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The European Dimension: Research results on strategies of community response and LBT communities

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1. The LARS project

The LARS project aims to develop and implement awareness-raising activities within LBT (lesbian, bisexual and trans) communities/subcultures which challenge the tabooization of domestic abuse within these communities, and which strengthen the community response to them.

The project involves five partners from the following cities/countries: Berlin, Germany; London, UK; Stockholm, Sweden; Utrecht, Netherlands and Vienna, Austria. The project is coordinated by the German umbrella organisation of German LBT anti-violence projects, 'Broken Rainbow'. The partners are all organisations, which work within the lesbian community in their respective cities and have established networks and expertise in this area. The project is evaluated by an external evaluator who is based in Berlin, Germany.

The project is divided into two parts – the first is research and the second part is implementation. In the research part, all partners undertook two phases of research, which will inform the implementation stage. Phase one was an investigation of the nature of the LBT sub-culture/communities in the local area, attitudes about domestic abuse within the LBT communities and the nature and extent of any taboo regarding domestic abuse within these communities. In this phase, data was gained via an online snapshot of attitudes and via qualitative interviews with key community agents. Each partner also mapped out their local LBT community and highlighted important key agents.

The second phase of research focused on strategies of 'community response' which have been used by mainstream organisations. Those have been categorized as primary, secondary and tertiary prevention measures. Finally, a case description focussing on coping strategies of people involved in the LBT community has been delivered.

Both research steps have been documented in national reports. The aim of this report is to synthesise the results, to elaborate national differences and commonalities and to connect mainstream strategies to the LBT community.

2. Methodology for synthesising the reports

This report has been created using qualitative content analysis. The ten original reports (two national reports per participating country) were reviewed for material relevant to the purposes of this report. The information was then classified into specific categories and this structured material was reduced to its main content.

Once the information was reduced and categorised in this way, the results of the partners were compared to look for relevant and noteworthy similarities and differences, and these were drawn out in the description and the discussion.



3. Research results

3.1 Snapshot

Each participating country undertook a brief snapshot exercise at the beginning of the LARS project. This was designed to identify some of the broad knowledge and opinions of the LBT communities on the subject of the domestic abuse. By asking the same questions in each country it is possible to compare the results and get a broad (non-scientific) picture of views before any awareness-raising work takes place. Partners placed the snapshot online and advertised it in a variety of LBT media.

Question/Agreed to ...	NL (%)	UK (%)	Sweden (%)	Austria (%)	Germany (%)
	N=107	N=21	N= 274	N=281	N=209/683 votes
1. I can easily imagine that there is violence in woman-to-woman relationships.	63.5	90.5	94.5	73.3	63.6/19.0
2. I am aware of at least one example of violence within a women-to-woman relationship.	48.6	66.7	64.2	37.7	37.3/11
3. Violence in women-to-women relationships is barely mentioned or discussed in the lesbian community.	55.1	81.0	72.3	57.6	52.6/15
4. I think that violence in women-to-women relationships should be an important issue within the lesbian community.	57.9	95.2	86.9	44.8	49.3/16
5. I would know where to get help or advice if I experienced violence within my women-to-woman relationship.	26.2	81.0	51.1	44.2	37.8/12
6. I think violence in woman-to-woman relationships is less frequent than violence within heterosexual relationships.	38.3	4.8	51.8	51.5	35.4/11
7. Violence in women-to-women relationships should not be an important subject of discussion.	7.5	61.9	3.6	Not rated	Not rated

In discussion of the results, the UK data has been excluded. Although some of the UK figures seem anomalous, the very low level of completion (only 21 people) does not allow any conclusions to be drawn from this data.

The snapshots were internet based and mainly placed on the websites of the participating organisations in each city – then advertised with a link via already established networks within the LBT communities. The target audience for respondents was LBT women in each of these cities, and this was made clear both by the placement of the snapshot and the instructions at the beginning.



There was a relatively high willingness to imagine that domestic abuse might exist in women-to-women relationships, especially in Sweden (nearly 95%), but with willingness at 60-75% everywhere. This may be surprising given the lower numbers of respondents who agreed that they were aware of a specific example of abuse, or that they think it is an important topic for discussion.

Less than 40% of respondents in Germany and Austria were aware of a specific example of abuse, and in the Netherlands this figure was under 50%. This is surprising given the high levels of abuse that exists, and the figure supports the idea that there is a taboo which is preventing discussion of the issue. The figure for Sweden is 66%, which is higher than the other countries, however relative to the higher numbers in each answer for Sweden, still represents a drop between those who can imagine it and those who know about it via direct experience.

The figures also show a relatively low level of awareness of where to get help for women-to-women domestic abuse, dropping as low as 26% in the Netherlands, but with all countries at less than 50%. This also supports the assumption that the taboo exists.

