes the impact on the survivors and a range of violent behaviours which may include physical, sexual, emotional and financial abuse, forced marriage and so-called ‘honour’-based violence.

There is a statistically relevant indication that LGBT+ survivors disclose higher levels of abuse compared to those who don’t identify as LGBT+. SafeLives’ national data, for example, found a higher prevalence of all types of abuse among LGBT+ clients compared with those who do not identify as LGBT+. With the exception of harassment and stalking, these differences were found to be statistically significant [12].

Furthermore, in the ONS 2018 publication, bisexual women were twice as likely as heterosexual women to have experienced non-physical abuse (6.8% compared with 3.9%), but were nearly five times as likely to have experienced sexual assault by a partner or ex-partner (1.9% compared with 0.4%) [4].
In a 2018 study based in London approximately 80% of respondents disclosed intimate partner abuse and 23% disclosed abuse by family members, 10% also disclosed risk of so-called ‘honour’-based violence and/or forced marriage [11].

In two UK-wide studies from 2008 and 2013, 18% of gay and bisexual men disclosed they had been repeatedly belittled by a male partner, 17% have been pushed, held down or slapped by a male partner and 15% have been kicked, bit or hit with a fist [6] and 20% of all lesbian and bi women respondents had been pushed or slapped by another woman and kicked and bitten [7].

In a 2010 study from Scotland, 45% of trans respondents had experienced physically abusive behaviour from a partner or ex-partner and 47% disclosed some form of sexual abuse from a partner or ex-partner [9].

When examining the nature of domestic abuse, it is important to understand LGBT+ people are not a homogenous group. This means that abuse disclosed by lesbian women may be different to that of bisexual and trans women. Equally, gay men’s experiences may be different to that of bisexual or trans men. For example, Galop’s 2018 study found gay men are considerably more likely to disclose being hit or punched, or threatened with assault, compared to lesbian and bisexual survivors. Furthermore, findings also suggest trans women disclose disproportionately higher levels of physical, sexual and financial abuse compared to trans men, who disclosed higher levels of harassment/stalking and verbal and emotional abuse [11].
With reference to intimate partnership abuse, studies also indicate that abuse of power and control, the cyclical nature of abuse, and the escalation of risk over time, are similar between same-sex and heterosexual partners [13], [14]. However, in addition to abuse rooted in inequality and gender, lesbian, gay, bisexual and transgender survivors may also experience abuse of power and control closely associated with having their sexuality or gender identity used against them. These additional factors often underpin the complexity of issues LGBT+ survivors face and include the following abusive behaviours:

- Intimidation and threats of disclosure of sexual orientation and gender identity to family, friends, work colleagues, community and others.
- Disclosing gender history, sexual orientation or HIV status without consent.
- Undermining sense of sexual and/or gender identity/self-expression, or making a person feel guilty or ashamed of their sexual orientation and gender identity.
- Blaming a person for identifying as LGBT+ or for causing the discrimination they have experienced.
- Limiting or controlling access to LGBT+ spaces or resources. The abuser may isolate the abused from contact with the LGBT+ community by preventing them from attending LGBT+ venues or events or seeing friends from within the community.
- The abuser might use immigration law to threaten with deportation to the country of origin, which might be unsafe due to e.g. anti-gay legislation.
“It’s not uncommon to get calls around how immigration status is being used as a tool to abuse somebody. So somebody could be coming from a country that has very homophobic institutions and their partner is constantly using that as a tool to threaten with deportation. And the truth of this is if actually they do go back to their country of origin, that is homophobic and they’ve been outed, that is a very, very serious consequence of it. That is something that we see as a power tool that is used all the time.”

National LGBT+ Domestic Abuse Helpline Manager. Source: SafeLives. Spotlight #6, Episode 1

LGBT+ survivors may also be coerced or manipulated to believe:

- That no help or support is available to them because they are lesbian, gay, bisexual or transgender, or that for this reason, they deserve the abuse.
- Societal misconceptions of what constitutes LGBT+ domestic abuse may mean that some survivors may not recognise and acknowledge their experience as domestic abuse.

“One of our IDVAs is at the Crown Court today supporting a young client for a GBH [grievous bodily harm] trial. This is his first same sex relationship. His partner would frequently make him question his sexual identity and reinforced that no one would believe him if he reported the abuse, and that he would experience homophobia through the court process.” LGBT+ specialist Independent Domestic Violence Advisor

Source: SafeLives. Free to be Safe: LGBT+ People Experiencing Domestic Abuse [12]

Trans survivors are one of the most hidden groups of domestic abuse survivors. While trans and cisgender people may face similar patterns of abuse, many trans survivors also face specific forms of abuse related to their trans identity. For example, the abusers might:

- Out the abused as trans and/or disclose their gender history without consent.
- Deliberately use the wrong pronouns or use a person’s ‘deadname’.
- Force the abused to perform a gender they do not wish to present as.
- Coerce the abused into not pursuing gender transition (deny/withhold access to medical treatment or hormones etc).
- Ridicule or exotify body or body parts.
- Assault medically altered body parts or force exposure of surgical scars.
- Exploit internalised transphobia.


10. Deadname refers to a person’s previous or birth name. This term is often associated with trans people who have changed their name as part of their transition. The heavy negative connotation of the word is intended to stress the inappropriateness of referencing a person’s terminated name and effectively misgendering them [33].
“She knew about my transgender status. At first she was okay about it, but then she started using it against me. She was happy when she thought I was more like a transvestite, you know, cross-dressing, but as it carried on, she wasn’t happy about it. She started threatening to tell my friends about it if I didn’t do what she wanted... I trusted her, but she abused that... After we broke up, she went around my friends and told them I was transgender.” Trans survivor of domestic abuse

*Source: A. Roch et al. Out of sight, out of mind? Transgender People’s Experiences of Domestic Abuse* [9]

This review did not specifically look into experiences of survivors who identify as non-binary, however, anecdotal evidence suggests this group might be particularly at risk of invalidation of their identities in the context of domestic abuse. This is due to mainstream perception that there are only two legitimate genders ‘male’ and ‘female’, which can be used as a form of power and control over the survivor, but can also be used as exclusion criteria by services.

### 2.3 BARRIERS IN ACCESS TO SERVICES

Evidence highlights that domestic abuse in the lesbian, bisexual, gay and transgender community is a serious issue. However, despite high levels, it remains acutely underreported and LGBT+ survivors are disproportionally underrepresented in domestic abuse services, including criminal justice agencies.

SafeLives’ national dataset for the period April 2014 to March 2017, reports that just 2.5% of people accessing support from domestic abuse services identified as LGBT+. In addition, in the 12 months to the end of March 2018, only 1.2% of cases discussed at MARAC were noted to involve LGBT+ survivors and over a quarter of MARACs (26%) recorded no LGBT+ survivors at all during this period [12]. Research also confirms LGBT+ survivors are unlikely to seek help for domestic abuse or opt for cooperation or criminal justice outcomes in the context of reporting domestic abuse. For instance, in two UK-wide studies, almost 80% of gay, lesbian and bisexual survivors did not report incidents to the police [6], [7] and in a London-based study, 68% of respondents did not try to find advice, support, or protection from organisations/services [15].

Underreporting of domestic abuse and low visibility of LGBT+ people within services is often a result of a range of specific barriers existing on a personal and systemic level, which prevent LGBT+ survivors from getting the help and support they need.

Personal considerations most typically reflect a person’s perception of themselves, of the abuse and of the support system. On the other hand, systemic barriers reflect a broad range of factors on the
structural and cultural level of service provision that might lead to LGBT+ people believing that mainstream services are not culturally sensitive to their specific needs [16].

Structural and cultural barriers can include [17]:

- Low visibility and representation of LGBT+ issues within services, across internal publications and/or publicly available materials and websites or within physical organisational space.
- Lack of established partnerships with LGBT+ communities and organisations.
- Lack of quality referral pathways.
- Low understanding and awareness of professionals around unique forms of coercive control targeted at sexual orientation or gender identity.
- Services appearing heterosexist and relying on assumptions that all their clients are heterosexual and cisgender.
- Services relying on misconceptions around the dynamics of domestic abuse as it impacts on LGBT+ communities.

