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**Barriers to Making Referrals of Lesbian, Gay, Bisexual and Transgendered (LGBT) victim/survivors to the MARAC and Recommendations for Improvement: A Study of IDVAs, MARAC Coordinators and PPU Detective Inspectors Within the Northumbria Police Force Area.**

**Dr Catherine Donovan**

**July 2010**

**Funded jointly by Gateshead Domestic Violence Partnership and the University of Sunderland.**

## **Executive Summary:**

This report presents the findings from a study conducted between March and May 2010 exploring why so few Lesbian, Gay, Bisexual and Transgendered (LGBT) victim/survivors of domestic violence are referred to Multi-Agency Risk Assessment Conferences; and recommendations about how this might be improved. Three command areas within the Northumbria Police took part involving MARAC coordinators and IDVAs from each command areas as well as a senior police officer from two Public Protection Units (PPU).

## **Findings**

### ***Numbers of LGBT referrals to the MARAC***

A total of approximately 1848 victim/survivors across the three command areas have been referred to a MARAC since they began in each area. Of these, 16 cases were identified as lesbian or gay victim/survivors, which is just less than 1% of the total (0.87%) and in line with the national picture (the proportion varied across the three command areas from the lowest in Sunderland [0.54%] to the highest in Newcastle [1%]). Most cases (N=12) referred were lesbian victim/survivors. No cases were identified as involving either trans or bisexual victim/survivors.

### ***Identifying barriers to referrals***

Findings suggest that there are three core factors that act as barriers to LGBTY victim/survivors being referred to the MARAC: lack of recognition of domestic violence in LGBT relationships by LGBT victim/survivors; lack of recognition of and understanding about LGBT relationships and therefore domestic violence within them by police and other practitioners; a gap of trust between LGBT victim/survivors and mainstream agencies, particularly the police, which prevents LGBT victim/survivors reporting domestic violence. Underpinning these factors was the recognition that there is a dominant model of domestic violence that identifies heterosexual women as victim/survivors and heterosexual men as perpetrators and which permeates the beliefs and assumptions of LGBT victim/survivors, mainstream and specialist domestic violence agencies and the MARAC process.

The impact of these issues of recognition and trust on referrals of LGBT victim/survivors into the MARAC process can be seen at four stages at each of which LGBT victim/survivors may drop out:

1. Whilst the MARC process, including the use of the CAADA risk indicator checklist was believed to provide a way of identifying and assessing the risk of LGBT victim/survivors, respondents, particularly IDVAs, were concerned that training in the use of the checklist with LGBT victim/survivors is needed in order to facilitate an appropriate assessment of risk.
2. Referrals to the MARAC are not only based on a count of risk indicators. Issues of capacity have led to a further criterion being used based on the numbers of previous police reports that have occurred in the six months prior to the current incident. Since LGBT victim/survivors are less likely to report to the police they are also less likely to meet this criterion.

3. Most referrals to the MARAC are made by the police. Again, since LGBT victim/survivors are less likely to report their experiences to the police they are less likely to be referred to the MARAC.

4. None of the core members of the MARACs have a specialist LGBT brief and only the Newcastle MARAC invites MESMAC (a community support service for gay and bisexual men) to the MARAC when appropriate.

## **Recommendations**

Recommendations can be seen to fall into two categories: those that are intended to tackle issues of recognition and trust and those that are intended to address the MARAC process:

### ***Recognition and trust***

- Awareness raising is needed within LGBT communities about domestic violence in LGBT relationships and where to go for help/support.
- Awareness raising is needed within core MARAC and other support agencies about LGBT issues so that LGBT relationships can be identified and asked about in appropriate ways.
- Publicity campaigns and agency literature is needed that both avoids reinforcing the exclusively heterosexual model of domestic violence and explicitly includes the possibility of LGBT domestic violence.
- Training for core MARAC and other support agencies about domestic violence in LGBT relationships so that they can be encouraged to use the risk indicator checklist to identify and refer LGBT victim/survivors to the MARAC when appropriate. This training should include building confidence in practitioners to:
  - use their judgement and use the free text field if they feel that the risk is high but not adequately identified as such by a count of ticks;
  - identify the victim/survivor and the perpetrator in an LGBT relationship.
- Awareness raising and training is needed among agencies on the 'periphery' of the MARAC, and other partner agencies who may be receiving disclosures about LGBT domestic violence. This training should include:
  - LGBT relationships and related issues
  - the MARAC and the risk indicator checklist and how to make referrals
  - LGBT domestic violence and how to make referrals

### ***The MARAC process***

- Some officers in each PPU to be given specialist LGBT domestic violence training who could then act as a resource for MARAC members and other agencies about LGBT victim/survivors and what help/support is available.
- In cases of LGBT victim/survivors the number of previous reports as a further criterion for MARAC referral should be reconsidered. Since LGBT domestic violence reporting is disproportionately low it may be worth considering the possibility (on a case by case basis) that an LGBT victim/survivor who *has* reported might be at high/very high risk because of a

recent escalation in abuse which has resulted in levels of fear that has outweighed their fears about being outed, confidentiality or a possibly inappropriate response.