3.2 Tabooization mechanisms

It was a key aim of the project to identify the mechanisms by which any taboo operates. The information included in this section is a synthesis and summary of the findings of this research compiled across all five countries. Each partner identified six key agents of the LBT community, and undertook semi-structured qualitative interviews using the same interview schedule across all countries. Key agents were selected on the basis that they had knowledge of the LBT community, rather than the topic of domestic abuse. Each country interviewed different agents; however the types of people interviewed included:

- Representatives of L(G)BT media
- Publishers of community websites
- Bar/club promoters
- People from community organisations
- Counsellors

By using the same interview schedule, results were comparable across Europe. Each partner analysed their own results to identify the key taboo mechanisms. Partners then worked together to further synthesise and summarise results to create a list of five main tabooization categories which broadly encapsulate all the key mechanisms described by partners.

3.2.1 Normalization of domestic abuse

A number of factors work to make abusive behaviour appear 'normal' to LBT women in some circumstances. Alone, or in combination, these factors can prevent victims or witnesses from acting, because the behaviour seems ingrained, or not out of the ordinary.

There is a myth that lesbians are often in volatile relationships and that aggressive behaviour such as 'bar brawls' is normal in these relationships. Other myths about LBT women and relationships also feed into this normalisation, for example that lesbian relationships last too long; or that lesbian



relationships always go bad in the end – therefore people stay in a relationship. The myth that one partner has to be more dominant (which in itself is part of a wider myth that relationships between women necessarily follow a traditional heterosexual model of gender roles) in a relationship can also make abusive behaviour seem normal, and in addition, pressure to stay in a relationship because ‘they always have difficult sides’ can also contribute to this normalization. These myths contribute to normalization in two ways – on a surface level – the fact that behaviour is seen as normal can in itself act as a barrier to prevent domestic abuse from appearing worthy of comment or action. On another level, there may be a belief that, for example, the volatile relationships (described above) can in themselves cause or contribute to unhappiness, which in turn contributes to drinking and potentially ‘bar brawls’ or abusive behaviour – so the first myth of women-to-women relationships being volatile, or lasting too long, acts both as an excuse in itself for the behaviour, and as a deeper explanation for the behaviour which can seem to prevent the abuse from being seen for what it is.

For some respondents, it was clear that incidents of domestic abuse in public (such as in bars) happen regularly and go unchallenged by witnesses – this mere act of not intervening (described by some as a lack of moral courage) can add to the idea that the violence is normal and therefore not something that is noteworthy or needs to be challenged.

Other respondents discussed that way that incidents of abuse can sometimes be explained away flippantly or made into a joke, again, minimising and normalizing its impact.

3.2.2 Gender issues and stereotypes

There are a number of stereotypes and myths, as well as gender issues, which all act to contribute to the taboo.

Feminism of the 70s promoted a picture of women as being peaceful, gentle and nurturing. Since women are ‘naturally’ peaceful persons this can make it seem as though there must have been an extraordinary provocation to lead to violence - this can lead to blaming the victim. Further, since women are viewed as being physically weak, people may assume that they cannot inflict serious injury. This view of women as weak can also be applied to the victim of domestic abuse – in assuming that she is weak for staying with an abusive partner. Gender stereotypes and the assumption that those in women-to-women relationships still fulfil gender roles within the relationship can lead to attributing aggression and/or violence to the bigger, physically stronger one. This assumption that someone takes the ‘male’ role can also mean that there is a negative identification between the abuser and men. It is still the case that domestic abuse can be viewed as ‘normal’ in some heterosexual couples, so it follows that this would also be reflected in women-to-women relationships, especially where these gender stereotypes apply.

Stereotypes both internal to and external to the LBT communities feed into this process – these include the stereotypical view of lesbians as being masculine, having volatile relationships, being aggressive and liking drinking. In each of these stereotypes, aggressive, violent behaviour seems like a natural consequence.

Finally, the view that lesbians cannot be responsible for gender based violence, or the domestic abuse simply cannot happen in LBT relationships can also prevent discussion of the issue,



3.2.3 Silencing

There are a number of strategies which act to silence the issue of domestic abuse, on both an individual and a community level.

- **Individual level:** Women may keep silent because they do not want to surrender their violent partners to a homophobic system. Women may also not want to 'air their dirty laundry' in public, which can act as another strategy to protect the aggressive partner.
- **Community level:** The LBT communities are afraid that going public about domestic violence might promote a negative picture of lesbian women. This is viewed as being contrary to the endeavour for equal rights and being accepted as 'normal'. LBT communities promote very positive images of women-to-women partnerships; they talk about them in terms of fun and excitement, and abuse does not fit this picture.
- Where abuse or violence happens in a public setting such as a bar, the community acts to ban 'the problem' by asking both women to leave.
- In general there can be a desire to avoid 'picking sides'. This may actually reflect uncertainty regarding how to cope with the incidence, however it can also act to silence the victim.
- Sometimes communities are so small most people know each other, which can prevent people from coming forward, and when someone does, this can automatically ostracize her partner as being violent, which in itself may be a disincentive.

