

# Wisconsin Coalition Against Domestic Violence

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## DOMESTIC ABUSE IN THE LESBIAN, GAY, BISEXUAL, & TRANS COMMUNITIES

**From the Executive Director. . . Mary Lauby**

In the 1970's, consciousness-raising groups were integral to the establishment of our early shelters and hotlines. Distinguishing what we now call gender politics was essential to the battered women's movement and its resultant culture of advocacy. As we recognized the disparity in resources available for battered women of color and the absence of women of color in leadership roles in the battered womens movement, we began to examine our racism. We have accepted that ageism has been a primary factor in our disregard for older battered women. It follows, therefore, that unless we have scrutinized our homophobia, our services or lack of advocacy for gay, lesbian, bisexual and trans victims are being driven by unexamined belief systems. We can also assume that they reflect general community attitudes toward the gay, lesbian, bisexual and trans communities.

To examine our personal and internalized racism, ageism, sexism, homophobia and other -isms is often very difficult work but it is essential. Once we have cracked that shell of established belief systems that drive our actions and reactions, we've only begun. This work is not an event. It is a commitment to a lifelong process of watching our own mind as it generates racist, ageist, or homophobic thoughts and the actions that they produce. Compassion for ourselves and one another throughout this process is critical.

We must apply this strategy to our organizations. We must consider the belief systems which have created our organizational cul-

tures. Are people of color, lesbians and older battered women present as paid staff, as volunteers or as board members? Where in our retelling of the history of the battered womens movement do we note that early battered womens advocates were largely lesbian women responding to the plight of their heterosexual sisters? How do we talk to the heterosexual battered woman who harbors fears that the shelter is a lesbian recruitment center as her batterer has claimed? How do we work with children of GLBT victims? How can we answer these questions as an organization if we've not addressed our personal issues and concerns?

How do we advocate for a gay businessman, who has not been openly gay, in a court system that is hostile to heterosexual victims? What do we do when the abusive lesbian partner is the female sheriff's deputy who has been the best ally we've ever had? What if the perpetrator is out and the victim is not?

The integrity of this work has always been our profound ability to focus on the safety of victims and their children as paramount. Searching for the clarity needed to maintain that focus amid the day to day realities is sometimes tremendously difficult. Fully understanding the complexities of domestic violence in the GLBT community is an enormous challenge. If we profess a commitment to the safety of all victims and their children, then we must embrace that challenge, beginning with an exploration of our own homophobia.

**Some Definitions Important When Supporting Gay, Lesbian, Bisexual, and Transgendered Persons**

by Connie Burk

*While these definitions explain how many people use these terms, remember that people define and describe their identities in lots of different ways that may be very different from this list.*

**Lesbian:** a woman or girl whose primary sexual and romantic feelings are for people of the same sex.

**Bisexual:** a person whose sexual and romantic feelings may be for people of either sex.

**Gay:** a man or boy whose primary sexual and romantic feelings are for people of the same sex. While many people use this term only to refer to gay men, others use it as a general term to include both men and women: for example, “the gay community.”

**Homosexual:** refers to any person, male or female, whose sexual and romantic feelings are for people of the same sex. While this term was once widely used, it is generally not preferred today. One reason many people do not like it is because it sounds so technical, and because it is not a label that emerged from inside of the community. The term “homosexual” also has negative impact for a lot of people because “homosexuality” was once defined as a mental illness. Although the medical and psychiatric professions have since said that being queer is *not* an illness, the term still feels oppressive to many people.

**THINK, RE-THINK: DOMESTIC VIOLENCE IN LESBIAN, BISEXUAL AND TRANS RELATIONSHIPS**

Connie Burk, AABL/Northwest Network of Bisexual, Trans and Lesbian Survivors of Abuse

**FIRST, THE STATS**

Domestic violence happens in same sex relationships at about the same rate as in heterosexual relationships. The National Coalition of Anti-Violence programs conducted a 10-year study in 10 U.S. cities which documented domestic violence at a rate between 25-33% in same sex relationships. A 1991 study found that 46% of the women responding had experienced 2 or more incidents of physical violence in their relationship (Coleman, 1991). The Survivor Project in Portland, OR is currently conducting a study of trans people regarding domestic violence.

Many survivors of same sex abuse indicate that they do not access mainstream domestic violence programs because the agencies are ill-equipped to handle the complex intersections of homophobia, abuse and isolation common for bisexual, lesbian and trans survivors. Many programs are uncertain how to support these survivors or are reluctant to address homophobic, biphobic or transphobic behaviors and attitudes of staff and program participants. However, more and more programs are considering these barriers and beginning to train staff, develop procedures and create values that will allow them to provide competent, safe support for lesbian, bisexual and trans people.

This article is offered to provide some baseline information regarding domestic violence in bisexual, trans and lesbian relationships as well as to frame a number of questions regarding our Movement’s analysis of domestic violence. I encourage advocates to examine and critique our thinking in regard to these issues. It is my intention to keep the values of survivor agency/autonomy, survivor safety and batterer accountability central to my analysis of domestic violence.

To examine some of the differences between the experiences of lesbian, bisexual or trans survivors and the experiences of heterosexual survivors, we can start by looking at a few of the tools batterers use to establish and maintain abusive power over their partners.

**ISOLATION**

Because of heterosexism and homophobia, few people grow up having information about what an empowered, nurturing gay relationship could look like. Movies, books, music, and jokes routinely represent queer people as perverted and unnatural. We see love stories that romanticize heterosexual relationships—even when they are premised on violence or coercion—but we see few if any representations of gay people as loving, stable and happy. Heterosexism prevents us from having access to our own queer culture and to the information that would teach us how to thrive in queer family.

Abusive partners can point to the multitude of images that represent gay people as sick and violent and say, “See, this is what it means to be gay. You will have to toughen up if you are going to survive. I am not abusing you, I am only showing you the ropes.”

Also, homophobia sets us up to be isolated when we are coming out as lesbian, trans &/or bisexual. Often when we come out, our friends and family subtly distance themselves

from us or overtly disown us. Sometimes internalized homophobia can cause us to withdraw from people in anticipation of their rejection. Often, lesbian, bisexual and trans people are “allowed” to participate in family activities, work functions, church celebrations and other sites of community only as long as we keep silent about relationships and our lives with our partners.

Batterers can manipulate this insidious form of isolation to enforce their abuse. If a survivor’s mother says she is worried about her daughter, the abuser can always insist that homophobia is motivating the mother’s concern. And when our friends are saying things like, “That woman is no good to you. I would never put up with that from a woman—why don’t you find a man and settle into a decent relationship” --it’s hard to argue that homophobia is not at play. If we want to be supportive of trans, bisexual and lesbian survivors of abuse, we will have to examine our own homophobia with the same diligence that we examine victim blaming.

While people are particularly vulnerable when they are first coming out, the interplay between the isolation created by homophobia, biphobia and transphobia and the isolation created by batterers can be devastating to any survivor—even if she has been out for years.

## SEXUAL ABUSE

Like the issue of isolation, the pervasiveness of sexual abuse by perpetrators of same-sex domestic violence has strong roots in heterosexism. Most of us grow up with distorted and conflicting messages about sex. For trans, bisexual and lesbian people, we are confronted with the ceaseless message that our sexualities are abnormal and shameful.

There is a lot of silence about sex in our communities. When we do make space to discuss it, we can become very invested in our sexual lives being seen as uniformly chosen, powerful and natural—partly because of our struggle to prove wrong the heterosexist stereotypes about our lives.

This silence, broken only for an occasional round of “everything’s fine here”, creates a very vulnerable space for batterers to exploit. Survivors are unlikely to disclose sexual abuse, or if they do—may feel intense shame for discussing such a taboo subject. Sometimes batterers will use sexual abuse to intensify isolation and control, while never otherwise physically abusing their partner, simply because they know the silence around sex and sexual abuse will prevent their partner from disclosing or seeking support.

## THREATS

Threats to out survivors as having queer identities to family, employers, ex-spouses and others are a significant tool batterers use in maintaining systematic power and control over their partners. For example, a survivor may fear losing his children to an ex-partner if he is outed as an FTM (female-to-male) transsexual man.

Wisconsin was the first state in the Union to enact state-wide civil rights protections for gay, lesbian and bisexual people. This law protects gay, lesbian and bisexual people from being discriminated against in housing, employment and public accommodations. Prior to this law, it was legal to fire a person from a job because she was a bisexual woman, for example. Domestic violence advocates should learn about this law and its

**Heterosexual, straight:** refers to any person, male or female, whose sexual and romantic feelings are for people of the other sex.

**“In the life:”** a term which refers primarily to lesbians and gay men, but may refer to anyone who identifies as living outside of heterosexual and/or gender norms.

**Queer:** an inclusive term which refers collectively to bisexual people, lesbians, gay men, transgendered folks, and others who may not identify with any of these categories but do identify as queer. While “queer” has often been used as a hurtful, oppressive term, many people have reclaimed it as an expression of power and pride. It is also preferred by many because of its inclusiveness. However, there are others who do not identify with this term, and still experience it as insulting.

**Fag/dyke/etc.:** these are terms which some people have also chosen to reclaim for themselves, although they have a history of being used in hurtful ways. While many people may use these terms to refer to themselves and their communities, most people still find these terms oppressive if they are used by people outside of the community.

**GLBT:** this is an abbreviation some people use to refer to gay men, lesbians, bisexual people and transgendered folks collectively.

**Homophobia:** the systematic oppression of gay men, lesbians, and bisexual people because of their sexuality. Some people also define homophobia as the fear and hatred of queers.

enforcement in Wisconsin. When educating in your communities about same sex domestic and dating violence, share this information with people—it is likely that many people will not know what their rights are or how they could report discrimination. It is also important to learn about the limits of these laws. Are the protections enforced? How? What custody cases have been before judges in your area? Have gay, lesbian, bisexual and trans people been awarded custody of their children? How have ‘dissolution of property’ cases been handled?

Trouble-shooting with a survivor about coming out at work, school, church or where-ever an abusive partner might be threatening to out them can be a powerful antidote to the threats. Is there someone who might be open to hearing that she is trans? Can she come out to a supervisor who has supported her on other issues in the past? How about a neighbor or family member? Listen carefully. Don’t dismiss her fears.

It is also vital not to minimize or dismiss physical threats made by women who batter. Sometimes advocates assume that a batterer who is a woman will be less dangerous—whether she is abusing her partner physically, sexually and emotionally—than a man who batters. To be blunt, this is a myth. Though this article does not have the space to itemize the stream of brutalities that survivors report, suffice it to say they are as varied, terrifying and immobilizing as those survived at the hands of male batterers.

## **USING CHILDREN**

Many sexual minority and gender variant people co-parent children. Like heterosexual families, some parents adopt, some utilize donor insemination and some have blended families from prior relationships. Although many people co-parent, few children have two legal parents of the same gender. In most cases of adoption, only one parent is allowed to legally adopt the child. In other cases, the birth-parent is the only parent with legal rights regarding the child.