"Much of the domestic abuse support for women that’s delivered across the country, is delivered by specific women’s services and those services, understandably, often want to talk about the issue of domestic abuse using gendered language [...]. What can be really useful is to also make it really explicit that they are also able to support lesbian and bi-sexual women, because it may well be that lots of these women [...] might look at the imagery that’s used on advertised material and posters and [...] they may make an assumption that that service is not able to support them. That is a big barrier.” LGBT+ specialist Independent Domestic Violence Advisor. Source: SafeLives. Spotlight #6, Episode 4

Lack of LGBT+ representation across policies and within service provision may be a significant factor in deterring LGBT+ survivors from seeking help, if they feel they might be misunderstood or be discriminated against. Other personal concerns also include feelings of anxiety or reluctance to disclose same-sex relationships and explain LGBT+ identity within mainstream settings. In addition, after experiencing abuse, a survivor may have to ‘come out’ several times when accessing different layers of support. This further deters LGBT+ people from seeking help. LGBT+ survivors also worry that
experiences of abuse will not be taken seriously or will be minimised or trivialised [18]. For some survivors, this will arise from previous experience of real or perceived homophobia/bi-phobia/trans phobia from service providers.

The decision to access help and support may also be influenced by a lifetime of experiences of discrimination and abuse due to sexual or gender identity stigma, which may include family rejection and experiences of bullying or hate crime. This intersection of institutional, structural discrimination and interpersonal abuses will inform a person’s perception of violence and the decision to engage with services might contribute to survivors normalising or trivialising the abuse. Alternatively, they may see it as something they are to blame for, or even having been caused by some aspect of their identity [15].

Furthermore, the experiences of LGBT+ survivors of domestic abuse does not easily fit within the public story of domestic abuse [19], which traditionally views it primarily as a problem of ‘weaker heterosexual cisgender woman abused by a physically stronger man’. This perception can affect a survivor’s decision to seek help, as they may be less likely to recognise they are experiencing or using abuse [14]. Equally, professionals adopting the dominant narrative may fail to recognise an LGBT+ survivor seeking help is experiencing domestic abuse and/or they may view the abuse as mutual because it occurs in a same-sex relationship.

“I couldn’t have said ‘Oh I was a victim of’ or ‘I was a survivor of’. And also the biggest thing for me was the unpicking of actually who was the perpetrator and who was the victim in that situation because I didn’t know. But I’m really clear now. He controlled all the finances. I was isolated from friends and family quite a bit.” LGBT+ survivor of domestic abuse. Source: P. Harmar et al. Improving Access To Domestic Abuse Services Across Avon and Somerset [20]

LGBT+ survivors might also be reluctant to talk about the abuse or seek help in order to protect their abusive partner or family, avoid rejection and denial from their peers and/or keep their ties with the LGBT+ communities/infrastructure, which may in some cases be the only support system they know and feel accepted by [21].
To improve survivor support, service providers must primarily understand the needs and experiences of their service users, so they can develop appropriate responses. However, building an accurate picture of LGBT+ survivors along with their needs and expectations may present a challenge. Many service providers use non-standard questions on their monitoring forms, only partially collect demographic data and in some cases seem to be reluctant to include questions indicating the service users’ sexual orientation and gender identity [12], [15]. By doing this, service providers fail to recognise that domestic abuse impacts on LGBT+ communities and miss an opportunity to fully understand the needs and goals of all their service users.

This section addresses some of the knowledge gaps around LGBT+ survivors’ accessing services. We draw on selected anonymised LGBT+ service user datasets produced and shared by four LGBT+ specialist domestic abuse services and three non-LGBT+ services running LGBT+ domestic abuse specialist projects [14]. The data was collected over different timescales, from January 2013 to August 2017, services used different wording on forms and have used varied methods to identify and categorise cases. In addition, services also provided different types of support, which included IDVA services [15], housing advocacy, domestic abuse casework and advocacy, a specialist LGBT+ refuge caseworker and a national LGBT+ helpline. Due to the varied type of support and outreach, the number of supported clients across the datasets varied considerably. Only one dataset has been published [11], six remain unpublished and have been shared with the authors of this report, for information only.

These factors combined mean that the records are not directly comparable. However, contrasting the demographic data, where possible, provides an indicative insight into some of the shared characteristics of LGBT+ service users reporting domestic abuse. The analysis also took into account intersecting characteristics such as age, gender, ethnicity and disability to determine variations and distinct support needs within and across LGBT+ subgroups.

Our own conclusions, as presented in Box 4, are further complemented by relevant findings from the studies referenced in Section 2 of this report.
**[KEY FINDINGS]**

**AGE**
1. Survivors under 24 and those over 50 are not accessing support at the same rate as other age groups.
2. Survivors under 24 are more likely to use remote services such as a phone helpline.
3. LGBT+ survivors over 65 are more likely to experience barriers associated with health status, disclose higher additional risks and vulnerabilities in comparison to other age groups and are more likely to distrust statutory and criminal justice organisations.

**GENDER OF SURVIVORS AND PERPETRATORS**
1. In most cases, services supported higher numbers of gay and bisexual men over lesbian and bisexual women, and survivors with a trans history.
2. LGBT+ survivors of all genders largely disclose abuse from a male perpetrator.

**TRANS IDENTITY**
1. Trans survivors are considerably more likely to choose an LGBT+ specialist service over a non-LGBT+ service.
2. Trans survivors are more likely to disclose abuse by family members compared to cisgender LGBT+ survivors.
3. Trans survivors may be denied support due to gaps in policy, anti-trans prejudice, or they can be turned away from non-LGBT+ services because of their gender history.

**DISABILITY AND MULTIPLE NEEDS**
1. At least one in three LGBT+ survivors disclosed one form of disability or health problem.
2. LGBT+ survivors may present with multitude of additional needs, such as mental health issues, issues related to alcohol and drugs misuse, mobility or long-term health issues, such as living with HIV/AIDS.
3. Insecure immigration status can be a significant challenge for LGBT+ survivors, who might be faced with deportation to countries that are extremely hostile towards LGBT+ communities.

**RACE AND ETHNICITY**
1. LGBT+ survivors with BME background are considerably more likely to choose LGBT+ specialist service over non-LGBT+ specialist services.
2. This group is at a disproportionate risk of abuse from family members in comparison to LGBT+ survivors with white background.
3. LGBT+ BME people’s experiences of reaching out to services may be compounded by intersection of racism, homophobia and transphobia.
3.1 AGE

Datasets suggest that those most likely to access help and support are LGBT+ survivors aged between 25-49. Services reported between 55% to 69% of all clients belonged to this age group. The only service departing from this trend was the National LGBT+ Domestic Abuse Helpline (Galop), as in the period April 2017 to March 2018, most calls to the helpline came from clients under 24. Overall it appears, that those under 24 years of age and those over 50 are not accessing support at the same rate as other age groups. Figures also show that access to services is significantly reduced across all datasets for clients over 55.

SafeLives’ study into the experiences of young people with domestic abuse suggests this group discloses the highest rates of intimate partner violence and abuse by family members compared to other age groups [22]. Furthermore, our data suggests that those under 24, identifying as LGBT+, are more likely than any other age group to disclose abuse by family members.

Studies also suggest that young LGBT+ people are particularly reluctant to report to the police or seek help from services. This is especially the case when they face rejection and abuse from their families, as they fear reprisals and other consequences, such as homelessness [23]. Additionally, this group often lack relevant and accurate information on healthy relationships and are unable to confide in their peers or family, because of the reaction they would receive. This creates a situation where they may also be vulnerable to exploitation from older partners, especially in the context of a first relationship, where the abuser can target and exploit the young person’s lack of experience and knowledge [14], [24].

The fact that young people appear to be accessing phone helpline support, more than any other type of support, may also point to additional barriers in access to services or different support needs of this age group. It may, for example, suggest that young people are more likely to use remote services, such as phone helplines and webchat.

Another hidden group is older LGBT+ people, especially those over 65. This, however, seems to be the case across the board, as national domestic abuse services continuously report that women over 60 generally appear to be under-represented in their sample of service users [25], [26].

Low figures across all services in our sample may suggest additional barriers to older LGBT+ survivors coming forward and getting help. For example, studies find older LGBT+ people are more likely to have fewer support networks and the majority are not confident that social care and support services will understand and meet their
needs [27]. Furthermore, in the UK, mixed or specialist support spaces for older LGBT+ people are rare or non-existent. This might lead older LGBT+ survivors to explore alternative routes to seek help, for example, drawing on friendship or mutual support networks that often exist in LGBT+ communities [28].