## Introduction:

This report presents the findings from a study conducted between March and May 2010 exploring why so few Lesbian, Gay, Bisexual and Transgendered (LGBT) victim/survivors of domestic violence are referred to Multi-Agency Risk Assessment Conferences (MARACs); and recommendations about how this might be improved. The evidence suggests that domestic abuse is a substantial problem in LGBT relationships<sup>1</sup> and recently the government has recognised this and provided a framework within which LGBT victim/survivors can be safeguarded. The Home Office definition of domestic abuse which identifies the types of behaviours that can be abusive (physical, emotional, financial and sexual) also recognises that any adult can be affected in their relationship, or within their family, regardless of gender or sexuality and in the *Domestic Violence, Crime and Victims Act 2004* adult same sex relationships are afforded the same protections as heterosexual couples. Whilst, there is evidence that efforts are being made across the country and regionally to respond appropriately to LGBT victim/survivors<sup>2</sup> the national picture suggests that the numbers of LGBT victim/survivors of domestic violence being referred to MARACs is disproportionately low. During the 12 months to December 2008 less than 1% of those referred to MARACs nationally were identified as being LGBT victim/survivors.<sup>3</sup>

## Domestic Abuse in LGBT relationships

Other research<sup>4</sup> has indicated that those in same sex relationships experience the same range of abuses and risks as heterosexual women, including post separation abuse. In addition LGBT victim/survivors can also experience abuses that are related to their sexuality. For example, victim/survivors have reported threats to out<sup>5</sup> victim/survivors to their family, faith groups and employers but in addition it has been reported that victim/survivors have been kept isolated from LGBT networks or the scene by perpetrators who insist that *they* fear being outed or who denigrate the scene and /or other potential LGBT friends.<sup>6</sup> The impact of all of these abuses is similar to that which heterosexual women report: that the behaviour and movements of victim/survivors are controlled and that they are systematically undermined and made to feel that they are responsible for what is happening. However, what has also been clear from this research is that often LGBT victim/survivors do not recognise their experiences as domestic violence and, as a result, do not report it. Key reasons for this are that the public story about domestic violence suggests it is a

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<sup>1</sup> Donovan, C.; Hester, M.; Holmes, J.; McCarry, M. (2006) Comparing Domestic Abuse in Same Sex and Heterosexual Relationships. University of Sunderland; Robinson, A.; and Rowlands, J. (2006) 'The Dyn Project: Supporting Men Experiencing Domestic Abuse'. <http://tinyurl.com/ahwow9>.

<sup>2</sup> See Appendix 1 for a list of resources available nationally.

<sup>3</sup> Rowlands, J.; and Egan, R. 'Effective responses to Lesbian, Gay, Bisexual and Trans (LGBT) people experiencing domestic abuse' in *Safe. The Domestic Abuse Quarterly*, Issue 29, Spring 2009: 4-7

<sup>4</sup> Donovan, C.; Hester, M.; Holmes, J.; McCarry, M. (2006) Comparing Domestic Abuse in Same Sex and Heterosexual Relationships. University of Sunderland; Robinson, A.; and Rowlands, J. (2006) 'The Dyn Project: Supporting Men Experiencing Domestic Abuse'. <http://tinyurl.com/ahwow9>.

<sup>5</sup> Being 'outed' occurs when somebody's sexuality is revealed to a third party without their permission. In the context of domestic violence the threat to out somebody will be effective if the victim/survivor fears that being outed would lead to negative consequences for them and/or their children. On the other hand 'coming out' is when somebody who is LGBT is able to reveal their sexuality, typically, because they want to.