When a survivor who is being battered in a same sex relationship is not the birth-parent or legally adoptive parent, to leave the violent partner means to leave her child. In these cases, it is extremely rare – virtually unheard of – for a court to award visitation (much less custody) to the survivor. Even in the few instances when a survivor has legally adopted their partner’s biological child, it is rare for courts to award custody to the adoptive parents.

As for heterosexuals, these custody battles are long and expensive. Unlike heterosexual custody cases, however, in many communities it is difficult to find attorneys with substantive experience in pursuing these cases.

## **SAFETY PLANNING IN SMALL COMMUNITIES**

Like faith communities, immigrant and refugee communities and other close communities—it is often very easy for lesbian batterers to gather information about their trans, bisexual and lesbian partners. Most towns and even larger cities have only one or two places where people “in the life” gather for parties, evenings out, etc. While it is a myth that all queer people know one another, it is true that the size of our communities makes overlapping friendships, partnerships and other relationships a common occurrence.

Unlike safety planning with women in less insular communities, safety planning with survivors of same sex domestic violence must include plans for routinely running into her batterer, being in meetings and community events with her batterer, being seen by and seeing her batterer. If we don’t work with survivors to anticipate and plan for such meetings, survivors lose community because it is impossible to stay safe. Supporting survivors to reconnect and build community—in spite of her batterer’s attempts to intimidate, isolate and humiliate her—is a major role of our program.

It is also important to recognize that women who are battered by their female partners may be accompanied by their batterers to the women’s bathroom, a women’s changing room, a doctor’s examining room and even a do-

mestic violence shelter. Women have told stories of being asked about domestic violence by emergency room nurses while their violent partners, who were assumed to be a helpful friend or sister, looked on. Of course, it is wonderful that nurses are asking about domestic violence, however, we must be aware of our assumptions about survivors' lives and what impact these assumptions can have on their access to support. In short, it is impossible to assess levels of physical danger without considering batterer access to the survivor and so-called "safe" women's space.

Gender variant and sexual minority survivors tend to access their close friends for support primarily—if not exclusively. Many of us have extreme distrust for law enforcement, mental health systems, physicians and other institutions which have historically incarcerated and institutionalized us in order to enforce homophobia, racism and classism. As the recent brutal rape of a Haitian man in New York City by police who believed he was gay attests, this violence is not simply historic. While this terrible attack in New York has rightfully received national attention, we each know of violent or humiliating encounters with police in our own cities and towns that go unreported and unaddressed. Even where law enforcement and other systems are working diligently to address systemic racism, classism and homophobia within their agencies—officers on the scene rarely have enough time, support or expertise to successfully determine who is the primary aggressor in same sex domestic or dating violence cases.

As we continue to seek system reform, we remain aware of how batterers manipulate current institutions. Batterers may call the police and report their partner as the abuser, especially if they believe their own class, skin color, age or other privilege might work against the survivor. Batterers may make false child abuse reports or throw away a trans person's monthly supply of hormones—knowing that the consequences to the survivor will be compounded by the institution's heterosexism and transphobia (as well as racism, ageism, anti-Semitism or any other oppressive attitude).

What is the survivor telling you about her experiences with these institutions? Support survivors in using their critical thinking skills as well as their intuition in determining when and if it is safer for them to contact these institutions than not. Be prepared to advocate for survivors who choose to make these contacts as well as those who don't.

## USING VULNERABILITIES

While advocates often talk and learn about how batterers use their strengths to manipulate survivor's vulnerabilities, we rarely talk about the reverse--how batterers use their vulnerabilities to manipulate a survivor's strengths.

Sometimes women who batter have experienced violence in their past—they may have survived childhood sexual assault, gay-bashing, battering and/or other forms of violence. These women may use their prior experience surviving violence as an excuse for their current behavior. Some batterers insist they cannot be held accountable for their abusive behaviors because they originally learned them as survival skills. One survivor who was battered by a woman who had been abused as a child put it this way,

"I spent my whole time trying to support and protect her. I saw how badly her family continued to scare and hurt her. I thought I could be strong enough for both of us. I didn't want to be the next person in her life to let her down. Over time though, I began to dread waking up to another day with her. Whenever I

**Transphobia:** the systematic oppression of transgendered people because they do not fit society's expectations of what men and women are supposed to act like and look like.

**Biphobia:** the systematic oppression of bisexual people specifically because they are neither gay nor straight. For example, many bisexual people feel that they are forced to "choose" between two identities which do not fit.

**Heterosexism:** the belief that heterosexual (straight) relationships and people are the ideal, and that they are better or more normal than queer relationships and people. Heterosexism also includes the denial that queer people even exist, and the assumption that everyone is straight unless they tell you otherwise.

**Heterosexual privilege:** unearned privileges that go to straight people simply because they are straight. The ability to legally marry a partner, to take a date to the prom, and to talk publicly about crushes and intimate relationships are examples of heterosexual privilege.

**Bashing/hate crimes:** violence, or the threat of violence, that is used against queers either because they are queer, or because they do not fit society's expectations of what men and women are supposed to act like and look like. While hate crimes can be used to reinforce and support homophobia, they can also be used to reinforce and support other kinds of oppression, such as racism, anti-semitism, sexism, etc.

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tried to make a decision for myself or see my family, there was a consequence. She would attack our friends as soon as they left the house. I began to hate people who made her mad or upset her because I knew she would take it out on me. Whenever I tried to confront her on her abusive behaviors, she became angry, frightened and accusative. But I also saw how hard she worked to stay present in a world that had hurt her since she was a baby. I saw how hard she tried to fight off her own fears—even if that meant projecting them onto me. It wasn't until I finally was able to move away that I made the connections between my experience and domestic violence—even though we both worked at a domestic violence program while we were together.”

## **ACCOUNTABILITY**

It is important to hold people who are engaged in battering their partners accountable for their abuse—even as we have compassion for them. Becoming accountable for the abuse they are perpetrating is an important step for batterers to heal from whatever violence they may have experienced. We also recognize that people who systematically take power and control over other people are with us in our communities most all of the time. When attempts are made to ostracize or isolate batterers, we find that 1. the person simply moves to a new community where people are unaware of their abusive behaviors, 2. the community divides over the choice and blames the survivor for the division, or 3. the survivor is the one ostracized instead of the person using power over. We continue to be challenged by the need to build community based systems of accountability for batterers.

As we develop those systems, we remain aware of batterer's access to women's "safe space" such as confidential shelters, women's anti-violence collectives, Clothesline Project shirt making tents, support/education groups, etc.—it is necessary for programs to evaluate their own safety and confidentiality procedures. Do you screen for abusers prior to intaking someone into your program? Have you received training to help you successfully conduct these screenings? Finally, do you routinely communicate your processes for maintaining safety and confidentiality to lesbian, bisexual and trans people?

## **TOWARD A NEW (RETRIEVED?) ANALYSIS**

In order to begin to understand same sex domestic violence, we must be willing to think critically about our analysis around domestic and dating violence. In an attempt to make our message understood in a sound-bite world, we have dropped much of the complexity that is necessary to understand women's experiences with violence and abuse. In the workbook, *In Our Best Interest* (Minnesota Program Development, 1987), this need for complexity was addressed over a decade ago in a passage written by an education group facilitator:

I used to think that battering was caused by sexism in our culture and that men battered women because they were socialized as males to be more powerful than women and control them. Women were the ones being beaten because they were socialized in our culture to submit to male authority. I was deeply challenged in that perception when I began to read about lesbian battering. My first assumption, when I came to accept that [lesbians batter their partners] too, was that it was women imitating heterosexual relationships. That myth was shattered when I discovered that women active in the women's movement and operating from a feminist ideology physically battered their partners. My entire thinking on the relationship of sexism to battering was shaken to the core. This is when I first began to understand the pervasiveness of patriarchy. Patriarchy is not only a gender issue, but a form of dominance and control that permeates the thinking of all human beings subjected to patriarchal environments. I began to see battering not just as a gender issue, but as a much deeper manifestation of the concept of power and dominance in our culture. I also began to see that the enemy was not men or males. While males definitely enjoyed more freedom, privilege and status in a patriarchal structure, I no longer believed that if women ran things instead of men, everything would change and be

better. This realization made me understand how complete the cultural transformation must be in order to realize a non-violent society. (p. 18)

A definition of patriarchy that considers only sexism—instead of examining the complex interconnections of racism, colonization, classism, biphobia, transphobia, homophobia, anti-Arab oppression, anti-Jewish oppression, anti-fat oppression, ableism, ageism and all forms of oppression—will invariably marginalize the survivors from these oppressed groups.

We see this marginalization occur over and over. In her book, *Compelled to Crime*, Dr. Beth Richie writes about the increasing number of survivors of battering, particularly African-American women, who have been incarcerated. Many First Nations women have continuously called for an analysis of domestic abuse that names the violence committed against their whole family—not only women. They have addressed colonization as the driving force behind violence in their families. If we are to build a movement that can actualize a world free of violence—first we will have to adopt an analysis that looks beyond sexism alone as the fundamental cause of battering. Then we will have to place this analysis at the center of our everyday work so that support groups, shelter policies, house meetings, counseling protocols, and coordinated community responses incorporate complex understandings of culture stealing, forced removals, coerced labor, incarceration, orchestrated poverty and the many other issues that are central to marginalized women's experience of violence.

In order to begin to seriously address the experiences of lesbian, bisexual and trans survivors of domestic violence—we must be willing to expand our understanding of the roots of violence and the conditions which will support liberation. We have to look at relationships between women in our movement—how do, for example, heterosexual as well as sexual minority women use white skin privilege and class privilege to establish and maintain power over their co-workers, women in their communities or with survivors? In patriarchy, we are conditioned to access our un-earned privilege to take power over others as well as to internalize the beliefs of those who have power over us. We have to intentionally work to divest of our power over other people, to root out internalized oppression and to build communities based on shared values of accountability and empowerment in order to end domestic violence.

### **From the National Coalition of Anti-Violence Programs 1997 Report on Lesbian, Gay, Bisexual, Transgender Domestic Violence**

#### Statutes Include Same-Gender Relationships?

- In 7 states same-gender relationships do not qualify as “domestic.”
- In 26 states (including Wisconsin) same-gender relationships may qualify as “cohabitation.”
- In 17 states and District of Columbia same-gender relationships may qualify as “dating relationships.”
- No states explicitly included same-gender relationships in State Statutes as “domestic.”
- 21 states currently have a sodomy law on the books.

#### Summary of the Report

- In 1996, 2,352 incidents of domestic violence were reported to NCAVP organizations which service less than 20% of the nation's population.

Services designated for or made accessible to l/g/b/t victims and perpetrators of domestic violence are frequently unavailable. When these services are developed, however, outreach and community education efforts appear to be successful at increasing the willingness of battering victims to seek assistance.