Research also points to a strong association between being a victim of domestic abuse and experiencing increased rates of mental and physical health problems in older adults. In this context, older LGBT+ people are more likely to experience barriers associated with health status, such as significantly poorer health outcomes compared to the heterosexual population, and disclose higher numbers of additional risks and vulnerabilities, such as substance abuse and a history of poor mental health, including depression [27].

Finally, evidence also suggests that older LGBT+ people are more likely to distrust statutory and criminal justice organisations, as many grew up in an environment where their sexual or gender identity was considered an illness, and where having a sexual relationship was a crime. Therefore, trusting police officers or other agencies with details of a problem they are facing, often does not come naturally. For example, findings from domestic homicide reviews and community research show that older LGBT+ people may be less open about their identity/relationships (e.g. with perpetrators sometimes presenting as ‘carers’ rather than as partners), have concerns about the safety and cultural appropriateness of support, are socially isolated and have fewer support networks [29], [30].

**CASE STUDY**

We helped an older client who had been blackmailed into handing over many thousands of pounds by a man he had previously had a sexual relationship with. The man would persistently telephone and ring his doorbell until he was let in and given money to prevent him telling the police and our client’s family that he was gay. This persisted for years until he finally made contact with us and we helped him obtain legal help to prevent the man contacting him. Source: Galop, 2014. LGBT+ Intersections – A Charity Perspective [31]

### 3.2 Gender of Survivors and Perpetrators

Most services reported supporting higher number of male clients in comparison to female or non-binary clients. On average, services reported between 50% and 65% of clients identified as male. In general, male survivors were more likely to access one-on-one support, such as casework services or IDVA support. The National LGBT+ Domestic Abuse Helpline was one of the two services that reported supporting a higher number of clients identifying
as female. Even though more research is needed to support our conclusions, this may point to somewhat different support needs for LGBT+ male and female survivors of domestic abuse.

Data also suggests that within LGBT+ communities, domestic abuse is a gendered issue with a large proportion of LGBT+ survivors disclosing abuse from a male perpetrator. However, findings also suggest women can be perpetrators of domestic abuse. In a 2018 study conducted by Galop, 95% of gay men disclosed abuse from a male perpetrator, while 82% of lesbian women and 58% of bisexual survivors disclosed abuse from a female perpetrator [11].

There could be a number of explanations for the higher number of gay and bisexual male survivors accessing LGBT+ specialist one-to-one support. Firstly, as above, it could indicate that greater numbers of gay and bisexual men may be experiencing domestic abuse, compared to lesbian, bisexual women and trans+ people. However, we have to be cautious about assuming this because of the lack of data on LGBT+ survivors and perpetrators.

Secondly, heterosexual women experience disproportionately more domestic abuse and violence than heterosexual men. As such, the most common narratives of domestic abuse primarily present it as an issue affecting heterosexual women suffering violence from heterosexual men. As a result, most domestic abuse services will still be predominantly working with heterosexual women in mind, or may be perceived as such by male survivors. Some women-only services/projects may also target and be accessible to LBT+ women. Likewise, specialist men’s services have tended to focus on heterosexual cisgender male survivors with fewer GBT+ men accessing their services. This can lead GBT+ male survivors to question whether the service is for them and/or they may prefer to access LGBT+ services.

Studies also suggest that gay men may be more inclined to seek help from LGBT+ organisations, compared to lesbian and bisexual women who are more likely to use ‘informal’ or ‘private’ means to cope with the abuse [14]. Although more research is needed in this area, data may also suggest that men might be more likely to
disclose more violent forms of abuse, such as physical and sexual violence, which may affect the decision-making process of seeking help [10], [11], [14].

### 3.3 TRANS IDENTITY

Since the Government announced their commitment to reform the Gender Recognition Act (2004)\[16\], debates around trans women accessing single-sex women only spaces have become increasingly polarised and the trans community has been subject to discrimination and prejudice, particularly from sections of the national media and online [5], [32]. In addition to directly opposing the right to self-declaration, many of the commentators have defended the view that the proposed changes to the GRA directly harms the interests of women\[17\], especially in the context of single-sex spaces for women, traditionally provided by women-only domestic and sexual violence services. Some were of the view that supporting trans women in these services might compromise the integrity of these safe spaces, or that reforming the GRA would allow heterosexual cisgender men to access these spaces more easily.

While the intention around reforming the GRA was not about whether or not trans people should be able to use single-sex services, as trans people’s right to use single-sex services is already protected by the Equality Act 2010, the public debate clearly unveiled very specific challenges trans people have to overcome when accessing help and support for domestic abuse.

Despite this huge amount of recent attention, there is almost a complete absence of research on trans people accessing domestic abuse services and their experiences in the system. A small-scope study conducted by Stonewall in 2018 [32], points to the progress some services have made in their attempt to include all survivors, whatever their background or identity, to allow them to provide the most effective support they can to all survivors of domestic abuse.

In two small studies based in Manchester and Scotland, less than one in ten trans respondents reported accessing a trans-specific, LGBT+ organisation or domestic abuse service to seek help [33], [9]. Furthermore, both studies also found that a large majority of trans survivors prefer to access informal support by speaking to a friend, relative, neighbour or colleague.

Our service user datasets suggest that the estimated rates at which trans people access LGBT+ specialist or trans advocacy services varies from 3% to 8% for services based outside of London. For those based in London, the estimated range was from 10% to 14%. In comparison, SafeLives’ 2016-2017 national dataset, reported that less than 1% of all clients accessing IDVA services identified as trans [35]. This may suggest that trans people are more likely to access LGBT+ specialist...
services over non-LGBT+ specialist services. Our data also suggests trans survivors are more likely to disclose abuse by family members compared to cisgender survivors and are particularly at risk of abuse used to enforce conformity with gender binary stereotypes.\textsuperscript{18}

Trans people may feel excluded from services which are mostly aimed at heterosexual cisgender women and men. A survivor identifying as trans may feel that they are not entitled to access domestic abuse services, as they would be excluded through eligibility criteria \textsuperscript{36}. Other personal barriers might include the possibility of professionals misgendering a client, both deliberately and accidentally, through the incorrect use of pronouns and names, and the lack of knowledge held by professionals in relation to gender transitioning \textsuperscript{9}. Transgender people also have a heightened awareness of the potential for transphobic reactions, which might lead them to avoid settings, such as public services that would require them to reveal their transgender status \textsuperscript{36}. Trans people may also feel insecure about their gender identity as a result of domestic abuse and will harbour feelings of shame, embarrassment and guilt when going through the process of transition, especially where their partners or family members aren’t approving of this \textsuperscript{9}, \textsuperscript{37}. In addition, daily experiences of discrimination, harassment and other forms of gender identity-based abuse may result in a person internalising negative social impulses, inwardly blaming themselves for the abuse, simply because they identify as trans. This can make it less likely for trans people to feel able to access support services or report experiences of domestic abuse to the police \textsuperscript{9}.

Several reports also suggest trans survivors may be denied support by services. For example, this can happen due to the Equality Act exemption\textsuperscript{19}, prejudice that trans people are sexually predatory and that they deliberately ‘deceived’ the perpetrator about their supposed ‘real’ gender \textsuperscript{16}, or they can be turned away because of their gender history (being assigned male at birth) \textsuperscript{9}.

\textsuperscript{18} Rogers, for example, conceptualises trans people’s experiences of family-based abuse as ‘honour’-based violence \textsuperscript{36}.

\textsuperscript{19} The Equality Act (2010) provides an exemption for single-sex services to treat a trans person differently, or refuse them services, where they can demonstrate that this is necessary \textsuperscript{32}.

One of our clients was a trans woman with mental health issues and a learning disability. She experienced serious neglect as a child and in later life she was financially exploited by family members who targeted her because of her health related benefits. She was also frequently the target of transphobia in public. She was also trapped in a situation of serious sexual abuse. Because she was isolated, experienced transphobic attitudes from police and her needs were not considered high enough to get much help from social care, she had fallen through the cracks and without support from Galop she would have struggled to end those situations.