<sup>6</sup> See Appendix Two for a list of the kinds of behaviours that may rely on using sexuality as a means of control.

problem for heterosexual couples; that it is a problem of physical violence; and that it is a gendered problem that occurs when a bigger, stronger partner in a relationship (the man) is violent/abusive to the smaller, weaker partner (the women). LGBT victim/survivors are far less likely to report their experiences to the police and support agencies than heterosexual women and typically seek more informal or private means of support through friends, family and/or counselling or therapy.<sup>7</sup>

### The Study

The aim of the study was to ascertain the local picture for numbers of LGBT victim/survivors being referred to the MARAC, to explore the barriers preventing LGBT victim/survivors being referred to the MARAC and make recommendations to improve the referral rate. During March – May 2010 four Independent Domestic Violence Advocates, two heads of Public Protection Units and 2 MARAC Coordinators in Newcastle, Gateshead and Sunderland were interviewed. One interview was conducted jointly with a senior IDVA and the deputy head of the PPU. All agreed for the interviews to be recorded.

### The Local Referral Rate of LGBT victim/survivors to the MARAC:

Across the three command areas included in this study, MARACs meet fortnightly and approximately 1848 victim/survivors have been referred to a MARAC since they began in each area.<sup>8</sup> Of these, a total of 16 cases have been identified as lesbian or gay victim/survivors which is just under 1% of the total (0.87%) and in line with the national picture. However there were variations on this rate across the three command areas, from 0.54% in Sunderland to 1% in Newcastle. Most cases (N=12) referred were identified as lesbian victim/survivors. No cases were identified as involving either trans or bisexual victim/survivors. Table 1 shows the breakdown for each area.

**Table 1: A Breakdown Of Each Command Area Showing What Proportion Of Cases To The MARACs Are Of LGBT Victim/Survivors.**

Command Area	Date of 1 <sup>st</sup> MARAC	Cases Considered Fortnightly	Total Number of Cases	Numbers (%) of LGBT victim/survivors referred
Gateshead	October 2007	10	580	5 (0.86%)
Newcastle	November 2007	15	900	9 (1%)
Sunderland	July 2008	8	368	2 (0.54%)
Total	82 months	33	1848	16 (0.87%)

<sup>7</sup> Donovan, C.; Hester, M.; Holmes, J.; McCarry, M. (2006) Comparing Domestic Abuse in Same Sex and Heterosexual Relationships. University of Sunderland.

<sup>8</sup> This is approximate because the MARACs are relatively new in each area and the numbers of cases referred may not always have been consistent.



## Findings

All respondents believed that the MARAC process, including the use of the CAADA risk indicator check list, make it theoretically possible for LGBT victim/survivors to be referred into MARAC. The fact that there had been, albeit, a few referrals was offered as evidence for this. In addition, all of the IDVAs believed that the CAADA risk indicator checklist, if used sensitively, enables practitioners to focus on and assess risk regardless of the gender or sexuality of the victim/survivors. IDVAs believed that domestic violence in LGBT relationships should be understood in the same way as in heterosexual relationships i.e. based on issues of power and control.

An analysis of the accounts given by respondents highlight that barriers to making referrals of LGBT victim/survivors of domestic abuse to the MARAC can be understood to coalesce around three key factors:

- i. Lack of recognition of domestic violence in LGBT relationships by LGBT victim/survivors;
- ii. Lack of recognition of and understanding about LGBT relationships and therefore domestic violence within them by police and other practitioners;
- iii. A gap of trust between LGBT victim/survivors and mainstream agencies, particularly the police, which prevents LGBT victim/survivors reporting domestic violence.

These factors then have an impact on whether and how LGBT victim/survivors are referred into the MARAC process.

What follows is a discussion first about issues of recognition and trust and then how these impact on the MARAC process and referrals of LGBT victim/survivors into the process.

### ***Recognition and Trust***

Underpinning factors of recognition and trust was the general feeling that LGBT victim/survivors have been ill served by the dominance of the model of domestic violence that depicts heterosexual women as victim/survivors and heterosexual men as perpetrators. Whilst this was recognised as reflecting the evidence that heterosexual women are most often the victim/survivors of domestic violence it was also understood that there needs to be ways found to convey the message that domestic violence does occur in other relationships, that men can be victim/survivors and that women can be perpetrators.