## Same Sex Male Battering

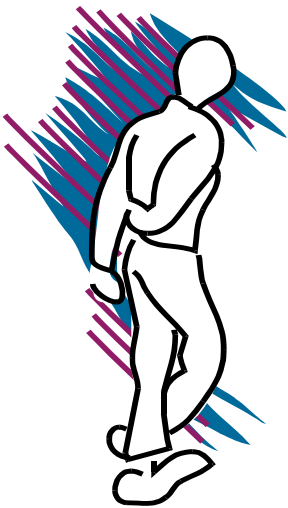
Patrick Letellier, Center for AIDS Prevention Studies,  
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The feminist movement's commitment to increasing awareness of violence against women has been tremendously effective in illuminating the connections between male violence against their female partners and the institutionalized discrimination and violence against women in society at large. Feminists have helped us to see battering as the "at home" version of the rampant sexism and misogyny that pervades many cultures around the globe. The gender-based model of battering, where women are victims of men's violence, was of course, developed on an analysis of heterosexual relationships. As a result, this model is being called into question by domestic violence experts working to prevent gay and lesbian battering, where victims and perpetrators are both men and women.

In the gay male community, it is estimated that domestic violence occurs in approximately one in five relationships (roughly equal to the rate of heterosexual battering). In terms of actual numbers, one estimation holds that 500,000 gay men are battered by their partners in the U.S. every year. In the absence of reliable prevalence studies, we are left with the estimates and the testimonies of survivors to inform our understanding of the seriousness of this problem.

Despite battered gay men coming forward for help all over the country, the gay community is virtually silent about the violence in its midst. The community as a whole still clings to the false notion that the only violence that really affects gay people is committed by heterosexuals, i.e. gay bashing. Anti-gay violence is indeed a very serious problem in this country. Yet according to Greg Merrill, coordinator of San Francisco's Gay Men's Domestic Violence Project, "Lesbians and gay men are much more likely to be killed by a partner than a gay basher." So why the silence?



Learning from the feminist model, many gay men have come to understand battering as something that happens only to heterosexual women. Thus, when they witness or even experience battering, they tend to label it something else: mutual combat, a really "nasty fight," or sado-masochistic sex. Gay male battering is none of those things. It is not mutual: there is almost always a primary aggressor and primary victim. It is not a "fight": it is a pattern of systematic violence and terror carried out to maintain power and control over another person. It is non-consensual: there is no contract or agreement about its parameters, as there are in S&M sexual relationships. It is abuse and violence that is unwanted by the victim.

Of the six identified gay men murdered in San Francisco in 1991 and 1992, two were murdered by their partners and two were murdered by what police referred to as their "roommates." Until the gay community begins to address violence committed by gay men against their lovers, these statistics will be repeated year after year. Perhaps, a good place to start is for all of us to expand the heterosexual model that has helped politicize battering and develop a new paradigm that includes the experience of lesbians and gay men.



## STOP GAY-BASHING AT HOME, Patrick Letellier

*This article has been reprinted with the author's permission from the San Francisco Chronicle, June 27, 1994*

Michael, a gay man, attacked in the kitchen after his assailant tore up the hallway furniture, had his jaw broken with one punch.

Maria, beaten in her garage by a smaller woman armed with a screwdriver, said later that what hurt most was being called "a f- - ing dyke" while being kicked.

Roberto, gay and HIV-positive, was locked in his apartment and kept from going to the doctor.

Loretta, while never physically assaulted, was taunted with anti-lesbian and anti-Semitic epithets and told repeatedly that she was stupid and ugly.

Peter's assailant tormented him for having HIV: "you look so sick, its disgusting. I hope you die tomorrow." Amado was raped in the bathroom and ridiculed for not being "out." And Angela and Marlene and Stewart. And dozens of others every week.

No, these are not stories from anti-gay violence from Colorado Springs or Portland. This is domestic violence in the lesbian and gay community in San Francisco: assaults committed against lesbians and gay men by their partner.

It is difficult for the gay and lesbian community to accept the brutal reality of battering. The dearth of resources for gay and lesbian batterers and their victims even in our gay

Mecca make that abundantly clear.

Perhaps even more difficult, however, is contending with what same-sex domestic violence means. It means that our relationships may be no more egalitarian than heterosexuals', because some of us also deliberately frighten, injure and even kill our partners. It means that so-called queer utopias we have worked so hard to create cannot protect us from violence. For some, same-sex battering fuels our homophobic fears that we are "sick" after all. For others it represents yet another division, of the batterers from the rest of "us."

It is time for the gay and lesbian community to move beyond its superficial approach to domestic violence (bland articles in the gay press once every 18 months, followed by letters to the editor from lesbians and deafening silence from gay men), and to address battering as the public health problem it is.

Programs to help our abusive brothers and sisters must be designed and financed by the gay and lesbian community. If we do not provide the care, treatment, education, therapy and support necessary, the violence will continue. Victims' programs must also be supported. We can no longer rely on services provided for heterosexual women.

The world will never be a safe place for us until we are safe from bashing in our own homes.

### CHALLENGING ASSUMPTIONS

**Not all gay relationships are violent.** One widespread misconception about gay men is that they are emotionally unstable and, as a result, are unable to form lasting and meaningful intimate relationships, or the relationships they form will be by violence and/or promiscuity. This homophobic assumption is easily refuted by current research which demonstrates that gay men are as psychologically healthy as their heterosexual counterparts, that they couple at approximately the same rate, and that they experience the same level of relationship satisfaction. Experts believe that domestic violence in gay male relationships occurs at the same rate as it occurs in heterosexual relationships: no more, no less.

It is also important to recognize that many battered gay men are sexually assaulted by their partners, and as a result, are at high risk for HIV infection. Gay men with injuries caused by sexual assault should be handled under the same guidelines and with the same sensitivity afforded other rape victims. Additionally, medical personnel must not presume that all gay men understand what behaviors constitute safe sex. Battered gay men are likely to be isolated from their community and thus removed from accurate information about HIV. This may be particularly true of low income gay men or gay men of color, given that most safe sex information targets white, middle class gay men.

*Excerpted with the author's permission from the article Identify and Treating Battered Gay Men in a Medical Setting.*

## Sharon's Story

I didn't know that a woman could rape another woman before it happened to me. When it did happen I didn't even know to call it that, but it was. And for four months afterward I slept on the floor in front of the door with my hand on the phone. It had started only months before, when we met at a social gathering that summer. She was flattering and attentive, it felt so good when we danced together. We went out for a drink later that evening, she walked me to my car and gave me her phone number. The next day she called and asked me to go out for dinner.

Things moved fast from that point on. Even though she lived way out in the country our relationship seemed to develop faster than anything I had experienced before. A few days after our dinner date I went out to her house for the weekend. At one point we were sitting on her bed and she tried to pin me down. She couldn't do it because I was stronger than she and this seemed to scare her. I was laughing, thinking that we were playing. The next day she called outraged, crying and I had no idea what I had done, only that I had done something wrong and I did not want to lose her. I liked all the attention she gave to me - the flowers and the poetry - and her energy made the relationship so exciting.

After that call everything was fine, she acted like nothing had ever happened until the next week when I was preparing to go out of town on business and to visit a friend. As the time for me to leave grew closer she began to act strangely. She wore the wedding ring a former partner had given her and she kept making plans with friends on the phone so that I could hear. When I asked her if she was trying to make me jealous or trying to make me stay she accused me of being jealous. Then, she asked if we could be girlfriends. I wanted to wait awhile since we had only been dating for a few weeks. That week when I was visiting a friend she must have called me twenty times a day screaming and crying. Again, I didn't know why or what I had done wrong.

When I came home we spent five days together. She seemed to have calmed down and we had a beautiful time together. A few more weeks went by and she again asked if we could be girlfriends. I said yes with the condition that we go to counseling to learn how to communicate better. She agreed and then she gave me a pair of earrings.

Sometimes she would do strange things and then just forget them like nothing happened. One night she kept elbowing me in the side, when I moved away from her to the couch she was furious. One morning I tried to go into town for an hour and a half, but she put her foot under the car tire so I couldn't leave. Another time she opened up the car door and wouldn't shut it so that I couldn't leave. But then we would have wonderful times together - long drives, dancing. For my birthday she gave me a beautiful diamond ring.

The last weekend we had together I drove out to her place. When I pulled in the animals didn't make a noise, I walked right into the barn without a sound. She jumped out towards me demanding to know why the dogs hadn't barked when I pulled in. She stormed around the house all night. She had wanted to go out for dinner, but first we fought for an hour about how to get there because she didn't want me to drive. Finally, we took separate cars to the restaurant. All through dinner she was saying mean things to me. When I got up to walk

out she started screaming at me and everyone in the place was staring at us.

She followed me back to the house. I just wanted to get my things and leave, but it was not worth the fight it would take to get out of there. When I laid down to go to sleep she tried to get me to take my clothes off. I refused, went to sleep on the couch, and said "I am done." The next morning I woke up to muffins and coffee. She seemed nervous when I got up and started doing some work. I told her that I was going to the party that night, whatever she did.

Later on I put my things into the car, locked the doors, and dressed for the party. Again, she wanted to ride together and I did not. When she started screaming and crying I finally agreed to ride with her. At the party she just sat with her arms crossed rudely not talking to anyone. When we left the party she wanted to go dancing but I refused. She sped past my apartment and I had no idea how to get my things and get home without her. She was driving erratically, weaving and speeding all over the road. When we got back to her house, I got right into my car, rolled the window down an inch and said "you need a lot of help, I'm going to miss you, but I cannot do this anymore."

The next day she called, promising to go to therapy if we could keep seeing each other. One night soon after we were out and I just knew that it was not going to work out. I was crying and she just held me so sweetly. She asked if she could come up to my apartment, I said she could as long as she promised to leave when I asked her to. We talked for a long time, had the most wonderful conversation. She left to run some errands and then came back to say good-night. We sat on the couch kissing and holding each other, but when I asked her to leave she pushed me down. I told her I didn't want this, but she kept taking off my clothes. I tried to stop her, but she just kept going. Finally I just gave up.

From that point on I avoided any contact with her, but I lived in constant fear that she would come back. I talked to some friends about what had happened and realized that I had been raped. I called the rape crisis center for support. I reported it the police and the officer did not believe me, told me that it was impossible for a woman to rape another woman, she told me to show her how it was possible. I then went to another officer who understood, she encouraged me to get a restraining order, but I was too afraid, I just wanted it to go away.

I remember in the beginning thinking that I had familiar feelings to when I was growing up. I had survived much abuse in my childhood and in many ways, this was not nearly as violent. I really liked her and thought she and I could work it out.

I think one of the things I didn't expect is how long it would take for me to resolve this relationship. Sometimes I need to talk even though I "should" be over it. I have fewer friends than I did, but the friends I have are the ones who are willing to listen and support me as I work through this.