Source: Galop, 2014. LGBT+ Intersections – A Charity Perspective \textsuperscript{31}
3.4 DISABILITY AND MULTIPLE NEEDS

LGBT+ survivors in comparison to their non-LGBT+ peers present with higher levels of complicated situations, additional risk factors and multiple needs, by the time they access support. This includes issues such as alcohol use, drug misuse, mental health problems and physical disability [38]. A 2018 study from Safelives has also found LGBT+ survivors of abuse are twice as likely to have self-harmed, are more likely to be abused by multiple perpetrators, are almost twice as likely to have attempted suicide and report experiences of historical abuse by a family member [12].

In service user datasets, the category of additional risk and multiple needs almost exclusively referred to information collected on disability. The rate of self-reported disability varied from 30% to 55%. The reported nature of disability included mental health issues, as well as issues related to alcohol and drugs misuse, mobility or long-term health issues, such as living with HIV/AIDS. Although more research is warranted, this may suggest that at a minimum, one in three LGBT+ survivors will present with at least one form of disability or health problem.

Anecdotal evidence confirms that LGBT+ people with mental health issues who experience domestic abuse face additional difficulties. For example, services might struggle to identify a primary perpetrator, due to fabricated abuse claims by the perpetrator and the abused partner minimising the abuse they experience. Perpetrators sometimes exploit this confusion by emphasising the
mental health issues or other complex needs of the survivor to persuade services or criminal justice agencies that the survivor is making up or imagining the abuse claims. Anecdotal evidence also suggest that police may decide they cannot help with a crime or domestic abuse report once they realise the victim has a history of mental health issues [31]. However, it should not be assumed that having a disability or health problem means that survivors will automatically be more vulnerable. Nevertheless, the recognition of these factors is important as it can highlight when a different approach to support may be required.

Additional needs related to immigration status

Whilst research capturing experiences of LGBT+ survivors with insecure immigration status is scarce, SafeLives’ Insights data suggests that immigration issues are more common among LGBT+ survivors, compared to non-LGBT+ survivors. For example, LGBT+ survivors are twice as likely to need to apply for indefinite leave to remain (4%) compared to non-LGBT+ survivors (2%), and are more likely to have no recourse to public funds (7% vs. 5%) [12]. Insecure immigration status can be a significant challenge for survivors when it comes to accessing services and evidence suggests that LGBT+ people on spousal visas or those who have no recourse to public funds are additionally vulnerable and may face significant disadvantages and dangers. Current UK immigration laws mean that survivors who have entered the UK on a spousal visa are unable to access public funds until they are able to apply for the ‘right to remain’ in the UK, which they are eligible to do only after two years of marriage [39]. Those experiencing domestic abuse can therefore be faced with the choice of staying in an abusive relationship as opposed to facing homelessness, destitution or risk of detention and deportation to governments and sections of society that are extremely hostile towards LGBT+ communities. Immigration status can therefore be used by perpetrators of domestic abuse as a means to coerce and control.

“A large proportion of my clients are not originally from the UK, whose immigration status is their primary concern, and that ends up being a locus of control that the abuser can use... they’re very fearful of being deported back to a homophobic or transphobic country, so it’s a significant risk factor for them.”

LGBT+ Domestic Abuse Case Worker. Source: SafeLives, Free to be Safe: LGBT+ People Experiencing Domestic Abuse [12]
3.5 RACE AND ETHNICITY

Datasets suggest that LGBT+ specialist services engage with BME clients at a very varied rate ranging from 25% to 49%. This is a positive and welcome contrast to existing research, which suggests that members of LGBT+ communities with a BME background and experiencing domestic abuse are unlikely to access mainstream services [20], [10], [41]. The highest proportion of BME clients was documented in services based in Birmingham, righton & Hove and London. This is unsurprising as these cities have a significant proportion of BME population [21]. Even though it is encouraging to see a high proportion of LGBT+ survivors with BME background represented within specialist services, there is very little research into their experiences of help-seeking and whether or how services are meeting the needs of this group.

The intersection of race and ethnicity, combined with LGBT+ identity, may result in a number of distinct barriers in access to services. For example, LGBT+ BME people’s experiences of reaching out to services may be compounded by intersections of racism, homophobia and transphobia. In a study based in Bradford, LGBT+ BME respondents felt they had experienced barriers when accessing services, which related to confusion about their gender identity and lack of acceptance, perceived to be because of the colour of their skin or their sexuality [41].

Furthermore, a 2018 study from Galop also found that LGBT+ BME people are at a disproportionate risk of abuse from family members including extended family members in comparison to clients with a white background. This includes specific forms of gender-based violence such as forced marriage and ‘honour’-based violence. This finding is further supported by anecdotal evidence suggesting that LGBT+ people with BME background are most likely to face rejection, exclusion and abuse due to their LGBT+ identity inside their family and communities they grew up in [31].

Categories of abuse by ethnicity (n. 528): BME clients, as well as victims/survivors with white background, were most likely to disclose intimate partner violence. Clients with BME background disclosed disproportionate risk of abuse by a family member (41%) compared to clients with white background (12%).

Source: LGBT+ people’s experiences of domestic abuse: a report on Galop’s domestic abuse advocacy service, 2018, Galop
LGBT+ survivors with a BME background may also face language barriers, identify more strongly with the BME community and culture than the LGBT+ aspect of their identity [20] or have to overcome religious and cultural pressures when making a decision to access help and support [42]. This combination of more limited access to services, language barriers and abuse from core/extended family members and the wider community have consequences in that many LGBT+ survivors with BME background feel unable to speak out about the abuse they’re experiencing.

Despite a relatively solid representation of BME survivors across the sample, it is important to note that LGBT+ culture and spaces may also be a source of prejudice and negative stereotypes presenting as racism, Islamophobia, anti-Semitism and anti-migrant prejudice [31]. Studies note that most services for LGBT+ people are promoted primarily or even exclusively in LGBT+ community spaces, ignoring that a significant proportion of LGBT+ people, particularly LGBT+ people with BME background, may not identify under that umbrella. Some LGBT+ BME survivors may therefore perceive services as ‘too white’, or not feel safe in LGBT+ spaces due to fears or experiences of racism [20], [41]. It is also important to note, there are currently no specialist domestic abuse services for BME men or gay, bisexual and transgender men with a BME background.

“For a long time black LGBT people haven’t always been able to access mainstream service providers, whether it’s health care, education, employment or other. So there’s been a recognition that systemically black people are excluded and black LGBT people are doubly excluded […] black LGBT people generally I think find it very difficult to access mainstream services, support services, whether it’s health or welfare or other, employment. And then when you inject the race, faith dimension or the disability dimension it makes it that extra bit harder.”

Source: F. Colgan et al. ‘Staying Alive’: The Impact of ‘Austerity Cuts’ on the LGBT+ Voluntary and Community Sector (VCS) in England and Wales [43]
Survivors of domestic abuse often present with a multitude of individual circumstances. LGBT+ survivors may additionally experience a range of institutional, structural and interpersonal abuses throughout their lives. Not only do these experiences impact on the survivor but they also impact on the ability of services to recognise and respond to domestic abuse when they are approached by an LGBT+ person looking for help. The ability to deal with such complexity is often an additional challenge to many providers.

“We’re really skilled at what we do and have built a lot of knowledge around LGBT+ and domestic abuse, but the level of complexities we’re seeing now [...] and this is not just in our region, I think this is happening all around the country, with the lack of housing and specialist programs disappearing [...]. It’s becoming more and more serious, the situations and needs our LGBT+ clients present with.”

LGBT+ Independent Domestic Violence Advisor

While services are responsible for ensuring that survivors of domestic abuse can access safe and high quality support, many LGBT+ survivors prefer to receive support for domestic abuse in an LGBT+ specific environment [11], [44], [45]. Most LGBT+ people feel that they would be more accepted, less likely to have to explain themselves, and less likely to be judged at an LGBT+ organisation, compared with mainstream services.

LGBT+ domestic abuse services and programs featured in this section, demonstrate that the LGBT+ sector has found efficient ways to address the complexities presented by LGBT+ survivors. We draw on interviews and meetings with LGBT+ domestic abuse advocates and service providers to highlight some of the working models of good practice and their role in supporting survivors and transforming services.