Finally, L(G)BT media only rarely publish an article about domestic violence, so it can appear by this silence that the problem does not exist.

On both an individual and a group level, this silencing can act as a disincentive, preventing victims from having a space in which to come forward for help, and preventing friends and communities from naming the violence and intervening.

3.2.4 Disconnecting domestic violence from the community

Where people accept that domestic violence is a problem within the LBT community, there can be a process of applying the problem to some 'other': this process disconnects the violent incidence from *this person at this time*. So, for example, it may be considered to only apply to women from rural areas or women who are working class. This can create the possibility of considering that the problem is not a general one. Further, there can be a disconnection between a theoretical knowledge that domestic abuse is a problem, and the actual experience of it, which is worsened by a view that it is a problem which is only relevant to very specific lesbian women or groups of women. This can mean that there are no words to describe one's own experiences or those of one's friends.

3.2.5 Internalized homophobia/transphobia

Some LBT women connect former violent experiences e.g. in childhood, to their present lifestyle. Since in some cases coming-out is a difficult time in which they are confronted with negative



stereotypes about lesbian women, this may promote a negative image of lesbian partnerships – which they internalize.

Thus, the partner reflects the ‘negative’, despicable aspect of their own identity and uses violent or abusive behaviour to ‘rebuff’ this aspect of her identity; or the LBT women thinks that she does not ‘deserve’ any better since she is living in a lesbian partnership. Internalised homophobia or transphobia can also act as an excuse for the aggressive behaviour of the abusive partner - explaining away the behaviour because of the additional stress of being a minority (for example because of discrimination at work)

3.2.6 Examples of taboo mechanisms

Normalisation	Gender issues and stereotypes	Silence Community - Individual	Disconnecting domestic violence and the community	Internalised homophobia/transphobia
<ul style="list-style-type: none"> • myth of lesbians being in volatile relationships <ul style="list-style-type: none"> - aggressive: bar brawls - relationships lasting too long • lack of moral courage: regular community witnesses but is not intervening • explaining away behaviour flippantly or as a joke • One has to be more dominant in a relationship than the other one • Life without her is worse than living with her • Lesbians don't like bad endings: they live up to myths about lesbian love as always going bad. So they stay. • Domestic violence 	<ul style="list-style-type: none"> • Internal community stereotypes and external stereotypes (prescriptions) • Because women are not naturally violent, it must have been an extraordinary provocation = blaming the victim • Feminism from the 70s furthered the taboo, with political lesbianism and the image of women as peaceful, gentle etc. • To be abused by a man is terrible; to be abused by a woman is despicable. • Women cannot inflict serious injury. • The myth that “I will not be abused 	<ul style="list-style-type: none"> • Denial – Shame – Guilt • Speaking about one’s experiences and living in a homophobic society openly runs the risk of handing the partner to a homophobic system – so the person endures the attacks and keeps silent • The “problem” is banned in asking both women to leave the bar etc. • LBT relationships are talked about in terms of fun/excitement • Lesbians do not air their dirty laundry • When it is not spoken about, it does not exist • Only “other” women experience abuse: cannot “own up” to it 	<ul style="list-style-type: none"> • Domestic violence is a heterosexual issue – it has nothing to do with lesbian women/women loving women. • “Other” women may experience violence, e.g. poor women, women from outside of the cities ... • No connection between theory and practice/own experiences, e.g. it is known that domestic violence is a problem, nevertheless people are unable to name own experiences or those of their friends. • Making domestic violence a private issue • Minimizing the abuse “that’s not really abuse, just 	<ul style="list-style-type: none"> • Lesbian women do not want to reproduce “mistakes” from the majority society. This makes it even more painful to accept the existence of violence in women-to-women relationships. • Since women had a hard time coming out there is a negative appreciation of LBT relationships • “Minority stress” as an excuse for violent behaviour (e.g. it seems as it is okay if a lesbian or trans* person behaves violent because she/he has had trouble at work because of her/his identity...) • Presumed correlation between own sexual identity and