This relationship is only the most recent chapter of abusive relationships in my life. What's different about this is that it happened with a woman. What's different about this is that I had worked through so much already that it is hard for me to not feel guilty that I "should" have know better, done differently, stopped the relationship sooner, etc. I hope what is also different about this is that I continue to look for and find forgiveness of myself as I am growing and learning.

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## SCREENING

Beth Leventhal, Network for Battered Lesbians and Bisexual Women

The Network has provided training and consultation to many battered women's programs seeking information on woman-to-woman battering. We've been encouraged to note that in recent years increasing numbers of programs are willing to work with battered lesbians and bisexual women. Unfortunately, though, it's been difficult for many programs to direct that interest into the concrete action of re-examining how

***"The program may unwittingly contribute to the battered partner not exploring all her options; for example, believing a shelter to be safe, a woman could decide to stay there rather than consider leaving the area, only to have her batterer find her by also getting into the shelter."***

they operate in order to make their services safer for women battered by women -- particularly where doing so seems to challenge organizational philosophy and values.

Nowhere is this more true than when dealing with the issue of screening -- before accepting a woman for services, going through a process to determine that she is in fact the woman who is battered and not the batterer. While we believe that screening is critical to working with battered lesbians/bisexual women, we have found that many battered women's programs find the decision to screen a difficult one to make, for a number of reasons.

First, screening seems to contradict the philosophy held by most battered

women's programs of believing a woman when she says she's battered. I need to say that there is much about this philosophy that we support; it is about acknowledging the truth of women's lives, and is the beginning of the end of the long history of societal denial and minimization of battering. On an individual level, the act of believing someone as they describe what their partner has done, believing that it is/was that bad, is often the first step toward their ability to find safety, their empowerment, and their healing from the horror they have experienced. On a societal level, that same belief is the first step in creating the cultural and political change necessary to end battering. The gains made over the last 20 years by the battered women's movement have been possible in large

part because communities have begun to believe what they once considered unbelievable, and consequently have gotten involved in efforts to end domestic violence.

The problem we have with this philosophy is that it means that, because they are women, lesbian/bisexual women batterers and their versions of their relationships will automatically be accepted and sympathized with. Batterers, regardless of gender or sexual orientation, usually see themselves as victims and many will present themselves to a program as the battered partner seeking services. Other batterers may try to join a support group or enter a shelter in order to see if their partner is participating in services, especially if they are stalking a partner who has left. Or, in a pre-emptive strike, a batterer may contact the program before her partner does in order to isolate her from a potential source of future safety and support. On the other side of the relationship, many battered partners present themselves as the abusers, having been blamed for the problems in the relationship and/or been called abusive by their batterers; if they have fought back in some way, this accusation may be especially convincing. Thus, without a screening process, a program can put the battered partner at risk in a number of ways. The program's message of safety allows a woman to let her guard down, when in fact they haven't done everything they can to make sure that the batterer will not have continued easy access to her. The program may unwittingly contribute to the battered partner not exploring all her options; for example, believing a shelter to be safe, a woman could decide to stay there rather than consider leaving the area, only to have her batterer find her by also getting into the shelter.

We would suggest to programs who are reluctant to screen that they view the issue in the context of safety. Screening is not about identifying battered women and screening them in, but identifying batterers and screening them out -- and battered women's programs do that all the time. It's just that when working with straight women with male batterers, the process is much simpler. By only giving out shelter and support group locations to women and being

wary of men who call the hotline or show up at the office, support groups, etc., batterers are effectively screened out -- men are an easily identifiable group to be cautious around.

Screening out female batterers is not as simple, because they are not easy to distinguish as a group. They look like us, they act like us (at least on the surface), and there's no clear way to automatically tell who they are. Without doing more intensive screening that asks a woman for details of her relationship and her experience of battering, a batterer will have easy access to the program's services. Obviously this is unsafe if the partner of a particular batterer is seeking support from the program in some way. But it's unsafe even if she isn't because, as stated above, by getting into the program, the batterer effectively cuts off the possibility that it could be a safe resource in the future since shelter/support group locations and times will no longer be confidential.

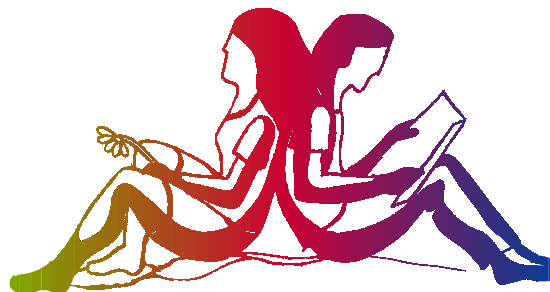
A common screening-related issue is what to do if both partners in a relationship call the program. Many programs have simply accepted the first woman to call and referred the other to another battered women's program so both could get services separately. While this strategy deals with the immediate crisis, we believe it leads to important questions about how the program views woman-to-woman battering.

One question it raises is whether deep down the program believes that battering between women is "mutual." Accepting a woman because she says she is battered, and then referring her partner to another battered women's program because the program also believes her (or doesn't want to make some kind of judgment as to who is who), what they're saying -- and what both partners will hear loud and clear -- is that it's possible for two women to batter each other. Otherwise why should both women receive services as battered women? This is a dangerous message to be putting out to the battered woman, to the batterer and to the community at large. It minimizes the seriousness of woman-to-woman battering and denies that one woman can use violence and coercion to control another.

The other question this raises is whether the program

really believes that lesbians/bisexual women who batter are as dangerous as heterosexual men who batter. If there is no screening mechanism and the program is willing to work with one partner or the other, then they have to accept that some of the women they work with will be batterers. Yet it is unlikely they would want to talk to straight male batterers on their hotline about being battered, run a support group with any of them in it, or have any of them living in their shelter or safe homes. They would more likely be quite concerned about the batterers knowing where and when services take place, expecting them to be at best disruptive and at worst dangerous to the women and children receiving services as well as to staff. If accepting male batterers into a program would put the organization and those receiving services at risk, what makes it any safer to have female batterers around? By not making an effort to determine who is who, especially if both partners call, the program is saying that there is a real difference between straight male battering and same-sex battering. The implication is that lesbian/bisexual women batterers are not so bad, that they're safe to be around, that they may even be indistinguishable from their battered partners. Again, this is a dangerous message to put out, because lesbians/bisexual women who batter do everything that heterosexual male batterers do, from subtle manipulation to murder, and are equally unsafe.

The battered women's movement cannot rely solely on its usual precautions for protecting battered lesbians/bisexual women. To be safe resources, programs need to develop policies and procedures that take into account the differences in access that women batterers have both to their partners and to services. Screening is essential to creating safety, and we encourage battered women's programs to re-examine their core philosophies in this framework.



## HEALTH PRACTITIONERS' CRUCIAL ROLE IN RECOGNIZING AND RESPONDING TO LESBIAN BATTERING

Nancy Worcester, Wisconsin Domestic Violence Training Project for School and Health Professionals

Increasingly, in many communities and professional schools, health workers are being trained to ask about domestic violence and (more important!) to be ready to hear and appropriately respond to anyone who affirms that domestic violence is an issue in their lives.

(Worcester, 1992) Health practitioners are now taught that their learning to give a few key messages ("You don't deserve to be treated like this," "I'm worried about you and how the emotional or physical abuse is affecting your health," and "Here's a list of community resources.") may be the expertise which saves more lives and does more for the mental and physical health of their patients than complicated medical skills or knowing how to use expensive, sophisticated medical equipment.

One reason health practitioners have an important role to play in the community's response to domestic violence is that the health system may see people living with domestic violence years or decades before other systems. Often health practitioners are the only community professionals who ever see certain battered women who, not knowing about or trusting other systems, have never traditionally turned to them.

For a number of reasons, battered lesbians have often not turned to or not been served by other community services. Lesbian battering is seldom taken seriously by police or courts and the homophobia of these systems very often revictimises the battered lesbians who do try to use them. (Malkin, 1992) This is even more exaggerated for battered lesbians of color who know they face both the racism and homophobia of these systems. (Waldron, 1996) Many community organizations by and for lesbians do not address domestic violence. A survey of self-identified battered lesbians found that the majority of study participants had not tried to get help from domestic violence hotlines, shelters or similar agencies because they thought these services were for battered

heterosexual women only. (Renzetti, 1996) Although most domestic violence shelters claim to "welcome" lesbians, there is an apparent disparity between service providers' intention or rhetoric and the actual availability of services for battered lesbians: only 25.8% of domestic violence programs make any mention of lesbian battering in their written materials, only 47.9% of dv agencies provide training on lesbian battering to

their staff, and only 40.6% of dv organizations include lesbian battering in their volunteer training. (Renzetti, 1996) Being able to address homophobia and lesbian battering on a daily basis proves extremely difficult even for the domestic violence programs totally committed to helping lesbians end the violence in their lives. No matter how much staff and volunteers have worked on their own homophobia, the day to day climate of a shelter or a support group is very influenced by the particular group of survivors in crisis who are presently at the shelter or in a group. In a homophobic society, many survivors will come from conservative or homophobic backgrounds where lesbians and lesbian issues will not have been discussed or where their heterosexual abusers have intentionally used homophobia as a way to scare them from using

services. ("They are just a bunch of lesbians." "They are man haters who will try to break us up." "They will try to turn you into a lesbian.") Hopefully, more domestic violence programs will strive to better serve lesbians, but even with the best of intentions, commitments, attitudinal and institutional changes, domestic violence programs may sometimes reflect the wider societal homophobia and probably cannot always insure an environment where a battered lesbian can be (proudly) open about being a lesbian and get all the emotional and practical support she needs to be safe from her abuser.

Many battered lesbians are not talking to anyone about the violence in their lives. Consequently, health practitioners obviously have a unique role they could be playing in addressing the issue of domestic violence

***"Often health practitioners are the only community professionals who ever see certain battered women who, not knowing about or trust in other systems, have never traditionally turned to them."***

with their lesbian patients. However, it is still a challenge to get health workers ready to address heterosexual domestic violence as this is a new issue for the health system and requires a set of skills and responses very different from those usually used in "fixing a disease" in "the medical model." (Worcester, 1995) Additionally, the health system has been notoriously bad in addressing homophobia, lesbians, or lesbian health issues. Several studies have shown that the majority of lesbians do not disclose their sexual identity to health care providers and, even though most lesbians report experiences in which health care workers assumed they were heterosexual, most lesbians say that they feel they cannot disclose their sexual identity to health care providers. (Institute of Medicine, 1999) Forty percent of lesbians believe that the quality of their health care could suffer if their physician knew they were lesbian. (Johnson, 1981) A major consequence is that "lesbians avoid seeking needed and routine care. Many report being subjected to humiliation, accusations of perversion, and unwanted referrals for psychiatric treatment. Others have been subjected to voyeuristic questioning about sexual activities." (Peteros and Miller, 1988, p. 132)

How does the issue of addressing lesbian battering fit into a system which is new to addressing heterosexual domestic violence and has not dealt with its own homophobia? Instead of seeing health care response to domestic violence and lesbian health as two separate issues, the two can easily be addressed together. The timing is perfect for addressing both issues and, for all the reasons stated above, battered lesbians are a group which has a great deal to gain from us making the connection between these issues.