We know that there are numerous services across England and Wales that have worked with LGBT+ survivors for quite some time [12], [32]. In fact, it is highly likely that a majority of services will at some point support LGBT+ survivors, whether they have LGBT+ specialism or not. However, LGBT+ domestic abuse services are
LGBT+ specialist services are advocates and change-makers, often working on many intersecting social issues. Their knowledge and expertise supports public, private and voluntary agencies and crucially informs policy agendas.

specialist and dedicated projects, run by and for communities they seek to serve. They provide expert support, which is non-statutory, ‘community’-informed and ideally located to facilitate personal and systemic change [45], [46].

In addition to providing vital frontline services to LGBT+ survivors in the local areas where they exist, LGBT+ specialist services and programs documented in this section are advocates and change-makers, often working on many intersecting social issues, including LGBT+ rights, women’s rights, homelessness and poverty, immigration and refugee/asylum rights [48]. Their knowledge and expertise frequently supports public, private and voluntary sector bodies at the local, regional and national levels, and crucially informs policy agendas.

“Our LGBT+ [domestic abuse] casework service provides a unique empowering experience and creates a diverse support system that builds resilience and confidence for the survivors who rely on us. In addition to ‘hands-on’ support, our caseworkers also attend local MARAC and VAWG strategy meetings and invest a lot of time to ensure the concerns and needs of our clients are raised in strategic meetings and local policies.” LGBT+ Domestic Abuse Case Worker

Specialist services and programs outlined in this section exist in a variety of organisational settings. They are delivered by LGBT+ organisations, domestic abuse services, or have been set up within a specific partnership, consortium or network.

23. Survivors with no recourse to public funds are most typically those whose visas have expired and those who entered the UK on a spousal visa, but no longer have the right to remain in the UK following a break down in their marriage [37].
LGBT+ IDVA hosted by Independent Choices Greater Manchester in partnership with LGBT Foundation (Manchester)

The LGBT+ specialist IDVA service in Manchester is hosted by a domestic abuse organisation, Independent Choices Greater Manchester, in partnership with LGBT Foundation. The service is also supported by the Greater Manchester Police. Integrating LGBT+ specialism into a non-LGBT+ specific setting had a positive impact on the culture in the organisation and has provided more understanding around LGBT+ issues.

“Having an IDVA service broke down a lot of barriers in terms of who we will address with our programs. As a domestic abuse service we were initially seen as only catering to women, where in fact the LGBT+ program made it more visible that we will also support male victims.”

LGBT+ Independent Domestic Violence Advisor

LGBT+ specialism also expanded the organisation’s existing programs. LGBT+ specialists are often able to connect across and navigate various ‘cultural’ nuances which are not always spoken, but are formed across common understandings and familiarity with LGBT+ issues.

“As someone that was working in the generic domestic abuse sector, you get used to a certain language being used in the services and pronouns are always ‘he’ and ‘she’. Even though we’ve previously had some training around LGBT+ domestic abuse, I still noticed our staff had a lot of questions [...] weren’t fully comfortable asking questions, around trans people in particular. Having the service informed our understanding around the language and terms we use with people and introduced different identities and pronouns.”

LGBT+ Domestic Violence Service Manager
LGBT+ specialist domestic abuse services are largely unavailable within many local authority areas in England and Wales. By end of June 2019 there were six voluntary sector providers delivering LGBT+ specialist services based in Birmingham, righton & Hove, London and Manchester.

Independent Domestic Violence Advisors for LGBT+ survivors are hosted by four services, Galop, Birmingham LGBT, Independent Choices Greater Manchester and RISE.

There are limited emergency facilities for LGBT+ people and housing providers do not always recognise that they have a duty towards LGBT+ survivors. Gay, bisexual and trans men are particularly affected by this.

To meet the multiple and complex needs of LGBT+ survivors, LGBT+ specialist services provide a broad range of services and often work outside of their geographical remit and beyond their capacity.

LGBT+ specialist services often work on many intersecting social issues and frequently support public, private and voluntary sector bodies and inform policy agendas.

LGBT+ specialist services and programs may be delivered by LGBT+ organisations, domestic abuse services, or have been set up within a specific partnership, consortium or network.

Where integrated into a domestic abuse service, LGBT+ specialist programs can have positive impact on services as well as survivors.

Despite a demonstrated need for specialist services, funding and commissioning remain major challenges.

Wherever practically feasible, LGBT+ specialist services are encouraged to work in partnerships so as to reduce duplication and ensure resource efficiency.

4.1 SCOPE OF SERVICE PROVISION AND WHERE IT’S DELIVERED

LGBT+ specialist domestic abuse services are largely unavailable within many local authority areas in England and Wales. As a result, the majority of LGBT+ survivors are unable to access LGBT+ specific support within their locality. This does not mean that LGBT+ survivors do not access other statutory and voluntary services. However, we do know that there continue to be barriers to accessing domestic abuse services and comparatively small numbers of LGBT+ survivors are seeking help from these services [12].

What do we mean by LGBT+ specific support?

For the purpose of this section, we have focused on services that provide a specific and substantive service to LGBT+ survivors of domestic abuse based on the principle of ‘by and for the LGBT+
community. We recognise that there are many services that are inclusive and open to some or all LGBT+ survivors. In addition, there are also a number of services, including LGBT+ organisations that provide support to LGBT+ survivors as part of their service, for example, survivors who may access counselling or support services. Finally, there are a number of small scale and/or short-term domestic abuse initiatives that target LGBT+ communities, such as outreach/engagement, research, awareness raising, training or group work. Whilst we recognise the value of these interventions, we have not included these, primarily because the lifespan or remit of these projects may skew the picture of substantive service provision of LGBT+ domestic abuse services and programs across England and Wales.

By the end of June 2019 there were six voluntary sector providers delivering LGBT+ specialist advocacy and support domestic abuse services based in England and Wales. A breakdown of provider by city and region is provided in the table below.

24. Rainbow Bridge, an LGBT+ domestic abuse service based in Cardiff Victim Support, was established in June 2017. However, it lost funding in May 2019 and is no longer operational.
We also found there are a range of delivery models for LGBT+ specific services, broadly categorised as the following:

- LGBT+ domestic abuse service based within an LGBT+ community organisation, or as a partnership of LGBT+ organisations (e.g. Birmingham LGBT, LGBT Domestic Abuse Partnership [DAP]).
- LGBT+ domestic abuse service based within a domestic abuse service (e.g. Independent Choices Greater Manchester, RISE).
- LGBT+ domestic abuse service delivered by an LGBT+ organisation but as part of a wider domestic abuse/VAWG partnership (e.g. Galop delivering the LGBT+ component of the Angelou Tri-borough VAWG partnership, or the London Integrated Victim and Witness Service, led by Victim Support).

While many of the LGBT+ domestic abuse programs have only been commissioned in the last five years, most of these are either delivered by or partnered with LGBT+ community services with a long history in providing support to LGBT+ communities [11], [49], [50]. Some of these services were established in the early 1980s, such as Galop, Stonewall Housing and LGBT Foundation. Likewise, a number of LGBT+ services operate within or in partnership with domestic abuse services with many years of expertise in working with survivors of intimate partner/gender-based violence, such as RISE and Independent Choices Greater Manchester.

Support provided by LGBT+ specialist domestic abuse services varies depending on the service, but ranged from advocacy, advice, emotional support, counselling, housing support, refuge accommodation, outreach, training, help reporting, and remote support such as helpline or web-based support. IDVA/caseworker services are available at Independent Choices Greater Manchester (Manchester), Galop (London) and Birmingham LGBT (Birmingham), while RISE (Brighton & Hove) hosts a specialist LGBT+ refuge service. Some services (Stonewall Housing) have developed domestic abuse support in specific areas such as housing and maintain this as the core area of their work.

In addition to the domestic abuse service, many LGBT+ organisations and partner organisations work across multiple forms of gender-based and inter-personal violence and abuse. Services support LGBT+ survivors of all genders. Some have specific programs aimed at young people, trans and male victims of domestic abuse, in recognition that LGBT+ survivors are not a homogenous group.

Apart from the National Domestic Abuse Helpline run by Galop, all other services operate at a local or regional level and are based within large metropolitan areas. However, some also have a reach
beyond their immediate geographical area. This not only reflects the nature of supporting survivors of domestic abuse, as survivors might need to relocate due to safety concerns, but some organisations cover a larger area than commissioned, as they are often the only specialist LGBT+ organisation in their locality or region. This is significant and further speaks to the value and role these services play in supporting survivors of domestic abuse.