<p>is a subject of disapproval for heterosexuals</p> <ul style="list-style-type: none"> • Often seen – no intervention = it must be normal, okay • Closely related to gender issues • Relationships always have a difficult side. Everyone should accept this and not make it a problem. 	<p>by a woman”</p> <ul style="list-style-type: none"> • The smaller/shorter/less physically strong woman cannot be the perpetrator • The women who stay with their female perpetrators are weak. • If there is domestic violence in a LBT relationship, one (the perpetrator) has to behave as a man = negative identification with heterosexual men; this behaviour could not count for a lesbian or trans* person. • Lesbians are superior to heterosexuals and don't do gender based things. • Domestic violence cannot happen in a LGBT relationship and therefore is not reckoned as a problem. 	<p>happening to one own</p> <ul style="list-style-type: none"> • It is only a specific type of woman experiencing domestic violence, e.g. Rural/provincial or working class women • The abuse is minimized “that’s not abuse...” • Fear of “slagging off lesbians” – don’t want to speak negatively of the community • Desire to be like average people – heterosexual people do not talk about domestic violence, so why should lesbians do so? • Lesbian relationships have to be better than the heterosexual ones. • It is a small community – everyone knows everyone • Feelings of care for the perpetrators – they must be included into the community. • Lack of resources • No one wants to take a side • An visible victim is pointing at another 	<p>...”</p> <ul style="list-style-type: none"> • Absolute inability to name or connect own experiences • Lesbian women do not know how to talk about it since it is not in a heterosexual context • Ban the trouble maker • Disappearances of differences because of a growing acceptance of homosexuality (“we are all the same therefore it has nothing to do with us”). 	<p>the experience of domestic violence: experiencing violence e.g. in childhood and developing a lesbian/trans* identity. So, if someone is a lesbian or trans* person, there is domestic violence in the relationship</p>
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		<p>woman – and that is problematic</p> <ul style="list-style-type: none"> • The LGBT media are not interested and do not cover this topic. 		
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3.3.7 Reflections on taboo mechanisms

Although there are a number of differences between the LBT communities in the participating cities/countries, there were nonetheless a surprising number of similarities in the findings relating to taboo mechanisms. Once partners had worked to understand findings beyond differences in language and descriptions, it became clear that all the taboo mechanisms identified fed into these five clear themes discussed in this section. Beyond simply being noteworthy, these similarities add credibility to the findings in each country – by analysing the results together we are considering 30 in-depth interviews across five cities in Europe, which all demonstrate five key themes that contribute to a taboo preventing action on women-to-women violence.

Although some of these findings reflect what would be a taboo in any community relating to domestic violence, there are a number of findings which are particularly and specifically relevant to LBT women. This supports the project approach of targeting our activities at this community, and responding very specifically to the taboo that relates to this group.

Although the research supports the approach of this project, the complexity and details of the taboo mechanisms that are revealed by the research demonstrate a deeply ingrained problem. It will be a particular challenge to respond appropriately with the limited resources available in the next phase of the project, and partners will need to design their activities carefully to ensure that they are responding to these specific issues

3.3 Community response strategies (mainstream)

3.3.1 Definition of “community response”

*“The current movement is toward a broader and more coordinated response to domestic violence cases, referred to as **coordinated community response** (Pence & Shepard, 1999). The objective is to develop an even more comprehensive and certain system of intervention. Battered women’s services, for instance, might maintain contact and support for women whose partners are brought to criminal court. Civil court actions might be added to domestic violence cases to increase protection for women or help with child support. Police and court response to noncompliance might be swifter and more decisive. Specialised probation officers could better manage men in batterer programs. Men with compounding psychological and alcohol problems might be referred to other kinds of treatment as well as batterer counselling.*



Much of this coordination is being achieved through domestic violence councils that include representatives from battered women's services and batterer programs, police and probation departments, court officials and prosecution officers, and other community services. There are still challenges in breaking down "turf", focusing on the victim's well-being, and obtaining the time and resources for these councils to meet and act (Gondolf 1994). [...] batterer programs, rather than being singular treatments, are increasingly becoming part of a larger system of intervention." (Gondolf 2002)

Key aspects are:

- Comprehensive system of intervention
- Networks and collaborations to improve protection of battered women

Since Gondolf (2002) the definition of "community response" has been broadened in including measures of prevention. The main aim of community response activities is to promote a societal atmosphere where domestic violence is stigmatized so that perpetrators do not feel supported by societal silence and victims will be protected.

3.3.2 Community response strategies/prevention strategies

The first obstacle to overcome was that not all partners were familiar with the terminology of 'community response', however all partners were familiar with, and worked with working with the concept of prevention.

Each partner described the community response/preventive measures to domestic abuse in their cities, categorising the approaches into primary, secondary and tertiary prevention activities. The purpose of this exercise was to identify the range of activities that are undertaken in a more developed area (mainstream domestic abuse), and to look for lessons which could be applied to our own planned local activities. For this reason, partners particularly concentrated on any evaluations of the activities, and the extent to which these mainstream activities took account of the needs of LBT women. Partners also considered any LBT-focused activities and services, and whether these were networked as part of the mainstream response.