Most health settings have been conscientious in choosing to use gender-neutral language in their domestic violence assessment questions (Do you feel safe at home? Are you ever afraid of your partner? Have you ever been hit, slapped, or kicked by someone you care about? How are things at home? What happens when you and your partner disagree?). The next step is preparing health workers to hear both male and female pronouns used in the answers!

A groundbreaking report, "Lesbian Health: Current Assessment and Directions for the Future," by the In-

stitute of Medicine, has just been released. Remarkably, this 1999 report is the first time that a mainstream medical organization has ever addressed the issue of lesbian health. Widespread media attention has been given to the report and its recommendations which include increasing research funding to address lesbian health issues, routinely including questions about sexual identity in data collection, and providing a clearinghouse to disseminate information about lesbian health. This report makes little mention of domestic violence (except in a lengthy bibliography) so it is crucial that we make certain that domestic violence gets included in any research and action which grows out of the momentum created by this first step towards creating a national lesbian health agenda.

Tools for Caring about Lesbian Health (Mautner, 1998), a new training package (including a training video and discussion guide) for health practitioners is an excellent way to help health workers think about removing the barriers to serving lesbian patients. While this package does not specifically address domestic violence, domestic violence examples or role plays could be used very effectively with this training package.



What will it look like when health care providers routinely recognize and respond to lesbian violence? It is much too early to know. We have learned much the last 5 years about what works and what doesn't work in the health system response to domestic violence, but particular attention has not been focused on addressing lesbian violence. Having a domestic violence advocate come to the health care setting to meet with a woman may feel safer for her than meeting in other locations, so building up a group of health system advocates may need to go hand in hand with training health practitioners to ask about domestic violence. In the same way that a cardiologist routinely asking about dv led to the development of hospital-based support groups for older battered women (Fullin, 1999), it is easy to imagine that health workers might identify the need for a hospital-based lesbian violence support

group. Health care workers may play a leadership or bridge building role in helping domestic violence programs or lesbian community groups better address lesbian battering.

Additionally, in the months and years ahead, as we increasingly debate and experiment with the appropriate role of the health system in addressing the issues of domestic violence with men, as perpetrators and victims, it will be important to make certain that gay men are included in all aspects of these discussions.

We already know that health workers are making a huge difference to women living with domestic violence. One survivor recently said, "What have you done to the health system? I have been battered for 20 years and no health worker ever asked about or noticed the impact of violence on my health. In the last year, several health workers have told me that I don't deserve this and made sure I knew about resources. Thanks." Now is the time to figure out how we can build on this success to support battered lesbians and gay men to end the violence in their lives.

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# Lessons I Have Learned

Oriana Noël Lewis

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Sometimes I think I learn too well.

One of my girlfriends taught me that I could save her from her alcohol and drug addiction. That if I loved her enough and took care of her well enough she could stop using. She instructed me on how to cope with her all-night binges. She schooled me in how to do what she said when she was high or drunk.

I was a good student. I learned how to be calm when she drove with one hand on the wheel and a joint or beer in the other. I learned how to not sleep for days so I could stay up and talk to her for hours on end; for if I went to sleep she would wake me with unwanted kisses. I learned how to blame the drugs for her running down the street screaming at me -- alternating between calling me names I had not even imagined and pledging her love to me.

Another girlfriend taught me that I did not deserve my dreams; for I could never sing the way I want to, or be responsible enough to get the job I wanted, or have the right kind of friends. After all, she taught me I could not even come to a good decision about where to go for dinner. She also taught me that I don't make good choices and I don't know how to take care of myself.

So I learned how to let her make decisions about where we would live and what job I could take. I learned how to enjoy the kind of sex she wanted. I learned how to say what she would listen to; for she taught me that there was so much she would not, could not, did not want to hear.

My last girlfriend taught me how I am responsible for decisions she made. She taught me how to sit quietly and be calm when she screamed and kicked things around the room. She taught me how to wait. Wait for hours while she talked on the phone, got ready to go out, sat around. Whenever I was ready to start my day, she preached her lessons of patience till several hours later, she was ready and our day could begin.

I learned how to be patient. I learned to be grateful that she was only kicking at clothes and not my face. I learned that it was better not to get in an argument than to confront her and find that it was all my fault to begin with.

And when I am asked what the definition of abuse is, I think of unwanted kisses, carefully thought-out comments and patience. I think of how my heartbeat quickens when I walk down the street and can hear my ex-girlfriend's voice telling me I've been a bad girl. I think of how I have to change my clothes several times before I go out and can almost see my other ex-girlfriend's face reflected in the mirror, shaking her head at what I have on. I think of how yet another ex-girlfriend taught me that I am somehow responsible for every bad thing that happens in her day.

The most important lesson I learned was the definition of abuse. How though bruises fade, the lessons they serve to punctuate take much longer to go away.

I have also learned that I now have so many lessons to unlearn.

**Definitions Important When Describing, Conversing With, or Advocating For Sex & Gender Minorities**

**Gender Definitions & Foundational Information**

**Gender Assignment:** Medical personnel assign newborns to a gender - boy or girl - at birth based on a visual inspection of our genitals if they do not appear intersex, otherwise after further testing.

**Sex:** The genetic or anatomical categories of male and female. Biological categories based on sperm and or egg production.

**Gender Identity:** One's personal view of one's own gender.

**Gender Attribution:** What someone assumes a person's gender to be when observing that person.

**Gender Expression:** Something done that influences or is intended to influence another's perception of the actor's gender. May include mannerisms, clothing, responses to environment, and much more.

**Gender Role:** The aggregate of a society's assumptions, expectations and mores for how a person of a particular gender is supposed to act and be acted upon socially.

**Gender Orientation:** Dynamic interaction between gender expression or identity and gender role or assignment. Most commonly used are FtM (female-to-male/ feminine-to- masculine) and MtF(male-to-female/ masculine-to-feminine).

**Intersex Definitions & Foundational Information**

**Male:** Producing sperm

**Female:** Producing ova

**Asexual:** Producing neither sperm nor ova

**Intersex:** Naturally possessing physiological or genetic characteristics of both male and female human sexes. Intersex is a term applied only to people. Though intersexuality is relatively common, no provision is made for the existence of intersex people. Intersexuality has many manifesta-

**WHY SERVE TRANS OR INTERSEX SURVIVORS?**

Diana Courvant, The Survivor Project

Across North America, from Ontario to Kansas to Key West, many programs are asking difficult questions about how to serve trans and intersex survivors within existing programs. As they speak, write, or sign about their experiences, others are still at the point of asking, "Why?" Why should our programs, especially those targeted towards women, serve trans or intersex survivors of domestic violence?

When the DV survivors' movement was founded almost 30 years ago we did the work first and foremost because it was needed. Tara Hardy of the Northwest Network remembers when her organization was called Advocates for Abused and Battered Lesbians (AABL). At the time, many services were closed to survivors who identified as bisexual. Hardy helped them anyway, because there was a need. When trans women first came to AABL, she was just as pragmatic. She first helped them "because they showed up," she says. Bradley-Angle House, a survivor service organization in Portland, Oregon provides support groups, an emergency shelter, long term transitional housing, and other services. Several years ago, Bradley-Angle House also began to consider serving trans women because they had begun to receive calls from trans-identified survivors. After consideration, BAH made the decision to open its services to anyone identifying as a woman. Erika Silver, BAH's executive director, identified one of the key reasons for this decision as the organization's mission statement itself. Silver saw the mission to serve women as inclusive of all women, as defined by the program participants themselves. The wisdom here is recognizing that being defined by others is a common experience of survivors. Giving survivors self-sufficiency skills not only in work or acquiring food or housing, but also in defining personal experiences and identities is a vital part of giving survivors the tools to recognize and set personal boundaries in future relationships.

Connie Burke, also of the Northwest Network, was working in Lawrence, Kansas at Women's Transitional Care Services when she first encountered the issues of trans people. With a co-worker, Becky Ow, she attended a Minneapolis conference where one presenter kept mentioning the term "trans" without defining it, so the two of them wrote the word down and read up on the subject after arriving home. Burke's values included an imperative to "stretch". She explained, "We had a mission in that program [Women's Transitional Care Services] that encourages us to do that. There was a real culture of moving, movement." Their curiosity and desire to stretch themselves translated into a proactive desire to provide services to trans clients.

The Northwest Network, Bradley-Angle House, and Women's Transitional Care Services have all served trans or intersex survivors, despite serving very different communities. Having had a chance to serve these clients, other benefits became apparent. Hardy was enthusiastic about her experiences, "I've learned so much from trans survivors. They've completely transformed my analysis of Domestic Violence." Certainly working closely

with trans or intersex people provides a rare opportunity to identify and unlearn our own assumptions and stereotypes concerning sex and gender. Other reasons that become apparent only after service are less positive. In one North American program, a woman seeking shelter was told that she could only access services after a police body-cavity search because she had displayed masculine cues. She submitted to the search, but left the program while still in need of services in part, if not wholly, because of this traumatic invasion. This eligibility test raises several issues. The first is the tremendous harm done by this type of invasion. Certainly this does nothing to help a survivor recover. Second is the blatant illegality of police participation in this type of search. Even strip searches can only be performed by police after meeting strict criteria. Third is the terrible damage that can be done to a vital program if a survivor violated in this way chooses to file a lawsuit. The potential damage to a rural community is even larger since there are rarely multiple agencies acting within a single rural community.

Even if some less invasive eligibility test is instituted, how does an agency determine which clients should be subjected to this extra test? The likely answer is that each worker will use a subjective idea of masculine cues. The result of that is placing additional barriers to service for any survivor that does not conform to a dominant culture definition of femininity. Ultimately, this can only reinforce sexism and further damage relationships with local communities of lesbian and bisexual women. Finally, in many jurisdictions, applying any test may be illegal in many jurisdictions. In Oregon discrimination against transsexual people is illegal under laws preserving the civil rights of people with mental and physical disabilities. In Minnesota, discrimination against any trans or intersex person is illegal under statutes equalizing the rights of people regardless of sexual orientation. In any state that prohibits discrimination based on physical sex, as opposed to gender, denying service to intersex people may be illegal, depending on ruling of state courts. In many cities and counties, civil rights laws explicitly include trans or trans and intersex people. The only way to insure protection against lawsuits, especially considering how quickly these laws are changing across the country, is to avoid discriminating against clients or potential clients who may be trans or intersex.