However, this also comes at a cost as due to their specialism, most of these programs face substantial demands for no-cost training and technical assistance from non-LGBT+ statutory and voluntary services and will often work beyond their capacity.

“We’re expected to do a lot for free especially around consultation, training and outreach and engagement. Some services behave as if our work costs nothing and it involves no time. They assume, because we’re LGBT+ specialists, we will always have all LGBT+ information at hand for them to use.” LGBT+ Domestic Abuse Case Worker

### 4.2 MODELS AND TYPES OF LGBT+ DOMESTIC ABUSE ADVOCACY AND SUPPORT

Models and types of advocacy support are likely to vary across the services. Specialist domestic abuse programs run by larger and established LGBT+ centres, such as LGBT Foundation and Birmingham LGBT, will have in-house capacity and resources to provide multiple services and support options. This can include domestic abuse specific support, but also support around issues exacerbated by the experience of abuse, such as sexual health, healthy relationships, co-dependency, low self-esteem or exploring issues around sexual orientation or gender identity.

The range of support across services most typically includes an advocacy service that can offer practical help and advice, safety planning, assistance when dealing with the criminal/civil justice system and emotional support, including counselling or group work. LGBT DAP also offer practical housing advice, intended for those who are at risk of homelessness, or who are currently homeless due to domestic abuse. In addition, LGBT Foundation offers housing support and advice, with allocated accommodation units housing for high, medium and standard risk victims of domestic abuse and RISE runs and LGBT+ refuge service with dispersed accommodation and floating support.

Specialist programs also tend to enter into partnerships to extend support options or develop targeted responses, such as trans specific advocacy services and young people services. Galop is also delivering a multiple needs casework service (as part of the 'Meeting...
Survivors Where They Are’ partnership project) which allows the organisation to offer enhanced and more intensive support to a smaller number of survivors for up to 18 months.

4.2.1 INDEPENDENT DOMESTIC VIOLENCE ADVISORS (IDVAS) FOR LGBT+ VICTIMS/ SURVIVORS

Serving as a victim’s primary point of contact, IDVAs form part of a continuum of specialist domestic abuse support. They normally work with high-risk clients from the point of crisis, to assess the level of risk posed by the perpetrator and discuss the range of suitable options and develop safety plans [51], [52]. IDVAs can also accompany their clients at court, offer support with reporting to police and at the MARAC, where their role is to lead in coordinating support and ensuring actions are completed. Studies have shown that when domestic abuse survivors are supported by an IDVA, there are measurable improvements in safety, including a reduction in the escalation and severity of abuse and a reduction, or even cessation, in repeat incidents of abuse [51].

In 2017, there were around 1,000 IDVAs working in England and Wales, equivalent to 897 full time equivalent (FTE) IDVAs [35]. As of June 2019, IDVAs for LGBT+ survivors were hosted by four services; two LGBT+ organisations (Galop and Birmingham LGBT) and two domestic abuse services (Independent Choices Greater Manchester and RISE). IDVAs are a much needed and valuable resource for LGBT+ specialist services. While IDVAs traditionally support individuals experiencing high-risk domestic abuse, LGBT+ specialist IDVAs in three out of four services supported clients of all risk categories. Therefore, it is more common for an LGBT+ specialist IDVA to work with a survivor on a range of issues (other than risk reduction), over a longer period of time, to provide emotional support, or advocacy around housing or well-being. LGBT+ specialist IDVAs also support other domestic abuse providers, including taking on referrals. Respondents spoke about delivering training to voluntary and statutory agencies, as well as engaging with the LGBT+ communities to increase awareness and encourage help seeking.

Due to some of the barriers faced by or particular experiences of LGBT+ survivors, LGBT+ IDVAs are often faced with a number

“..."A lot of my work is working with other voluntary and statutory services and supporting them in their work. I often end up helping them and relieving them of some of their workload relating to their LGBT+ clients."

LGBT+ Independent Domestic Violence Advisor
of additional challenges in their effort to reduce risk and provide support. Respondents most often referred to obstacles they face while trying to secure emergency accommodation for their clients and in navigating the criminal justice system where there had been a lack of understanding of the survivor’s situation.

“Most of the time refuges are not available or not willing to support LGBT+ survivors. It’s also always a challenge to find long-term support, especially outside of London. Another thing is the court system. There is simply not enough understanding of specific circumstances of LGBT+ survivors, especially around the issue of privacy and coming out.” LGBT+ Independent Domestic Violence Advisor

4.2.2 TELEPHONE AND EMAIL SUPPORT: THE NATIONAL LGBT+ DOMESTIC ABUSE HELPLINE

There are a small number of LGBT+ helpline services across the country, though these offer broader support (such as Switchboard) or are smaller advice lines linked to organisations that operate to sign-post or triage callers into other services.

The National LGBT+ Domestic Abuse Helpline hosted by Galop is the only UK-wide specialist LGBT+ domestic abuse service. The Helpline provides support for all LGBT+ people and survivors, particularly those who are not able or willing to access other support or live in areas where no LGBT+ specific support is available to them. The service offers specialised information on domestic abuse and offers emotional support, not just to LGBT+ callers or those questioning their sexual orientation or gender identity, but also to their families, friends and supporters, including mental health professionals, domestic abuse practitioners, social workers and police.

The service has developed an extensive internal database supporting national signposting and referral opportunities relevant to callers. However, there are occasions where the Helpline also offers limited advocacy and support to callers who require more than a listing or sign-posting service, but have few alternatives. In addition, in 2019, the Helpline is piloting a one-year project that provides telephone and email advocacy to survivors who require

“Where we can, we will follow up on the conversation and together with the caller, explore the choices to move forward. We will be contacting local services on their behalf just to confirm that they have the appropriate knowledge and expertise to support our client. We will always want reassurance for our callers, before we refer them to any local agency.” National LGBT+ Domestic Abuse Helpline Manager
additional help and support to link them with local services.

The LGBT+ specific nature of the Helpline is often the main draw for callers. All helpline staff identify as LGBT+ and the service also operates a trans specific service.

“The fact that it is a helpline that is run by the LGBT+ organisation for the community it serves is often very reassuring for our clients. Regardless of what their needs might be, whoever calls, they will always be talking with experienced staff who identify as LGBT+.”

National LGBT+ Domestic Abuse Helpline Manager

4.3 EMERGENCY HOUSING, REFUGE ACCOMMODATION AND SUPPORT

Finding safe accommodation is often a priority for many LGBT+ survivors, though for those attempting to escape from an abusive relationship, there are limited emergency facilities and housing providers do not always recognise that they have a duty towards LGBT+ survivors. Gay, bisexual and trans men are particularly affected by this, as options for this group are very limited with only a small number of projects offering refuge accommodation across England and Wales.

The London-based projects do not operate fully as refuges, though they will accept LGBT+ people fleeing domestic abuse by offering a very small number of medium-term spaces in a shared housing project for gay and bisexual men, or in a temporary LGBT+ night shelter. One study suggests that this lack of specialist provision may cause gay and bisexual men experiencing domestic abuse to rely on standard services for homeless people which are likely to fall short of their specific needs [23]. On the other hand, lesbian and bisexual women may have access to refuge spaces, though women-specific services might also be less equipped to understand their specific needs and/or they may feel marginalised. Studies show lesbian and bisexual women claim to have experienced homophobia and transphobia in various services when attempting to get help to secure a safe environment [15], [23].

The situation of trans and non-binary survivors can be particularly complex and in light of the recent controversies surrounding possible reform of the Gender Recognition Act (2004), significant barriers remain to trans and non-binary survivors accessing single-sex refuge accommodation.

Respondents noted that LGBT+ survivors often face unacceptable
challenges in accessing specialist refuge places. Advocates shared that LGBT+ clients are most likely to be discriminated, ‘at the end of the list’ and ‘dismissed’ when attempting to access safe, long-term accommodation.

“Some of the most shocking things we heard is LGBT+ clients, completely disbelieved when talking about their experience of violence to a housing provider. It almost feels like this group comes at the very end of the list when it comes to housing. We’ve seen cases where our clients were dismissed and treated very harshly and cruelly and it’s obvious from the correspondence with housing that they are not listening at all to what is the experience and housing needs, they are just looking for ways not to accept and house them.” LGBT+ Domestic Abuse Service Manager

In Manchester, LGBT Foundation’s domestic abuse project offers temporary dispersed accommodation to LGBT+ survivors. This is performed in partnership with social housing associations and aims to engage survivors with the service, whilst finding ways to move them on to more permanent accommodation. The organisation also has a budget for a ‘deposit and rent scheme’ where they can support survivors by providing assistance with the first month’s rent and any deposits.