The categorisation of activities into primary, secondary and tertiary was a helpful way to organise the activities and provide a coherent idea of the approaches across participating cities. These definitions were guidance only, and were relatively fluid, with some activities fitting within more than one definition. For example, an information leaflet containing information about domestic violence and naming help lines could be primary or secondary intervention, i.e. giving information to those who are interested as well as to those victimized. As part of the summarising process used for this report, we have re-categorised some activities according to their main focus. Where activities are mentioned in more than one category, we may here only mention them in one, where this feels more relevant.

Primary prevention is defined as activities designed to raise awareness of the existence of domestic abuse. This might include poster campaigns or leaflets highlighting signs of abuse, or school materials assisting teachers to teach young people about the subject. Any education, training or awareness



raising activities, where the aim was for short or medium term change, were categorised as primary prevention.

Secondary prevention is defined as any type of intervention into domestic abuse. This would include direct service provision such as women's shelters or refuges, helplines and counselling in services. It also includes intervention networks, or multi-agency networks which bring different agencies together to better plan and deliver services.

Tertiary prevention is defined as higher-level activities aimed at creating structural change – these activities underpin primary and secondary activities by providing the context needed to deliver them, and by creating long-term effects. Tertiary prevention might include government laws concerning domestic abuse, or local authority action plans. It also might include publicity campaigns where they are aimed at creating long-lasting societal changes in attitude, for example by challenging the connection between masculinity and violence (however these types of campaigns can also be seen as primary prevention in some circumstances).

3.3.2.1 Primary prevention

All partners described a range of primary prevention activities in participating cities. Each city had one or more awareness raising campaign, usually including posters, adverts in publications, and sometimes television, radio or cinema adverts. These campaigns were designed to raise awareness of the existence of domestic abuse, and the need to get help. In some cities campaigns were generic, and in others they were recurring campaigns with a changing focus (often yearly). Examples of these campaigns include the "Behind German Walls" campaign run by BIG e.V. in Berlin; the Operation Women's Peace campaign in Stockholm; the 'Standpoint' Campaign run by the City of Vienna and the 'Now it's enough. Help yourself. Help the other' campaign in Utrecht. London also had a number of such publicity campaigns run by local authorities and NGOs. Notable about most of these awareness campaigns is that they tended not to be inclusive of LBT women. Though there were some notable exceptions, such as the 2009 campaign run by the Stockholm police (which explicitly avoided being specific about the gender of victims and perpetrators), to a large extent these campaigns focused on heterosexual women as victims of abuse perpetrated by men. These activities were only very rarely evaluated, increasing difficulty in judging where there have been successful approaches.

All partners also described a range of publicity materials for different services, often translated into different languages (particularly when aimed at migrant women), and sometimes aimed at specific specialist areas, for example health, or women with drugs and alcohol problems. Most cities also have a website run by the municipal authorities, as well as others by NGOs, which list services available and signs of abuse.

Primary prevention activities were aimed on some occasions at the general public, and in many cases at more specific vulnerable groups such as migrant women, particular minority ethnicities, or young women. For example, most cities had some form of education work directed at young people themselves, or at teachers. This included work in Berlin by BIG e.V. in collaboration with schools and teachers regarding the impact and existence of abuse; the "Stay in Love" pilot project run by Movisie in Utrecht; workshops on sexual violence in schools in Vienna; drama workshops and peer educator projects in London and the local helpline's work in Stockholm visiting school classes to discuss



domestic abuse. Again, most of this work with young people focuses on a heterosexual model of abuse, thereby excluding the needs and experiences of young LBT women, or heterosexual or non-gender variant children witnessing violence in their LBT parent's relationships.

3.3.2.2 Secondary prevention

The majority of prevention activities in all participating cities are secondary. This category includes all actual interventions with victims and perpetrators, and therefore includes all traditional responses such as women's shelters/refuges and perpetrator programmes with (male) perpetrators – which explains the volume of activities in this category.

Each city delivers some form of integrated work between prosecutors, police and NGOs working in this area. These intervention networks are described in more details in section 3.3.3 below (description of multi-agency networks).

Each city delivered secondary prevention services which looked somewhat similar, and differed largely in scope and volume, rather than in any essential difference in approach. Some of these differences in scope and volume can be explained by the differences in relative size of the cities themselves, where larger cities with more complex municipal structures seemed to have more complex delivery structures for services. Similarities in all cities included:

- a number of women's shelters/refuges for victims
- counselling services for victims
- Telephone helplines, run by NGOs (usually women's organisations)
- Limited numbers of perpetrator programmes
- Leaflets, brochures and websites explaining victims rights, often translated into different languages
- Some form of case management and joint working where cases were more complex or risk was higher.

Though the types of secondary services were similar in each country, access to these services for LBT women was subtly different between cities. In all cases, these services were targeted at heterosexual (biological) women, where (biological) men are assumed to be perpetrators. Mainstream services in Berlin and London seem to be more prepared to respond to the needs of LBT women, whereas similar services in Stockholm, Utrecht and Vienna do much less to acknowledge or meet these needs.