The dominant model permeates the beliefs and understanding of both LGBT victim/survivors and practitioners in police, specialist domestic violence and other support agencies and can prevent recognition of domestic violence both by LGBT victim/survivors and police and other practitioners. Some respondents expressed their belief (supported by the research evidence<sup>9</sup>) that LGBT

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<sup>9</sup> Donovan, C.; Hester, M.; Holmes, J.; McCarry, M. (2006) *Comparing Domestic Abuse in Same Sex and Heterosexual Relationships*. University of Sunderland.; Donovan, C. and Hester, M. "I hate the word 'victim': an exploration of recognition of domestic violence in same sex relationships' *Social Policy and Society* 9(2) April 2010

victim/survivors do not recognise their experience as domestic violence and therefore do not report it or seek help from mainstream or specialist agencies:

[There is a] perception within the same sex community ... that it's a relationship problem and not a power and control problem  
(MARAC Partnership Officer)

The dominance of the heterosexual model is reinforced in domestic violence public awareness campaigns that routinely depict images of female victim/survivors of male perpetrators; and the publicity material of many agencies that use gendered language, or, if their language is gender neutral, do not explicitly mention the possibility of LGBT domestic violence. In addition there are still myths that surround domestic violence in LGBT relationships which include assumptions that violence between two women or two men is mutual, an equal fight or that it is not 'as bad' as that between a woman and a man. This may result in professionals, including the police, not recognising domestic violence in an LGBT relationship.

Another aspect of recognition concerns the ability and willingness of police and other practitioners to identify the sexuality of victim/survivors or to make it possible for LGBT victim/survivors to come out to them. The fact that victim/survivors may be reluctant to come out to the police or other practitioners may mean that professionals may not realise that the victim/survivor is in an LGBT relationship and that they are a victim/survivor of domestic violence. There was some acknowledgement from the police about this but most IDVAs suggested that some police officers were not as sensitive as they might be and do not always identify when an incident might be a domestic violence incident. If the participants in an incident do not come out, respondents questioned whether it would always occur to the attending police officer that this might be an LGBT relationship, especially if the incident took place in a public place when such an incident might be perceived as two friends fighting.

This unwillingness to come out raises the issue of trust. All respondents suggested that it is difficult for LGBT victim/survivors to report their experiences because they may be wary about coming out and fear they will not receive a sympathetic response. There was agreement that, particularly for the police, there may be a gap of trust between themselves and LGBT victim/survivors:

There's probably a bit of mistrust, distrust of the police for one. I mean there has been and there is ongoing work to try and break those barriers down but there's still this perception by some people that the response that they'll get from the police either might not be considered tolerant etc to their, to that victim and that particular individual's needs so there is still that sort of stereotypical image out there which we're trying to change. (PPU)

The practice of making a 'double arrest' in cases where it is not 'obvious' who the victim/survivor or perpetrator is will not help to bridge the gap of trust between LGBT victim/survivors of domestic violence and the police. Some IDVAs felt that this practice may happen more often in same sex relationships where the police feel less confident about identifying the victim/survivor and the

perpetrator.<sup>10</sup> However, this can potentially criminalise the victim/survivor and put them off reporting their experiences again.

Another fear expressed by LGBT victim/survivors about coming out is related to issues of confidentiality. All respondents believed that the MARAC process is confidential process and bound by agreements that are as sound as they can be made – without being able to give 100% guarantees - but that this should give reassurance to LGBT victim/survivors.

### ***Impact of issues of recognition and trust on the MARAC Process***

The impact of issues of recognition and trust on referrals of LGBT victim/survivors into the MARAC process can be seen in four ways: appropriate use of the CAADA risk indicator checklist, how referrals are made to the MARAC, who makes referrals to the MARAC and who sits on the MARAC. It can be seen that at each stage LGBT victim/survivors may drop out of the process.

#### *Appropriate use of the CAADA risk indicator checklist*

Whilst the CAADA risk indicator checklist was considered appropriate for any victim/survivor of domestic violence regardless of gender or sexuality, some concerns were raised about the skill and confidence base of practitioners who may be using it with LGBT victim/survivors. Northumbria has not adopted the CAADA –DASH risk indicator checklist. Reasons for this were two-fold. First, and primarily, the force had only recently invested in an IT system based on the 20 question checklist. Second, the force had decided that the existing checklist did not lose anything by not having the extra questions included in the CAADA-DASH checklist. Some IDVAs thought this was a cause for concern because the CAADA DASH risk indicator list gives more examples of the types of risk being asked about which help those completing the list to ask about behaviours that perhaps have not yet been discussed with victim/survivors:

Like the simple point ‘do you feel like you’re being stalked?’ Say that to somebody and they could think you mean a stranger or their partner’s following them round all the time but the other [CAADA DASH] model says ‘are you getting constant text messages? Are you being harassed on the telephone?’ which widens it and makes it clearer. So I think if you use the list but broaden it ... if you’re aware of the issues then you can make the issues fit the questions.

(IDVA)

Whilst this example would apply equally in the case of heterosexual women concerns were expressed that the checklist was geared up for heterosexual women and unless practitioners had awareness about LGBT relationships and domestic violence they may not use it appropriately.