In Brighton & Hove, RISE operates an LGBT+ refuge service with dispersed accommodation and floating support. This is performed in partnership with a local supported housing provider and is closely linked with RISE’s LGBT+ casework service and women’s refuge, thereby benefiting from their expertise, on-call system and use of premises. Some of the LGBT+ survivors supported by the LBT+ women’s refuge service are placed in the women’s refuge, while men and some women are placed in dispersed accommodation. This model strikes a service-user focussed balance, ensuring that the specialised needs of each group are met.

RISE’s service will also accept self-identifying women into their non-LGBT+ refuge. To build a safe space for trans survivors, RISE have taken proactive steps to build an understanding around the specific needs of trans survivors and ensure that an inclusive space is maintained for all.

“We accept LGB individuals and trans women into our main refuge within the single-person units, and while we’ve had
our LGBT+ refuge operational, have been able to provide some choice between the refuge-based support and dispersed housing support for these groups. However, on one occasion, a transwoman placed in the main refuge reverted to her previous masculine presentation, in both behaviour and dress, resulting in several women being triggered into their trauma response. This in turn negatively impacted the transwoman who also became very distressed. Because our LGBT+ refuge was operational at that time, we were able to support the transwoman to find alternative accommodation, which provided a safe and more contained environment for her.”
LGBT+ Domestic Abuse Service Manager

The service is relatively new and its funding precarious, having been lost and resurrected several times in the last three years.

4.4 PARTNERSHIPS AND CONSORTIA WORK

Partnerships are often an essential means to address LGBT+ domestic abuse. Even though partnerships operating in an under-resourced sector may pose a host of challenges [43], [53], specialist services are increasingly coming together, including across different regions, to establish specialist collaborations and consortia. Respondents noted that specialist services and programs are often encouraged, wherever practically feasible, to work in committed partnership so as to reduce duplication and hence ensure resource efficiency.

While recognising that working in partnership is rarely without challenges, respondents also noted that working jointly can help expand and diversify service provision and holistically address multiple and complex issues. By working as a consortia, it is possible to develop and maintain the specialist understanding and activities that will maximise the impact for LGBT+ people experiencing domestic abuse. There was also a shared recognition of the requirement for a more collective and coordinated approach in providing support for LGBT+ people experiencing domestic abuse.

Services enter partnerships for different reasons. Some partnerships were developed to address as specific target group, such as LGBT Jigsaw.
Services also often come together in recognition that LGBT+ survivors with increasingly complex needs are approaching services at a time when service providers are facing increased resource-related pressures.

**LGBT JIGSAW**

LGBT Jigsaw is a partnership project led by Stonewall Housing. It was set up in 2008 to connect young LGBT+ people who were homeless or having trouble at home, with other LGBT+ specialist organisations such as Galop (providing community safety and domestic abuse) and the Albert Kennedy Trust (providing emergency accommodation, information and advice). The partnership offers a range of services needed to prevent and address youth homelessness. The program can also support in addressing underlying problems such as mental health and emotional issues, offer access to counselling and group support, benefit advice, debt support and financial literacy development, as well as employment, education and training support. LGBT Jigsaw is part of the London Youth Gateway, led by New Horizon Youth Centre, and is the only pan-London programme funded by London Councils to tackle youth homelessness.

**LGBT DOMESTIC ABUSE PARTNERSHIP (DAP)**

The LGBT DAP, led by Galop, brings together four specialist organisations (Galop, London Friend, Stonewall Housing and Switchboard) to provide a coordinated response to domestic abuse for LGBT+ survivors in the Greater London Area. The service is acknowledged internationally as being an example model of best practice, as it was one of the first partnerships to provide comprehensive services to LGBT+ survivors whose needs were not being met by mainstream organisations. Since it was set up in 2009, one-to-one casework services in London have developed considerably under the LGBT DAP. The partnership also offers one-to-one counselling and group work as a way of supporting survivors, and has been successful in generating much needed evidence and information around the domestic abuse affecting LGBT+ communities. The LGBT DAP acts as a specialist resource for LGBT+ people and attempts to overcome the issue of secondary victimisation/discrimination when LGBT+ people present to mainstream services. One of its main achievements is being able to work with all levels of risk and effectively tackle multiple needs such as homelessness, immigration and substance...
The LGBT DAP also has an active role in linking survivors to borough-based services and raising awareness of LGBT+ domestic violence and abuse (DVA), for example, liaising with MARAC and DVA Borough Leads.

“Partners in the LGBT DAP have enhanced and influenced each other’s work. There’s not that many examples of long-term partnership between LGBT+ organisations. Ultimately we’ve been able to meet and to speak as one voice towards not only funders, but stakeholders and partners. I think in many respects the DAP has provided a model for other kind of partnerships to follow. The reasons why the DAP has been able to work well, it’s because we’ve been supporting each other’s work and not replicating each other’s work.” LGBT DAP Coordinator

Services may also be strategically pragmatic and enter a partnership or a network in order to provide specialist LGBT+ provision that would otherwise be difficult to commission and fund as a ‘stand-alone’ project. These partnerships can bring added value through not only providing specialist services and but working with and learning from domestic abuse/VAWG partners.

**ANGELOU TRI-BOROUGH VAWG PARTNERSHIP**

The Angelou Tri-borough VAWG Partnership based in London brings together LGBT+ domestic abuse services, the VAWG sector and statutory actors, and provides advocacy for LGBT+ survivors of domestic abuse in the London boroughs of Kensington and Chelsea, Hammersmith and Fulham, and Westminster.

This collaboration is focused on developing strong and sustainable partnerships across the boroughs. Into what is primarily a VAWG setting, Galop brings an additional understanding of intersectional identities and the needs of LGBT+ survivors. This supports a broadened understanding of gender-based violence and domestic abuse, as they affect LGBT+ communities. This in turn improves the diversity, choice and access to specialist services in London, which is key to survivors feeling able to disclose violence and access appropriate support.
Another example of a specialist partnership is a project called ‘Beyond Abuse’. The project ran from June 2017 to October 2018 and was an LGBT+ accommodation-based project involving three partners, RISE (Brighton & Hove), Stonewall Housing (London) and LGBT Foundation (Manchester). The project has proved to be an effective national, multi-agency partnership, with referral numbers in all three geographical areas exceeding targets [54]–[56]. The success of this project demonstrates the need for similar approaches.

4.5 FUNDING AND COMMISSIONING

There is evidence that current demand for LGBT+ specialist services is increasing. Demand is likely to continue to grow as all services have been investing more resources in outreach and promotion to raise awareness within our communities of the issues and support available. In their recent report Galop for example reported a 118% increase in service use from 2013 to 2017 [11].

Despite this, funding and commissioning remain major challenges for the sector. LGBT+ domestic abuse services are typically left out of commissioning and funding frameworks. Even though the experiences of services are not homogenous in this area, many have had to function without consistent, sustainable funds.

In addition, too often specialist services are short- and fixed-term funded. Typically, the duration of project funding ranges from 6 to 12 months. This can be counter-productive as it leaves little time for recruitment, actual implementation and in most cases, no time for evaluation and impact measuring. It also does not allow organisations delivering a program to generate enough evidence on good practice to allow them to re-bid when it comes to their local commissions. For example, while the Ministry of Housing, Communities and Local Government (MHCLG) fund has provided a much needed opportunity to increase the provision of specialist accommodation in order to meet the needs of LGBT+ survivors of domestic abuse in Brighton & Hove, London and Manchester, the areas were only funded for 12 to 15 months which has been a barrier for some of the respondents.

“While we were really excited to receive the funding [The (MHCLG) Domestic Abuse Fund], it is still a short-term funding which has been a barrier in terms of setting up the project, staff recruitment and securing accommodation. This has led to all three projects starting the project later than planned which has had an effect on the delivery of the project and its cohesiveness” LGBT+ Domestic Abuse Service Manager
Interviews also suggest that commissioning processes generally fail to recognise that the systems of recruitment and staff training between domestic abuse and LGBT+ specialist services are different. LGBT+ domestic abuse programs require staff to be not only appropriately trained and have a good understanding of domestic abuse issues, but also to have a specialist knowledge and understanding of LGBT+ issues. This requirement for specialism and high levels of expertise often extends the recruitment process.