In Berlin, the main helpline (BIG e.V.) will ask the *Lesbenberatung* (the Lesbian Counselling Centre) to intervene on the odd occasion that they are contacted by an LBT woman, and the mainstream counselling service for victims of domestic abuse has included same-sex case studies in its brochure, and has worked to improve the services it offers LBT women. However, the *Lesbenberatung* is not directly involved in the intervention chain (described further in 3.3.3). In London, there are some small movements in some mainstream services to better services for LBT women. Training for



Independent Domestic Violence Advocates (IDVAs) includes a half day covering the needs of L(G)BT people's who experience domestic abuse, and some women's aid organisations have worked to improve their services, including at least one organisation which has housed a trans women in a women's refuge. A local health authority working with Against Violence and Abuse (an NGO) has produced booklets directed at the L&B and T communities. However services are all set up to expect a heterosexual model of abuse and do not therefore necessarily meet the needs of LBT women, and there is no access for LBT women to perpetrator programmes.

In Stockholm services are only delivered to heterosexual women, and the needs of LBT women are not at all integrated into services – for either victims or perpetrators (though the women's crisis centre has been more open to meeting LBT women's needs – in a reactive rather than proactive way). There seem to be few secondary activities in Utrecht which are inclusive of LBT women, though one municipality has commissioned research and provided some information with a view to providing these services in this area. Vienna does not include the needs of LBT women in its secondary prevention services at all.

Most of the intervention measures described above have not been evaluated, thus their effects and success are not well documented (and defined).

3.3.2.3 Tertiary prevention

There are far more limited tertiary prevention activities in each country. Most partners mentioned legal changes which have improved the ability of the state to intervene in these cases – all passed within the last 10-15 years. These included The Domestic Violence, Crime and Victims Act 2004 in the UK (which, among other things, increased the strength of court orders to prevent violence and to remove the perpetrator from the home) and Gewaltschutzgesetz 2002 in Germany, which strengthened the rights in victims. In Vienna, the Protection from Violence Act 1997 (and further improved four times since, most recently in 2009) also improved the state's ability to remove the perpetrator from the home. In Sweden the Social Services Act specifies that those found guilty of domestic abuse may receive an increased sentence.

These various acts meet the needs of LBT victims to different extents. In the UK, the Act described above extended the definition of family to include same-sex couples, and therefore allowed access to legal redress to LBT women for the first time. However the law in Sweden includes a disparity between heterosexual domestic abuse and same-sex abuse, whereby abuse by a man against a woman in a relationship is automatically defined as a "gross violation" leading to a larger sentence; however violence within same-sex relationships *may* be considered a "gross violation" - categorisation is not automatic.

Most participating countries had some form of action plan, the responsibility of either the national government; the city government; or local municipalities (or in some cases all of these). These plans describe the approach to combating domestic abuse; including awareness campaigns, intervention networks and types of support needed by victims. In Stockholm and London there are Government Action Plans against violence which mention LBT women – however this does not remain a significant focus of the plan, and in London the plan does not differentiate services or separate needs for this group.



3.3.3 Description of multi agency networks

All the cities included in this research use the coordinated community response to combating domestic abuse. The response is named and described differently in each city, and is developed to different degrees; however the essential approach of a multi-agency intervention is similar. The more successful models are in London and Berlin, and to a lesser degree in Utrecht and Vienna.

London has the most developed system – which is known as the Multi Agency Risk Assessment Conference (MARAC). These exist in each London borough, and are attended by all key providers of secondary prevention services including the police; social services; youth services (where relevant), women's shelters; health services and other NGOs. LGBT domestic abuse organisations are sometimes included where there is an L(G)BT case being discussed – this situation is improving.

The system in Berlin is similar to that in London, however LBT organisations are not directly involved in the intervention chain – though the main service provider (BIG e.V.) may request the help of an LBT NGO where it is needed. In Berlin, Vienna and Utrecht the systems are described as intervention chains – but they are essentially meetings of key service providers from the state and NGOs. In Utrecht, evaluation shows that these intervention chains have struggled during their phase of being established, with different organisations fighting for their own services – and therefore wary of working with others.

Stockholm has been struggling to implement this method because of a lack of incentive for non-statutorily funded organisations to participate and because of political de-prioritisation of the issue following the election of a more right wing governing party. This means that cooperation in casework happens on a case by case basis, rather than on a structural basis.

3.3.4 LGBT focused prevention work

In all participating cities, prevention work specifically aimed at LBT women is considerably more limited than the work targeted at heterosexual and non-trans women.