Perhaps the most basic reason to serve trans and intersex survivors, though, is our movement's sense of community responsibility. Kahlil Gibran once wrote that we are born owing nothing to anyone, but everything to everyone. We do not serve survivors in our programs because we owe them money or a favor. We serve them because as members of our communities, they deserve our communities' help during the difficult and dangerous transition out of an abusive relationship. Our trans and intersex neighbors deserve no less.

tions, including:

**1) Visible intersexuality of the genitals at birth (AGS, etc.) treated through repeated surgery. This is the type of intersexuality most frequently conceived of or discussed. 2) Visibly atypical development at puberty (Klinefelter's, etc.) 3) Externally invisible intersexuality of internal organs or of chromosomes (Turner's, Androgen Insensitivity, etc.), often discovered only during investigation of infertility.**

#### **Trans Definitions & Foundational Information**

**Transsexual (adj.): Having a gender identity of man/boy or woman/girl not matching gender assignment. In the United States, transsexual people typically obtain medical intervention to bring physical sex into congruence with gender identity.**

**Non-op, Post-op, Mid-op, Pre-op (adj.): Referring to transsexual people, non-op indicates a person having decided against surgeries, post-op indicates a person having completed all intended surgery, mid-op indicates a person having completed some intended surgeries, and pre-op indicates a person who has not yet had any intended surgery.**

**Cross-dresser (n.): While gender identity and gender assignment match, cross-dresser indicates someone who wears clothes that social custom dictates belong to a different gender role. May/may not take on a separate name and/or set of mannerisms appropriate to the role matching current clothing. Frequently interested in matching others' gender attributions of the cross-dresser to current clothing.**

**Drag King/Queen (n.): As a cross-dresser, but usually cross-dressing for performances and not as often interested in having gender attributed on the basis of clothing.**

**Transgenderist (n.): Gender identity and gender assignment do not match but seeks no medical intervention to change characteristics of physical sex. Lives as gender identity using clothing and other cues to influence gender attributions.**

**Transgender (adj.): May mean any of the following 1) transgressively gendered; 2) identifying as a gender that is neither man/boy nor woman/girl; 3) deliberately playing with/on gender (genderfuck); 4) any of the above except transsexual people.**

**\* Trans (adj.): Any of the above.**

## SAME-GENDER DOMESTIC VIOLENCE: FAMILY LAW CONSIDERATIONS

Adele M. Morrison, University of Wisconsin Law School

### RESTRAINING AND HARASSMENT ORDERS

Wisconsin Domestic Abuse Restraining Order and Harassment Order Statutes (Sect. 813.12 and 813.125 respectively) are gender neutral.

Restraining Orders are available to adults who are family members (related by blood, marriage or adoption), household and former household members, former spouses and those with a minor child in common.

Most gay or lesbian victims "qualify" under the household category. Currently individuals who have been abused by someone they are dating or formerly dated are not eligible for domestic abuse restraining orders.

Wisconsin has led the nation in the inclusion of sexual orientation in its anti-discrimination (housing, employment, etc.) laws as well as being one of 33 states and the District of Columbia that no longer criminalize sex between persons of the same gender. Statutes that most impact victims of domestic violence are gender neutral, but even so there are particular considerations that need to be taken into account when addressing same gender domestic violence. Highlighted here are things to consider when working with victims not in heterosexual relationships, as well as when dealing with individuals who abuse partners/family members of the same gender.

### FAMILY LAW

#### The Couple

Activists and lawyers have over the years encouraged gay and lesbian folks to "empower" their relationships by entering into legal arrangements. There are a variety of relationship empowering documents that are essentially contracts which address the issues of how the relationship will be conducted or how property will be divided if the relationship ends. They are referred to as relationship agreements, parenting agreements, powers of attorney (Wisconsin Statutes Chapter 155), living wills (Known as Declarations to Physicians in Wisconsin Statutes Chapter 154) and domestic partnership documents for those who can register as Domestic Partners (in Madison or those whose employer's offer Domestic Partner Benefits.) These documents can bring same-gender couples that are splitting up into the legal system almost to the extent as those couples ending a marriage through divorce yet they do not afford the couple the same rights, responsibilities, or respect. If a couple has created such documents the victim may need to revoke the document if they no longer want their partner to have the rights agreed to.

#### The Family—Children

One might imagine that because same-gender couples are legally barred from marrying it might be easier for a victim to leave her/his abusive partner, but the absence of legal protections, particularly for a non-biological/non-adoptive parent creates its own difficulties. Yes, a couple can create separation agreements but in domestic violence situations this may be another way for the abusive partner to exercise power and control.

For gay and lesbian parents the question often boils down to who is a parent? Wisconsin defines a parent as: 1) A biological parent. 2) A person who has consented to the artificial insemination of his wife. 3) A parent by adoption. 4) A man determined to be the biological father through a paternity action (Wis. Stat. @ 49.141). A person whose parental rights have been terminated is not a parent.

#### Second Parent Adoption

To adopt a partner's child, an adult resident of Wisconsin needs to be the "husband or wife" of the "parent of the minor." The Wisconsin Supreme Court has interpreted Adoption Statutes to mean that for a child to be adopted both parents parental rights must be terminated. A child with one parent is not eligible to be adopted by anyone other than the legal husband or wife of the child's parent. Essentially the only type of second parent

adoption allowed in Wisconsin is step parent adoptions. It is possible for an unmarried adult to adopt but not an unmarried couple. (*In the Interest of Angel Lace M.* 184 Wis. 2d 492 (1994).

The lack of recognition of same-gender marriage as well as a denial of second parent adoptions serves to deny non-biological relationships between parents and children. It is a common occurrence that victims of domestic violence say they stay because they can't leave their children and/or don't want to face a battle over custody and/or visitation with the other parent. In the case of same gender couples the non-biological parent is a legal stranger to a child s/he may have parented since the child was born. Whether the non-biological parent is victim or perpetrator, the child has a relationship with him or her. It is a relationship that is not legally recognized.

### **Custody**

The main concern around custody for lesbian, gay, bisexual and transgender parents is that a state may deny them custody of their child(ren) based on sexual orientation or gender identity and that an ex wife or husband, the other biological parent, or even a grandparent will get full custody. The standard for determining custody is the "best interest of the child." The court must consider a number of factors in making this determination one of which is a catchall which could include immoral or criminal conduct which has in other states included being in a same-gender relationship or being an out/open gay, lesbian, bisexual, or transgender person. The absence of a criminal sodomy law undermines the criminal conduct argument and Wisconsin case law has found that immoral conduct and/or non-traditional lifestyle is not a per se bar to custody. In a 1993 case (*Dinges v. Montgomery*), the Wisconsin Court of Appeals found that "while the mother was in a lesbian relationship [there was] no detriment to the child." (NCLR)

In same-gender relationships where there are children no court has found standing for the same gender partner of a biological parent to gain custody. An issue that may arise in the course of addressing same-gender domestic violence is that an abusive partner may also be abusive to his/her children. If the perpetrator is the biological parent, the victim may want to seek protection for the children through a child abuse protective order and/or a guardianship which are separate action from custody.



### **Visitation**

In Wisconsin, the legal right to visitation is referred to as periods of physical placement. By statute a "person who has maintained a relationship similar to a parent-child relationship" (Sec. 767.245) may be granted visitation with a child. Case law has determined that this is available to non-biological parents. There is still a best interest of the child standard which applies and the court has set out guidelines in which to determine whether there is a relationship similar to a parent-child relationship. In the same way visitation may be an issue in opposite gender couples where there is abuse. This may also arise with same gender couples. Being a non-biological or adoptive parent is another hoop for a gay or lesbian person to jump through. A client may have some trouble meeting the standards to "prove" that s/he is a parent equivalent.

### **CONCLUSION**

Since the laws that most impact victims of domestic violence are gender neutral it would seem that the legal concerns for victims of same-gender domestic violence are not fundamentally different from those victimized by partners of the opposite gender. The fact that family law is based on the model of a heterosexual couple and their biological children and the legal system is rooted in heterosexism and homophobia makes it even harder for a victim of same-gender domestic violence to even access, let alone successfully navigate the system. It is important to learn how to successfully utilize the legal system for a victim of same-gender domestic violence while respecting and understanding his/her reality of the dangers of being out.

## **SAME-SEX DOMESTIC VIOLENCE AND THE CRIMINAL JUSTICE SYSTEM**

Stacy Seibert, Domestic Violence Crime Specialist,  
Deferred Prosecution, Dane County District Attorney's Office

Domestic Violence in same-sex relationships remains in the closet. Gays and lesbians tend to fear how authority in the criminal justice system may respond due to homophobia and heterosexism. Although Wisconsin statutes are gender neutral, myths and stereotypes regarding same-sex relationships impedes legal and social service assistance when same-sex couples have domestic disputes. In addition, the domestic violence philosophy is based on heterosexual relationships. While there are various differences between same-sex relationships and heterosexual relationships, there is one striking similarity-partner abuse. In both, an abusive partner asserts and uses violence to control and dominate his or her partner (da Luz, 1994).

Domestic violence philosophy is based on heterosexual partner abuse. For gay men and lesbians, this philosophy immediately breaks down at the issue of gender (da Luz, 1994). The authorities may have difficulty assessing who is the victim and who is the primary aggressor when relationships do not consist of one woman and one man. Officials in the criminal justice system may determine that the partners are equal because they are of the same sex and may therefore consider incidents of violence as forms of mutual combat. As a result of this perception, police often arrest both parties in a same-sex domestic dispute. Wisconsin's Mandatory Arrest Law reads:

When an officer has reasonable grounds to believe that persons who reside together or formerly resided together are committing or have committed domestic abuse against each other, the officer does not have to arrest both persons, but should arrest the person whom the officer believes to be the primary physical aggressor.

A telling inquiry should identify which partner uses violence as a means of self-defense and which partner uses violence as a means to gain power and control over the other (da Luz, 1994).

Homophobia adds yet another obstacle to gay men and lesbians receiving assistance. A large portion of our population still believes that gay men and lesbians are immoral and abnormal, incapable of having meaningful or long-term relationship and a threat to the traditional family (da Luz, 1994). These stereotypes may influence the police officers', judges', prosecutors' and service providers' perceptions of and respect for gay or lesbian victims' claims. Many gays and lesbians fear that the authorities may consider partner abuse a part of gay men and lesbians "deviant" relationship (da Luz, 1994). The homophobic stereotypes may cause officials

to disregard the abuse as unimportant or not actual violence because it's viewed as a part of gay and lesbian lifestyle.

Without adequate police intervention and without a reasonable expectation that gay men and lesbians have adequate remedies under the law, these victims will be reluctant to seek official assistance or to prosecute their batterers (da Luz, 1994). Recently, the Dane County District Attorney's Office had police report involving a lesbian domestic dispute. The lesbian barricaded her partner out of the house and ransacked it, damaging several items of the victim's property. The officer, in this case, failed to ask basic questions about the abusive incident and the property damage. Due to not having the adequate information regarding the damaged property, the prosecutor was unable to charge Criminal Damage To Property. In addition, the lethality index given to officers which asks standardized questions to assess the risk level of fatality had the "unknown" marked for the majority of the questions. "Unknown" means that the questions weren't even asked. The victim stated to the officer that she had been barricaded out of her apartment for the entire day and was afraid to call the police.