“The skills and the specialism that is required makes LGBT+ specialist workers so hard to recruit. They need to have a good knowledge of complexities around domestic abuse, the LGBT+ communities, local and regional services, national mental health system and criminal justice system. Basically you are looking for a mini professional in everything.” LGBT+ Domestic Abuse Service Manager

The current commissioning frameworks have created great insecurity, especially for LGBT+ specialist refuge providers and those with a focus on accommodation-based provision. These services noted specific challenges related to funding specialist refuges and long-term housing projects.

“Having sporadic funding that only lasts 12 months each year, if so long, to run a refuge, is absolutely unheard of. We put in a lot of time and effort to build relationships with our local and regional partners and supporters, housing providers and other agencies and then it all goes down the drain once the funding is gone.” LGBT+ Domestic Abuse Service Manager

Commissioning processes are also failing LGBT+ specialist services since they advantage larger, well-resourced services, involve complex tenders and require larger reach in terms of numbers. The processes also fail to recognise the added ‘social’ value/resources that the LGBT+ ‘by and for’ sector brings within the tender process. As a consequence, LGBT+ specialists providers are always at a disadvantage.

LGBT+ domestic abuse services largely sustain themselves by the support of trusts and foundations, and spend a considerable amount of time and resources looking for opportunities to secure continuity and sustainability of their programming. Finally, while some of the specialist services have been in place for over a decade, not enough have been documented and none independently evaluated. The lack of information on efficiency and impact makes it additionally challenging for services to assess outcomes, plan follow-up and present their case before funders and commissioners.
Below are our recommendations relevant to statutory and voluntary sector service providers, policy makers, funders and commissioners. The recommendations highlight strategic and practical initiatives to strengthen future responses for LGBT+ victims and survivors of domestic abuse.

1 **Ensure that LGBT+ people’s needs are clearly visible in the national, regional and local policy frameworks**

There are currently no standalone policy statements from the central governments on the issue of LGBT+ people and domestic abuse, though the refreshed violence against women and girls (VAWG) strategy\(^28\) pledges to develop further measures to support LGBT+ survivors. Having had a lived experience of inequity and injustice within the law, policy and practice, it is crucial that LGBT+ people are visible and included.

We recommend the central government (England) should:

1. Establish and maintain ongoing consultation with LGBT+ experts and advocates to ensure the needs of LGBT+ survivors are maintained and represented in the relevant national, regional and local policy frameworks.

2. Enhance policy statements on the issue of LGBT+ people and domestic abuse in the National Statement of Expectations.

3. Require commissioners to set out measures ensuring those who identify as LGBT+ are able to access both specialist LGBT+ services and non-LGBT+ specialist support, which are appropriately equipped to meet their needs.

Establish and maintain ongoing consultation with LGBT+ experts and advocates to ensure the needs of LGBT+ survivors are maintained and represented in the relevant national, regional and local policy frameworks.
2 Improve national monitoring mechanisms

Official statistics do not systematically publish and/or disaggregate data by sexual orientation and gender identity relating to experiences of LGBT+ people with domestic and intimate partner violence. Available statistics also do not record the sex of the perpetrator. As a result, there is no indication of whether any abuse suffered was from a current or former heterosexual or same sex relationship.

We recommend The Office for National Statistics and The Crime Survey for England and Wales should improve collection and reporting of data relating to:

1. Sexual orientation and gender identity of the perpetrator and victim.
2. The gender and relationship of the perpetrator and victim.
3. The better tracking of outcomes in domestic abuse cases/intervention.
4. Linking data to enable a better understanding of the interactions/relationships between domestic abuse and other types of offending.

Improve collection and reporting of data relating to sexual orientation and gender identity of the perpetrator and victim.
3 Improve access to LGBT+ specialist domestic abuse services

The specialist LGBT+ sector has developed innovative solutions and has played an essential part in addressing LGBT+ domestic abuse. LGBT+ specialist organisations also play a critical role in providing knowledge and understanding about transforming services, yet LGBT+ specialist provision across England and Wales is inconsistent and often lacks sustainability.

We recommend that central regional and local governments, including commissioners and funders recognise the need for and value of LGBT+ specialist services and the role these services have in supporting LGBT+ survivors, and in doing so they:

1. Make long-term funding available for specialist organisations, with the expectation that specialist programs need time for recruitment and training, planning, supervision and evaluation in order to provide meaningful services.

2. Support the documentation and evaluation of specialist LGBT+ provision with respect to accessibility, effectiveness and demonstrating national, regional and local need.

3. Encourage local authorities to work together at a regional level to support the creation and expansion of specialist LGBT+ programs. Where this is not possible, consider commissioning LGBT+ specific posts within existing domestic abuse services.

4. Develop specific measures to ensure there is sustainable and accessible support for high-risk LGBT+ survivors, including IDVA advocacy, refuge and therapeutic provision.

Make long-term funding available for specialist organisations, with the expectation that specialist programs need time for recruitment and training, planning, supervision and evaluation in order to provide meaningful services.
All services are responsible for ensuring that victims and survivors of domestic abuse can access safe, quality support. However, many LGBT+ survivors have difficulty finding culturally competent and non-traumatising support due to the barriers that exist at the level of service delivery and provision.

We recommend service providers should:

1. Review their monitoring standards and include questions about sexuality and gender identity. This should be a reporting requirement. Training on how and when to ask these questions and about assumptions around sex and gender should be included in tailored training packages.

2. Build knowledge and capacity to meet the needs of diverse LGBT+ victims and survivors. Tailored training packages should be delivered by specialist LGBT+ domestic abuse services or experts.

3. Apply a nuanced approach and develop support which is person-centred, recognising the different and intersectional needs of survivors.

4. Recognise the additional barriers in access to services and increase the accessibility for young and elderly LGBT+ survivors, trans survivors, those with a BME background and those with no recourse to public funds.

5. Be explicit and clear that they are inclusive and provide support to LGBT+ survivors.

6. Establish close links with specialist LGBT+ services, be able to signpost and make informed referrals. Services should also consider facilitating mutual support and other opportunities such as reciprocal training and awareness raising.

Domestic abuse services should establish close links with specialist LGBT+ services, be able to signpost and make informed referrals. Services should also consider facilitating mutual support and other opportunities such as reciprocal training and awareness raising.
Establish a national point of contact to raise awareness and provide capacity building to statutory and voluntary services in improving their responses to LGBT+ survivors

While the domestic abuse services have developed effective practical responses, many are struggling to understand the distinct nature of abuse as experienced by LGBT+ people. Services might buy into myths and misconceptions around LGBT+ domestic abuse, struggle to identify accurately who is doing the harm or provide LGBT+ appropriate support.

To address this barrier central government (England) should:

1. Promote building local, regional and national capacity in the area of LGBT+ domestic abuse, in statutory and voluntary services.

2. Support and fund a national initiative to increase capacity in domestic abuse and LGBT+ services to do the following:
   a) Meet the need for domestic abuse advocacy in their communities.
   b) Collaborate with and support local domestic abuse programs and other institutions coming into contact with LGBT+ victims and survivors.

3. Document, evaluate and disseminate existing tools and resources for supporting LGBT+ people experiencing domestic abuse.

4. Facilitate the exchange of knowledge, expertise and research by convening conferences, seminars and other events that include LGBT+ community organisations and domestic abuse experts.

5. Support and fund a national campaign targeted at different sectors of LGBT+ communities to increase the debate and knowledge within LGBT+ communities about domestic abuse and healthy relationships.
LGBT+ specialist programs have worked to address domestic abuse for many years and have developed innovative and culturally relevant strategies, but the capacity to document and disseminate the evidence, insights and learning from these strategies has been lacking.

We recommend central (England) and local governments should commission and fund research that:

1. Prioritises evidence-informed practices already developed to meet the needs of LGBT+ survivors.

2. Furthers existing research documenting LGBT+ people’s needs and barriers in access to services, with a specific focus on young and older LGBT+ populations, trans and LGBT+ BME victims and survivors.

Further existing research documenting LGBT+ people’s needs and barriers in access to services, with a specific focus on young and older LGBT+ populations, trans and LGBT+ BME victims and survivors.
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