London is the most developed in this area, and has the skeleton of a coordinated community response. There is a Domestic Abuse Forum which brings together workers and organisations delivering services to L(G)BT victims of domestic abuse for mutual support and development of professional skills, as well as responding together to consultations and improving service delivery. The Forum is in its infancy and has teething problems in its development. These include the fact that participants, who are not funded to attend, struggle to make time to support the activities, when workloads and resources are already much stretched. There is also the London Domestic Abuse Partnership which is a formal partnership between five LGBT organisations, providing a pathway of services to LGBT victims including safety planning, casework management, risk assessment, housing advice, support with the police, a survivors support group and emotional support. There are a range of materials which have been developed targeting this community, and key individual organisations providing services in London including Broken Rainbow (UK) and Galop.

Berlin has also developed prevention work targeted at the LBT community on all three levels. There is a manual aimed at mainstream service providers outlining how to work with LBT women, which



also includes information for the police. There is also a website which gives information about working with female perpetrators. The Lesbeneratung also works with LBT victims and perpetrators, and provides leaflets for them on the issues. Broken Rainbow e.V. also provides (national) support to organisations working with LBT victims and perpetrators.

In Stockholm, RFSL provides support and counselling to LBT women, and has also run a joint campaign with a mainstream NGO, aimed to raising awareness of the issue within the LBT community. There is an emergency rape clinic and a gynaecological clinic which are both accessible to LBT women. RFSL has been invited to become more involved in some mainstream services as a result of their work as part of the LARS project.

Both Utrecht and Vienna have more limited availability of appropriate secondary prevention (actual interventions with victims) than other cities. In Utrecht Taboe² works to raise awareness of the issue with mainstream and LGBT service providers and provides training (primary prevention), including developing brochures for professionals. There are no specific LBT secondary interventions however.

The situation in Vienna is similar – there is no specific LBT service provision, and this makes raising awareness a particular challenge in this city, where there is a concern that the service may not exist to meet increased demand if the awareness raising activities are a success.

3.3.5 Reflection of community response and multi-agency networks

(1) The majority of activities in mainstream domestic abuse prevention are secondary – involving direct interventions with victims. This is in contrast to LBT focused work, where the majority of activities are primary prevention: awareness raising, education and training. This is possibly reflective of a significant difference in available resources and political will. Direct interventions with victims are the most immediate and important activities meeting the needs of victims of abuse. Although some of these key services are delivered by women's organisations (such as shelters and helplines), these are now largely funded by municipal or governmental sources. However to a large degree, there is a separation between mainstream services, LBT services and domestic abuse, whereby (with some notable exceptions) mainstream services do not adequately meet the needs of LBT victims or perpetrators. European research from 2001 indicates that most mainstream organisations assume that consider the needs of lesbian women as essentially the same as mainstream women, therefore able to be treated the same way as their other female clients. This circumstance leads to the fact that those organisations are not considered accessible for lesbian and trans women.¹

(2) Further, LBT organisations often do not engage with the issue of domestic abuse, and LBT organisations have limited influence over mainstream organisations and intervention networks.

This means that delivery of secondary prevention is largely left to the very few specialist LBT domestic abuse organisations, and where these don't exist, these services are not delivered at all. In contrast, primary prevention activities can be easier to deliver – it is a cheaper and more contained project to create a targeted booklet or leaflet for example, or a poster campaign. These activities are

¹ Constance Ohms/Karin Müller (2001): In good hands? The status quo of psycho-social assistance for lesbian victims of violence and/or discrimination: a European comparison



important, as they help to challenge the taboo and equip people with information about where to access help. However if they can't be backed up with appropriate services for victims, then there are significant gaps which still need to be met in meeting the needs of LBT victims of domestic abuse.

Since this project aims to break the taboo of domestic violence within LBT communities, it needs to be taken into account that awareness raising activities may lead to an increased need for support and counselling – which may not be covered by local LBT organisations.

(3) Some form of multi-agency network exists in each city, and from a victim point of view, these can be an effective way to ensure that services are coordinated. Although in some cities there is some degree of involvement in some networks and in the main intervention chain, this appears to be somewhat ad hoc. There is some useful learning from the limited evaluations that exists, and from the experience in London of trying to build an L(G)BT community response. These lessons could be applied where LARS partners are trying to build or become involved in intervention networks as part of the taboo challenging work of the project. Evaluation in the Netherlands found that organisations involved in the intervention network sometimes spent energy fighting for position, rather than having the trust needed to confidently share information. In Stockholm, evaluation found that networks struggled to get participation from key providers who were privately owned (such as health providers) because this was not part of their core work, and they were not statutorily obliged to participate. Stockholm also found that following a change in Government priorities and political direction, the funding for the network of women's shelters was removed and therefore important coordination work is under threat. In London, the Domestic Abuse Forum also struggles because organisations are not directly resourced to participate and despite an intention to do so, sometimes struggle to make the time.