#### **References:**

da Luz, Carla M. (1994) A Legal and Social Comparison of Heterosexual and Same-Sex Domestic Violence: Similar Inadequacies in Legal Recognition and Response.

#### **Gay man allowed to use testimony on Battered Woman's Syndrome**

In New York a judge recently allowed an expert to testify about the Battered *Woman's* Syndrome in defense of a gay man who killed his partner in self-defense. According to the "New York Times", a gay male stabbed his abusive partner to death after he threatened him with a knife and bottle. The defense attorney stated that the relationship followed a classic pattern of spousal abuse. The abusive partner was initially charming, but changed once there was a committed relationship between the two, becoming violent and jealous: the abusive partner had his partner fired from his job by attacking the co-worker with which the victim had spoken; he also forced the victim's expulsion from college; the abusive partner took control of finances, doling out fifty cents per day to the victim as an "allowance"; he isolated the victim from social contacts, not even allowing a key to their shared apartment. Judges and attorney's struggled to find gender-neutral terms to replace "battered wife" or "battered woman", trying out "battered spouse", battered person" and "battered intimate partner".

## **WCADV Legislative Update**

### **Jo Ann Gray-Murray, Policy Development Coordinator**

The 1999-2001 legislative session is proving to be a busy one for the Coalition. In addition to Domestic Violence Lobby Day in May and the routine activities of policy development and coordination, several important issues have dominated our legislative agenda and policy activities.

As you know, the biennial funding proposal for new domestic violence programming dollars currently is being considered for approval by the Joint Finance Committee. If passed, TANF (Temporary Assistance to Needy Family) dollars will be available statewide for initiating new endeavors and expanding existing efforts in self-sufficiency and children's programming, legal advocacy and assistance to underserved populations. During the coming weeks, the Coalition will monitor this funding proposal throughout the budget approval process and provide all domestic violence programs and supporters with continual feedback on the status of the proposal: what is going into the finance budget, what is going to the Governor and how programs and allies can be involved in further supporting this effort.

In March of this year, the Senate Republican Caucus, under the leadership of Senators Huelsman and Farrow, put forth its own set of legislative initiatives designed to increase penalties for abusers and to provide additional services and assistance for abuse victims. These initiatives reflect several amendments to family, civil and criminal law that the Coalition is recommending in its Model Code proposal. Since February, the Coalition has collaborated with the initiative's legislative co-sponsors to ensure that this proposal will truly benefit victims of domestic violence and their children. Based on the success of these initiatives in gaining legislative support and approval, the Coalition will implement a revised strategy and timetable for the Model Code proposal. We anticipate introducing the Model Code proposal by the fall of 1999.

To date, the legislature has been very active in proposing bills related to domestic violence. Given the negative impact on the protection and well-being of victims of domestic violence and their children, four proposed bills are of immediate concern:

Mandated joint custody and equal placement - SB 107

Covenant marriage - AB 83

Prohibition of custody and visitation rights for parents convicted of intentional homicide of a parent of the child - AB 108

Enhanced penalties for domestic abuse crimes that children witness - AB 169

These four bills reflect national trends regarding concern for children's well-being and the strengthening of traditional ideas of family and marriage. While securing limited support in other states, the covenant marriage concept has become a part of the national conversation about the demise of the traditional family and need to promote "family values." The



flourishing influence of the “fathers rights” movement across the country has added fuel to the increasingly contentious local debates surrounding child custody issues. As the Coalition joins others in advocating for clemency for women incarcerated for murdering their abusers, the threat to these women’s custody and visitation rights remains a critical issue. In fact, AB 108 passed the Assembly by a 95-0 vote. Although the concern to protect children from the adverse consequences of exposure to domestic violence is an important goal, the potential for penalizing the adult victims of domestic violence continues to be an important dilemma. Currently, the Office of Crime Victims Services is crafting language to ensure that the effort to protect children does not unjustly penalize victims of domestic abuse.

Other proposed bills that the Coalition supports are:

Establishing additional conditions of release for felony offenses  
against children - AB 109

Allowing domestic violence victims to vote or register to vote confidentially -  
AB 343

On the national scene, the Violence Against Women Act ‘99 continues to be a hot topic in the 106th session of the U.S. Congress. The issue is being talked about not only among women’s advocates and lobbyists on Capitol Hill, but also among members of Congress and their staffs. The proposed measures contained in VAWA ‘99 are very similar to VAWA ‘98 with a few important changes:

**Title II** addresses children who witness or experience domestic violence

**Title III** contains provisions of victims of sexual assault and hate crimes

**Title IV** addresses insurance discrimination and effective laws for interstate domestic violence and stalking

**Title V** addresses domestic violence in the military

**Title VI** expands programs to provide services for under served communities

**Title VII** addresses domestic violence in the workplace

**Language** to ensure that all services and laws are available to women living on tribal lands

As of April, VAWA ‘99 has approximately 160 co-sponsors and support continues to grow. We will keep you posted on the status of VAWA legislation as it evolves and suggest how you can actively support these measures.

The coming years will prove to be an exciting time for the domestic violence movement. With state politics playing a more prominent role than ever in making decisions that will affect shelters, programs and services, it is critical that battered women, formerly battered women, domestic abuse programs and individuals committed to ending domestic violence become involved in a range of advocacy activities. The Coalition has set a goal of maintaining and increasing widespread involvement in legislative advocacy among programs and supporters. We look forward to working with you to develop meaningful and effective ways to be involved.

## G/L/B/T ANTI-VIOLENCE ORGANIZATIONS

### **Communities United Against Violence**

973 Market St. #500  
San Francisco, CA 94103  
24 Hr Crisis Line :415-333-HELP  
Business :415-777-5500  
E-mail: [cuav@xq.com](mailto:cuav@xq.com)  
<http://www.xq.com/cuav/index.html>

### **Family Service**

(Gay Men's Services)  
128 East Olin Avenue  
Madison, WI 53713  
(608)252-1320

### **LAVENDER**

(Lesbians Against Violence Even if Dykes Are Responsible)  
Madison, WI  
(608)255-7447

### **Network for Battered Lesbians and Bisexual Women/ La Red Para Lesbianas y Mujeres Bisexuales Maltradas**

P.O. Box 6011  
Boston, MA 02114  
(617)424-8611  
Hotline (617)236-SAFE  
[nblbw@erols.com](mailto:nblbw@erols.com)  
<http://www.erols.com/nblbw/>

### **New York City Gay & Lesbian Anti-Violence Project**

647 Hudson  
New York, NY 10014  
<http://www.avp.org>  
(212)807-6761  
Hotline (212)807-0197  
<http://www.avp.org>

### **Northwest Network of Bisexual, Trans, and Lesbian Survivors of Abuse (formerly AABL)**

P.O. Box 22869  
Seattle, WA 98122  
(206)568-7777  
(206)517-9670 tty msg

### **The Survivor Project**

5028 NE 8th Street  
Portland, OR 97211  
(503)288-3191

## GENERAL G/L/B/T ORGANIZATIONS

### **American Educational Gender Information Services, Inc. (AEGIS)**

P.O. Box 33724  
Decatur, GA 30033-0724  
(700)939-33724  
Email: [aegis@mindspring.com](mailto:aegis@mindspring.com)

### **Human Rights Campaign**

919 18th Street NW  
Washington, DC 20006  
Phone: (202)628-4160  
Fax: (202) 347-5323  
Email: [hrc@hrc.org](mailto:hrc@hrc.org)  
<http://www.hrc.org>

### **The Gay & Lesbian Alliance Against Defamation (GLAAD)**

[Http://www.glaad.org/](http://www.glaad.org/)  
[glaad@glaad.org](mailto:glaad@glaad.org)  
1-800-GAY-MEDIA

### **Outreach**

P.O. Box 310  
Madison, WI  
(608)255-4297  
[www.outreachinc.com](http://www.outreachinc.com)

### **Senior Action in a Gay Environment (SAGE)**

305 Seventh Avenue  
New York, NY 10001  
(212)741-2247

## DV ORGANIZATIONS WITH G/L/B/T RE-SOURCES

### **Minnesota Coalition For Battered Women**

570 Asbury Street, #201  
St. Paul, MN 55104  
(612)646-6147

### **National Resource Center on Domestic Violence**

6400 Flank Dr., Suite 1300  
Harrisburg, PA 17112  
1-800-537-2238

# G / L / B / T R E S O U R C E S



## BOOKS

- Men Who Beat the Men Who Love Them by David Island and Patrick Letellier. New York: Harrington Park Press 1991.
- Naming the Violence: Speaking Out About Lesbian Battering edited by K. Lobel. Seattle, WA: Seal Press, 1986.
- Violent Betrayal: Partner Abuse in Lesbian Relationships by Claire Renzetti. Newbury Park, CA: Sage Publications, Inc., 1992.
- Violence in Gay and Lesbian Domestic Partnerships edited by Claire M. Renzetti and Charles Harvey Miley. New York: Harrington Park Press, 1996



## ARTICLES

- "Battered Husbands--Domestic Violence in Gay Relationships" by Michael Szymanski. Los Angeles, CA: Genre Magazine, Fall 1991, pp. 35-37, 44, 73.
- "Battered Lovers--The Hidden Problem of Gay Domestic Violence." Los Angeles, CA: The Advocate, March 4th, 1986, pp.42-46.
- "Compounding the Triple Jeopardy: Battering in Lesbian of Color Relationships" by Valli Kanuha. Found in Diversity and Complexity in Feminist Theory, Haworth Press, 1990, pp. 169-184.
- "Gay and Bisexual Domestic Violence Victimization: Challenges to Feminist Theory and Responses to Violence" by Patrick Letellier. Violence and Victim, Vol 9, No 2, 1994, pp. 95-106.
- "Gay and Lesbian Domestic Violence Widespread" by Keith Clark. In Step, Milwaukee, WI, October 16, 1997.
- "Intimate Abuse: Domestic Violence in Lesbian Relationships" by Marissa J. Ventura. Deneuve, July/August 1995, pp. 40-42.
- "Lesbian Battery: Paying the Ultimate Price" by Mindy Ridgeway. San Francisco, CA: San Francisco Bay Times, May 5, 1994.
- "Not So Different, After All" by Patricia King. New York, NY: Newsweek, October 4, 1993.
- "The Scourge of Domestic Violence" by David Island, PhD. and Patrick Letellier, MA. Gaybook, 9. San Francisco, CA: Rainbow Ventures, Inc., Winter 1990, pp.11-14.
- "The Violence At Home" by Katrin Snow. Los Angeles, CA: The Advocate, June 4, 1992, pp. 60-63.
- "When Gays Batter Their Partners" by David Tuller. San Francisco Chronicle, January 3, 1994, pp.1,A8.