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<sup>10</sup> See Appendix Three for some guidance on this for police and Appendix Four for guidance for other practitioners; [http://www.caada.org.uk/practitioner\\_resources/Briefing%20on%20LGBT%20domestic%20abuse.pdf](http://www.caada.org.uk/practitioner_resources/Briefing%20on%20LGBT%20domestic%20abuse.pdf)

An example given was by an IDVA who pointed out that the risk indicator list is heavily biased towards physical violence (use of weapons, threats to kill, prevalence of injuries, threats to strangle, smother, choke, fear of further violence or injury; and the use of the word 'violence' rather than 'abuse' which can lead people to think about physical violence). Emotional and/ or psychological abuses other than that related to jealousy and isolation are not included which means that, unless practitioners are aware of the specific ways in which gender and sexuality can be used to control and undermine victim/survivors in LGBT relationships,<sup>11</sup> information about this may not be elicited.

I think this risk indicator leads towards violence, the use of violence. It briefly touches on sexual, well there's one question about sexual violence and I think the rest of it is about physical violence and obviously it was geared up for heterosexual relationships as being the normal power and control dynamic between the heterosexual man and the heterosexual woman and that's why [there is the question] 'is the victim/pregnant?'  
(IDVA)

All of the respondents pointed to the question about pregnancy not being relevant for gay male couples. In addition the question about harm to 'family pets' is not asked and in the case of some same sex couples this may have some significance where pets are an important part of the relationship and household. Training on and awareness about LGBT relationships and domestic violence and the MARAC process including the CAADA risk indicator checklist was identified as crucial to improving responses to LGBT victim/survivors who might otherwise not be identified and referred into the MARAC.

#### *How referrals are made to the MARAC*

Not all cases assessed as high/very high risk are referred into MARAC. Respondents were keen to make clear that this did not mean that referrals would not be engaged with and the necessary actions taken to address their safety. However, issues of capacity meant that a further screening of MARAC referrals within PUs take place which takes into account:

- Numbers of previous reports: four or more reports in the previous six months make cases a priority for MARAC referral
- Making an assessment of whether anything new can be added to the action/safety plan by a referral i.e. where the victim/survivor is already engaged with appropriate core agencies a referral to MARAC may be deemed unnecessary
- Occasions where action needs to be taken with more urgency and cannot wait a fortnight for a MARAC meeting

Since LGBT victim/survivors of domestic violence are reluctant to report to the police this means that they are unlikely to meet the criterion that requires there to be four or more previous police reports in the preceding six months.

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<sup>11</sup> See Appendix Two for a list of ways in which sexuality and gender may be used to control an LGBT victim/survivor.

### *Who makes referrals to the MARAC*

The police in all three command areas make most of the referrals to the MARAC. Whilst respondents felt that this was changing slowly there was acknowledgement that if very few LGBT victim/survivors are reporting to the police and/or the police are not always able to identify LGBT victim/survivors when they attend incidents, referrals to the MARAC will be low. Conversely, not many referrals to MARAC were being made by agencies other than the police. It may be that LGBT victim/survivors are using other agencies for support but that these agencies do not know about the MARAC process and are therefore not making appropriate referrals.

I don't know how far the MARAC's gone out to other support agencies and whether they're aware of the MARAC process and how to be able to refer in. They could go in via Victim Support, Women's Aid or MESMAC, they're like a point of contact if you like and other agencies can go to them and say we've got this client who's disclosed x, y and z and that would be a way of getting them in. How far that's gone I'm not sure. I'd like to think that everyone's aware. (PPU)

### *Which agencies attend the MARAC*

The core member agencies to the MARACs do not have a specialist LGBT brief. Most respondents said that this should not have a negative impact on the service provided for LGBT victim/survivors. Police officers or citizens working as MARAC coordinators within the police force said that the police had been trained in diversity issues and should be able to respond appropriately to LGBT domestic violence situations and there was a general feeling that all agencies should be able to respond appropriately to LGBT victim/survivors.

Every agency should be able to respond to LGBT issues because if they're not then they're not embracing society and [if that is occurring within] the statutory agencies that would suggest a failing in their diversity agenda.  
(PPU)

However, there was also a consensus about the need to include LGBT agencies as members of the MARACs. In one command area, MESMAC<sup>12</sup> was invited to the MARAC when necessary and appropriate but in both other command areas this was not the case. Apart from Newcastle, both other command areas were not aware of any local LGBT agencies other than MESMAC that they could approach to attend the MARAC. Respondents in Gateshead and Sunderland, especially, were aware that there were few LGBT agencies they knew to invite onto the MARAC and that there were few opportunities or forums where LGBT voices were heard within the domestic violence field. This meant that addressing issues for LGBT victim/survivors was not on the agenda. This piece of research was identified by a couple of respondents as a 'wake-up call' which would cause them to think about the issues over the coming year.