(4) Learning from these issues may suggest that if LARS partners are seeking to build, develop or participate in intervention networks in their cities, it will be of particular importance to do early work to build trust and establish key responsibilities to avoid the problems of the Netherlands. It will also be important to ensure that participants get a clear benefit from participation, and that meetings are well organised and effective – resource issues are likely to continue to be problematic within the LBT community.

(5) Of particular concern in this research has been the significant lack of evaluation of different types of intervention. Where evaluations exist, they have often not been in-depth enough to be able to learn from. Of particular interest to the project team would be any evaluation which examines different approaches targeted at particular groups. In the absence of these evaluation results, it is very difficult to define what success looks like for the project. As expressed in the Berlin report:

It became obvious that there is a lack of appropriate evaluation programs so that it is difficult to assess the effects of the described measures. Furthermore, and on a more abstract level, it is not easy to define "success" in respect of domestic violence. A lot of intersectional networks have been built aiming at ameliorating the support services for victims and perpetrators of domestic violence. Nevertheless, the meaning of success is open: Is success when violent men are barred from their home easier than before or when men are convicted to take part at perpetrator programmes? Can it be named success if men finish those programmes or is it



named success if they are not violent with next six months? Or is it success when a women's shelter is celebrating its 20th birthday and was able to grow over the years?

This lack of evaluation means that we cannot assess how successful groups have been in reaching target groups. Although we cannot learn as we would like from the evaluations themselves, we can plan within the LARS project to avoid this problem, and evaluation has been integral to the project. However, with no agreed measure of success uncovered as part of this research, the project team will have to clearly define and measure success in their own awareness raising activities - referring clearly to the aims of the project in this definition.

4. Discussion and conclusions

It is clear from the research described in this report, that prevention activities undertaken by mainstream organisations and networks only very rarely include LBT people as a specific vulnerable group. However, these activities do often aim at specific groups such as migrant women, women with disabilities and young people.

Lesbian or trans women are not usually a target group of mainstream organisations. When addressing this group, their specific living conditions have to be taken into account; besides discrimination, tabooization within these communities strongly contributes to silencing domestic violence. Thus victims and/or perpetrators only very rarely seek help from mainstream organisations, particularly because of this lack of targeting if services, and lack of awareness of specific needs. There are only very few offers of appropriate services from LBT organisations for lesbian or trans women experiencing domestic violence, and almost none for those perpetrating violence and abuse.

To break this silence it is of the utmost important to name domestic violence and to raise awareness within the LBT communities.

This research highlights some of the specific problems that the project team need to respond to as part of the awareness raising activities. Although all mechanisms are relevant, the problem of disconnection (described in section 3.2.4) may be one which each campaign particularly needs to plan to combat. Wherever this problem exists, it prevents LBT women from connecting what they learn about domestic abuse to their own particular situations, and if not tackled appropriately as part of the work, may prevent or limit the effectiveness of awareness raising activities targeted at the remaining taboo mechanisms. Activities will therefore need to be designed with some strategy to try to break through this disconnection and connect individuals and the community to their experiences of abuse.

Since taboo mechanisms are quite strong, approaches have to be developed which address LBT women at a very basic level since otherwise they will assume that this topic is not relevant for them; rather that it is the problem of a very specific group of lesbians. To raise it as a general issue it is important to close the door of refusal/dissociation.



Analysis of mainstream primary prevention measures show that they very often provide information in using leaflets, posters, videos etc. When aiming at a specific group, the native language is used or, for example, an appropriate style – such as one targeting young people, is adopted. However, these measures show their effects only in the long-term. In order to be more likely to succeed, activities need to be continued over the years and they are therefore very cost intensive. L(G)BT organisations do not have access to this kind of financial infrastructure, and therefore need to rely on more ‘low budget’ activities.

Further, posters and information leaflets may not be accessible in places where LBT women go. Usually, a counselling service or help line is used to provide services. Bar tenders may not be willing or supportive to promote leaflets about domestic violence. Therefore new tools need to be developed such as plays, short films, etc. These can then be presented at LBT events such as Christopher Street Day, the LGBT film festival etc.

Additionally, a closer collaboration with local mainstream networks is needed, as a further method of both promoting the services and also in order to ensure that these networks develop services, which better meet the needs of LBT women, where LBT services are lacking in resources and expertise.

The European overview reveals that cities are at very different stages of development in terms of the mainstream coordinated community response and the LBT response. This calls for a differentiated approach specific to the situation in each city.

Potential targets for influence and education include not only the LBT community, which is likely to be able to work together to develop effective primary prevention activities and secondary interventions based around information provision – but also mainstream service providers which may be the only realistic option for delivery of secondary victim interventions where resources do not exist for risk and case management within the LBT community itself. In this respect the LARS project has already had some success, for example in Stockholm where RFSL has been invited to work more closely with mainstream organisations as a result of the LARS work.