## BINDERS

- Confronting Homophobia: A Manual for Battered Woman's and Anti-Sexual Assault Programs edited by P. Elliot and J. Guth. St. Paul: Minnesota Coalition for Battered Women, 1990.
- Confronting Lesbian Battering edited by P. Elliot. St. Paul: Minnesota Coalition for Battered Women, 1990.
- Lesbian and Gay Domestic Violence: A Resource edited and published by Tuscon United Against Domestic Violence, April 1995. Available by contacting The Brewster Center at 510-881-7201.



## OTHERS

- Violence Between Lesbian Couples: A Between Groups Comparison by Vallerie Coleman (an unpublished doctoral dissertation). University Microfilms International, 9109022, 1990.
- Lesbian and Gay Domestic Violence: A Resource. Edited and published by Tuscon United Against Domestic Violence (a sub-committee of the Souther Arizona Task Force on Domestic Violence), 1995.
- Lesbian, Gay, Bisexual, Transgender Issues Technical Assistance Packet. Wisconsin Coalition Against Domestic Violence.

## VIDEOS

- **My Girlfriend Did It**

This video examines domestic abuse in same sex relationships. Through interviews, personal accounts and statistics, the video illustrates the dynamics of domestic abuse that is general to all victims and the dynamics that are specific to the lesbian community. The video focuses on the obstacles to admitting lesbian battering and the myriad of obstacles a lesbian victim of domestic abuse faces in seeking help. Casa de Esperanza, 612/641-7515.

- **Voices Heard Sisters Unseen**

Battered women turned away by shelters and social services, challenge the stereotypes of who a battered woman really is and confront judges, police, funders, even community activists who collude with the batterer and keep women trapped in abusive relationships. They speak in many "tongues" -- English, Spanish and Sign. Undocumented and immigrant women, lesbians, deaf & disabled women, women with HIV/AIDS and women in prostitution are in the video. Women Make Movies, 212/925-0606.

- **Why Does Daddy Hit Mommy? Domestic Violence: A Course In Assessment & Intervention**

Two videos, course books and workbooks for teaching health workers about domestic violence and their roles. It contains a segment on gay and lesbian battering. Health Education Alliance, 408/972-7984.

- **Roses Are Red: Violence is Blue**

This programs includes "Basic Issues of Domestic Violence" by Nancy Worcester, "How Is Lesbian Battering Different?" by Melanie Kaye/Kantrowitz, "AODA Issues and Violence in Lesbian Relationships" by Janet Wright, "Lesbian Teens" by Suzanne Staudenmaier, "Oppressions as Power and Control" by Nancy Worcester, "Law Enforcement Demystified" by Aliz Olson, and "Lavender: A Community Organization" by Michael Osier. \$29 from Video Proof, 1123 Jenifer St. Madison, WI 53703.

## Announcements

- **The Next Millenium Conference: Ending Domestic Violence**

This conference is expected to bring together more than 800 of the nation's battered women's advocates and service providers, survivors, religious leaders, health and law enforcement, substance abuse counselors, international leaders, and others. The Conference will offer six workshop tracks: Economic and Social Justice; Intervention; Prevention; Research; Underserved Communities; and Youth. It will be held outside of Chicago August 29th to September 1st. Form more information call 1-800-281-9519.

- **National Resource Center on the Link Between Violence to People and Animals**

The American Humane Association (AHA) is pleased to announce the opening of this Resource Center, a joint initiative of AHA's Children's Division and Animal Protection Division. The Center will act as an informational source for both human and animal serving professionals across the country.

- **Legacy of Hope Conference**

This international conference on children exposed to domestic violence for practitioners, advocates, clinicians, and social scientists will take place in Vancouver, British Columbia on October 27-29, 1999. The Conference will feature keynote speaker Peter Jaffe and is hosted by BC/ Yukon Society of Transition Houses and the London Family Court Clinic with the following sponsors: Minnesota Center Against Violence and Abuse, Domestic Abuse Project - Minneapolis, Justice Institute of B.C., B.C. Institute Against Family Violence.

- **The 1999 Elder Abuse & Adult Protective**

### **Services Conference**

This conference will feature nationally renowned speaker, writer, and Washington State adult protective services practitioner Wendy Lustbader, M.S.W. It will take place on September 8 & 9, 1999 in Oshkosh, Wisconsin. Call Jane Raymond of the Bureau of Aging and Long Term Care Resources at (608)266-2568 or email [ramoja@dhfs.state.wi.us](mailto:ramoja@dhfs.state.wi.us).

- **The Wisconsin Clemency Project**

The three battered women working with the Clemency Project have been granted hearings with the Pardon Board. This is the first time in Wisconsin history that the Board has considered the cases of battered women who are incarcerated for killing their abusers. We are asking the Governor to grant clemency by commuting their sentences. For more information on the hearings, please call Amanda Antholt at WCADV.

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### **NEWS BRIEFS**

- **Nevada becomes 11th state to prohibit workplace discrimination based on sexual orientation.** Republican Governor Kenny Guin signed the bill in late May. Nevada now joins California, Connecticut, Hawaii, Massachusetts, Minnesota, New Hampshire, New Jersey, Rhode Island, Vermont and Wisconsin in protecting against discrimination in the workplace. (*Human Rights Campaign website*)

- **Email forum for abusers**

Blain Nelson, self-proclaimed recovering spouse abuser and host of Blain Nelson's Abuse pages (<http://blainn.cc/abuse/>) has introduced an email mailing list called "Abuse-free." The list intends to be "an experiment in abuse recovery" by allowing an open forum for abusers to talk about their experiences. Batterers who join the list must abide by a set of rules. Potential subscribers are informed that the list is not an appropriate place to share legal advice and that any sort of abusive behavior will not be tolerated. (*Domestic Violence Prevention, April 1999*)

- **Jury finds battered women's shelter negligent**

A recent verdict in a civil case found the Cumbee Center to Assist Abused Persons negligent in the death of Sabrenia Rouse Neal and awarded her family \$103,840. Shortly after Neal and her three children came to the Cumbee Center her husband contacted her mother to say he had a appointment with an attorney to discuss a



previous auto accident. He requested that Mrs. Neal be present. When Neal's mother informed her of the appointment the shelter assured her that she did not have to attend. Mrs. Neal insisted that she wanted to attend the meeting, that she was moving forward with her life and could use the money from the settlement. On April 19, an advocate from the shelter accompanied Mrs. Neal to the lawyer's office (the lawyer was Mr. Neal's cousin) where Mrs. Neal discovered that her husband had lied about the meeting. Mrs. Neal felt comfortable in the public space and decided to stay and talk with her husband. A paralegal from the firm took the Neals to her office to talk. Then, with Mrs. Neal's consent, the paralegal left the couple alone to talk privately. As soon as the shelter advocate realized that they were alone she informed the paralegal that Mrs. Neal should not be alone with her husband. The paralegal went to check on Mrs. Neal, but it was too late. Mr. Neal had shot his wife to death and then committed suicide.

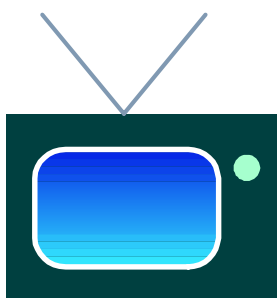
Mrs. Neal's mother filed a wrongful-death suit against the shelter for \$3.5 million. In 1997, Judge Rodney Peeples issued a directed verdict in favor of the shelter, stating there was no evidence that the shelter did anything wrong.

Mrs. Neal's family filed an appeal after the first trial and the state Court of Appeals reinstated the case. Attorneys for the family claimed the center was negligent because it failed to verify the appointment with the attorney's office, did not provide Mrs. Neal with a police escort and did not inform the attorney's office that Mrs. Neal was in an emergency battered women's shelter early on.

On March 25, a jury awarded Mrs. Neal's family \$103,840. The Cumbee Center is appealing the verdict. Legal experts consulted by "Speaking Up" said that it is impossible to know at this time whether or not this verdict will have an impact on other shelters. Negligence cases are very "fact specific" and any similar cases would need to be evaluated on a case-by-case basis.

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## NEW RESOURCES IN THE WCADV VIDEO LIBRARY



### **Battered Hearts: A Story of Family Violence**

11:30 minutes. This video was developed by S.A.F.E. Place, a domestic abuse program in Battle Creek, Michigan. Battered Hearts begins with a clip of a six year old calling 911 and witnessing her mother's murder while on the phone. The remainder of the video tells the story of family violence by the pictures of women and their children who have lived through its terror in their daily lives.

**Diversity:** The women and children featured are primarily white and African American.

### **Early Childhood Brain Development and Trauma**

This video tape is available from the Wisconsin Council on Children and Families. It was a segment on ABC News--Prime Time Live. (*Wisconsin Council on Children and Families (608) 284-0580*).

### **The Golden Years**

5 minutes. The video begins with a scenario of an older woman living with her daughter and family who is a victim of elder abuse. The rest of the video shows four women that are survivors of elder abuse talking about their experience. **Diversity:** All the women in the video are white. (*You Have the Power..Know How To Use It, Inc.*)

### **I Had a Friend Named Hope**

28 minutes. Eight women who work at a women's health clinic discuss their experiences with domestic abuse. Through the stories and questions, viewers learn about the dynamics of abuse, safety planning and how to support a woman in an abusive relationship. **Diversity:** The women in the clinic are African-American, Latina and White. Produced by the Texas Council on Family Violence.

### **Specialized Training on Preventing Domestic Violence (STOPDV)**

This video is developed by Anne O'Dell, a 20 year veteran of the San Diego Police Department. This excellent resource comes with four videos, each broken down by topic and a resource guide. Tape 1: Introduction, DUI & DV, police liability, the "big picture", Effects on Children, the "big myths", provocation and the most dangerous call, who are these batterers. Tape 2: Manipulation of police and batterer M.O.'s, lethality assessment, victims myths and facts, sophistication of the batterer. Tape 3: Strangulation Part 1 and part 2, interviewing victims, interviewing suspect and children, determining probable cause, primary or predominant aggressor, evidence collection part 1. Tape 4: Evidence collection part 2, mutual combat/mutual violence or self-defense?, report writing 1 and 2. (*Specialized Training on Preventing Domestic Violence, (619) 592-7933*).

### **Police Training Film**

11 minutes. This video was developed by Colorado Equality in conjunction with local law enforcement on how to respond to domestic abuse calls with same sex couples. The video features a gay couple during a domestic abuse incident. The video is broken into three sections: how to identify same sex relationships when the parties do not disclose; how to determine the primary physical aggressor and referrals and resources. **Diversity:** Couple and police officers are white.

**Wisconsin Coalition  
Against Domestic Violence**

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