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<sup>12</sup> MESMAC is a community support service for gay and bisexual men with offices in Newcastle and Middlesbrough but providing services across the North East of England.

In addition, respondents also pointed to the need for the MARAC to reach out to other support agencies who may be receiving disclosures from LGBT victim/survivors. This was recognised as necessary in order to meet the needs of other victim/survivors, for example from Black and ethnic minority groups who were also identified as being underrepresented at the MARAC. It was also clear that transgender people were almost invisible as potential victim/survivors of domestic violence. Gateshead was producing a handbook about the MARAC process to circulate across health and social care agencies in the voluntary and statutory sector in order to promote its use and identify training needs and it was hoped that this might have some impact on improving the membership of the MARAC and referrals of victim/survivors from these hard to reach groups. However, it was also identified that, outside Newcastle there are very few LGBT agencies that exist and that have the capacity to engage with the MARAC process.

### **Conclusions and Recommendations**

The introduction of the MARAC was universally recognised as a positive step forward in the response to domestic violence. However, all also acknowledged that the process is relatively new and as such has got room to develop. In considering LGBT victim/survivors of domestic violence IDVAs felt confident that the CAADA risk indicator checklist could be, and is, used with any victim/survivors of domestic violence regardless of sexuality or gender, however, the disproportionately low numbers of LGBT victim/survivors referred to the MARAC is a cause for concern.

The core findings that the police make most referrals to the MARAC, that referrals are subject to an additional criterion based on numbers of previous police reports and that LGBT victim/survivors are far less likely to report to the police than heterosexual female victim/survivors point to the need for action to be taken at three levels: within LGBT communities to raise awareness about domestic violence and increase their confidence in the police and other mainstream agencies so that they report their experiences and seek help; within the police and other agencies to improve their confidence and skills in first of all identifying LGBT relationships and second identifying domestic violence within them; within the MARAC process to ensure that LGBT victim/survivors receive an appropriate response. More specifically recommendations for improvement are:

- Awareness raising is needed within LGBT communities about domestic violence in LGBT relationships and where to go for help/support
- Awareness raising is needed within core MARAC and other support agencies about LGBT issues so that LGBT relationships can be identified and asked about in appropriate ways.
- Training for core MARAC and other support agencies is needed about domestic violence in LGBT relationships so that they can be encouraged to use the risk indicator checklist to identify and refer LGBT victim/survivors to the MARAC when appropriate. This training should include building confidence in practitioners to:
  - use their judgement and use the free text field if they feel that the risk is high but not adequately identified as such by a count of ticks.
  - identify the victim/survivor and the perpetrator in an LGBT relationship.

- Awareness raising and training is needed among agencies on the ‘periphery’ of the MARAC, and other partner agencies who may be receiving disclosures about LGBT domestic violence. This training should cover:
  - LGBT relationships and related issues
  - the MARAC and the risk indicator checklist and how to make referrals
  - LGBT domestic violence and how to make referrals
- Some officers in each PPU to be given specialist LGBT domestic violence training who could then act as a resource for MARAC members and other agencies about LGBT victim/survivors what help/support is available.
- Publicity campaigns and agency literature are needed that both avoid reinforcing the exclusively heterosexual model of domestic violence and explicitly include the possibility of LGBT domestic violence.
- In cases of LGBT victim/survivors the number of previous reports as a further screen for a MARAC referral should be reconsidered. Since LGBT domestic violence reporting is disproportionately low it may be worth considering the possibility (on a case by case basis) that an LGBT victim/survivor who has reported might be at high risk because of a recent escalation in abuse which has resulted in levels of fear that outweighs their fears about being outed, confidentiality or a possibly inappropriate response.

## **Appendix One: National and Regional Resources about LGBT Domestic Violence**

### **National**

Broken Rainbow is a national helpline for LGBY victim/survivors of domestic violence. The website also has resources for practitioners <http://www.broken-rainbow.org.uk/>

Stop Domestic Abuse. Scotland's Lesbian, Gay, Bisexual and Transgender Domestic Abuse Project. This website has two sets of resources, one for practitioners responding to LGBT domestic abuse and one for victim/survivors of LGBT domestic abuse <http://www.lgbtdomesticabuse.org.uk/>

Co-ordinated Action Against Domestic Abuse (CAADA) is a national charity supporting a strong multi-agency response to domestic abuse. CAADA has developed specific guidance about how to improve the MARAC response for LGBT victim/survivors of domestic abuse; and a briefing on LGBT domestic abuse. These and other resources related to LGBT domestic violence can be accessed at [http://www.caada.org.uk/practitioner\\_resources/diversityresources.htm](http://www.caada.org.uk/practitioner_resources/diversityresources.htm)

### **Regional**

North East Regional Lesbian, Gay, Bisexual and Transgender Domestic Abuse Development Worker. This is a new post funded by the Northern Rock Foundation for three years starting in March 2010 and based within Victim Support. The aims of the post are to develop capacity within the region to respond more appropriately to LGBT domestic violence. Work will focus on training, developing monitoring systems, a website of resources aimed at practitioners and victim/survivors and coordinating a regional LGBT DV forum to facilitate skill/information and resources sharing. The worker, Mary Hull, can be contacted at [Mary.Hull@victimsupport.org.uk](mailto:Mary.Hull@victimsupport.org.uk)



## **Appendix Two: Specific Abuses Experienced by LGBT victim/survivors**

Perpetrators of domestic violence regardless of sexuality or gender can use many ways to control, isolate and undermine their partner so that they can reinforce their power in the relationship. However, for those in LGBT relationships, their sexuality and/or gender can also be used in ways that are specific to their identity. The following gives some indications of the kinds of things LGBT victim/survivors have reported experiencing in domestic violence relationships.

### **Using sexuality as a means of control:**

- Threatening to out them to family, friends, employers, their place of worship, children's services if they do not comply with the perpetrator.
- Controlling what they wear, how they behave, how they speak by saying that they are not a 'real' lesbian, gay man, bisexual
- Isolating them from the scene/ other LGBT friends/ potential sources of help and or positive LGBT role models and relationships by convincing them:
  - that the perpetrator fears being outed
  - that the victim/survivor (and perpetrator) no longer need to have contacts with LGBT people/ places now that they are in a relationship
  - that the scene / other LGBT people are 'bad', 'promiscuous', 'lecherous', 'amoral'
- Use of sexuality as a means of controlling somebody is often used in first same sex relationships where the perpetrator is often more experienced at being an LGBT person, has been out for longer and/or may be older. This wealth of experience is difficult to resist and LGBT victim/survivors who have experienced domestic violence in first same sex relationships have talked about not knowing what to expect and assuming that their experience (of domestic violence) was part and parcel of being in an LGBT relationship.<sup>13</sup>
- Those who are bisexual may have additional experiences of biphobia from lesbian or gay partners who undermine their sense of being bisexual and/or deny/minimise their sense of being a bisexual person.

### **Use of Gender as a means of controlling somebody:**

- Those who are trans may experience threats to 'out' them for not being a 'real' 'woman' or 'man' to others: e.g. colleagues, neighbours, friends, children, family
- Trans people may also experience abuse about parts of their body that are not 'really' that of a 'woman' or 'man' or that they feel vulnerable about in relation to their gender identity. This abuse might take place in private or in public.
- Trans, lesbians and gay people may experience abuse about their presentation of gender: clothes, hairstyle, behaviours, mannerisms, body shape, voice. This abuse might take place in private or in public.

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<sup>13</sup> Donovan, C. and Hester M. (2008) 'because she was my first girlfriend, I didn't know any different': Making the case for mainstreaming same-sex sex/relationship education. *Journal of Sex Education*, Vol 8(3): 277-287

**Specific Abuses of Trans People:**

- Financial abuse: withholding or controlling money for transitional operations, drugs, treatments.
- Putting pressure on trans people to submit to particular operations and reconstructions of their body to please the perpetrator.

**Other Abuses that may be relevant which are not on the CAADA risk-indicator list:**

- Withholding medication and/or care (e.g. person with HIV, LGBT disabled person).<sup>14</sup>

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<sup>14</sup> Though this would also apply to any victim/survivors of domestic violence regardless of sexuality and gender.

### **Appendix Three: Some Guidance for the Police in identifying the victim/survivor and perpetrator in LGBT domestic violence.**

If the police are called to an incident that involves two women or two men they should be aware that this could be a same sex relationship and not assume that they are friends or strangers (particularly when the incident takes place in a public place like the street, outside a club etc).

An apparently heterosexual couple might include a partner who is transgender or bisexual. Whilst these may want to 'pass' as heterosexual it is worth making it possible for them to come out as this may allow them to discuss specific abuses related to their gender and/or sexuality.

There may be children in the relationship and/or household so this should be asked about.

Neither partner to the relationship may be out to their family of origin or may be subject to homophobic abuse from their family of origin, neighbours, etc. This could be an important factor in terms of the victim/survivor's sources of informal support.

Thinking about issues of power and control and the differential impacts on victim/survivors and perpetrators of domestic violence and the specific abuses experienced by those in LGBT relationships (see Appendix Four) will enable the identification of the victim/survivor and the perpetrator. The following provide some pointers to help in this process.

Each party to the incident should be spoken to separately and sensitively asked about the nature of the relationship. In addition, it may be useful to keep in mind the following about victim/survivors who may:

- Expect the perpetrator to take control of the situation with the attending officer, to do most of the talking including speaking on behalf of the victim/survivor, to contradict or undermine them or challenge their version of events
- Feel guilt about and/or responsibility for what has happened and the fact that the police are now involved.
- Minimise what has happened to them and try to explain why the perpetrator has done what they've done.
- Want to explain how difficult things are for the perpetrator (they may even want to defend the perpetrator) and explain what their own part was in precipitating the incident. In other words they may show empathy for the perpetrator.
- Be anxious about what the perpetrator is going to say because they want to go along with the perpetrator's version of events, their apologies and assurances that the abusive behaviour will not be repeated.

In general perpetrators may want to:

- Blame the victim/survivor and explain how it was the victim/survivors' behaviours that precipitated the incident.

- Minimise their part and exaggerate what the victim/survivor's part was in the lead up to and actual incident.
- Give excuses for their own part in the lead up to and the actual incident which often directly or indirectly implicates the victim/survivor or somebody else/some other circumstances.
- See the victim/survivor taken to task and/or punished (in the moment if not long term) for what has happened. In other words they show little or no empathy for the victim/survivor.
- Want to identify themselves as the victim in the situation.
- Seek to control the situation, the police officers as well as the victim/survivor, and the perceptions of the incident.

Any or all of these may occur especially if it is not clear to the attending officer what has happened or if both seem to have been violent.

## Appendix Four: Some Guidance for Other Agencies

If person from an LGBT relationship makes contact with your agency or is referred to your agency to discuss their experiences of domestic violence you may want to explore the following factors to make a judgement whether you are speaking to the victim/survivor or perpetrator:

In general victim/survivors may:

- Feel guilt about and responsibility for about what has happened and be very tentative about how they speak about their experiences.
- Minimise what has happened to them and try to explain why the perpetrator has done what they've done.
- Want to explain how difficult things are for the perpetrator (they may even want to defend the perpetrator) and how they understand why what happened did so and what their own part was in precipitating the incident. In other words they may show empathy for the perpetrator.
- Talk about how they love the perpetrator – or how much the perpetrator loves them, and how kind/generous/caring the perpetrator can be; and/or how sorry they usually after any abusive incident.
- Might talk about feeling sorry for the perpetrator and how much the perpetrator needs them to take care of them/ fix them/ look after their needs.
- Might want to know whether anything is available to help the perpetrator or to help them both as a couple.

The perpetrator may also phone a support agency and this could be for reasons including:

- They have found out that their partner has rung them and want to find out what has been said so they are phoning using their partner's name and details
- Their partner has threatened to leave and they are trying to find out ways of getting help to keep the partner in the relationship

In talking to perpetrators it is worthwhile keeping in mind that in general they may:

- Blame the victim/survivor and explain how it is their (the victim/survivor's) behaviours that precipitate incidents.
- Minimise their part and exaggerate what the victim/survivor's part is in the abuse.
- Give excuses for their abusive behaviours which often directly or indirectly blames the victim/survivor or somebody else/some other circumstances.
- Seek confirmation /reinforcement of their belief that the victim/survivor should be taken to task and/or blamed for what has happened in the relationship: have little or no empathy for the victim/survivor.
- Want to identify themselves as the victim in the situation.
- Seek to control the situation, the conversation with the practitioners as well as the victim/survivor, and the practitioners' perceptions of the victim/survivor and the abusive behaviours/relationship.

**Other factors to keep in mind**

Either partner or both may be a parent of children who may or may not be living with them. Victim/survivors should be asked about this.

Either partner to the relationship may not be out to their family of origin or, conversely, either or both may be subject to homophobic abuse from their family of origin, neighbours, etc. This could be an important factor in terms of the victim/survivor's sources of informal support. This should be broached with victim/survivors.