Consulting the Community on Advancing an LGBTQ Alberta Framework on the Prevention of Domestic Violence

OCTOBER 2015

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Acknowledgements

A big thanks go to our community partners, Pam Krause, CEO of the Calgary Sexual Health Centre and Brandi Kapell, LGBTQ*[1] program coordinator at Peer Support Services. Both have contributed their expertise in guiding the direction of this work, and their time to conducting the consultations with Brian Hansen throughout Alberta. Our thanks also go out to the individuals from across Alberta who participated in these consultations as their feedback is invaluable to creating a safer Alberta. Shift would also like to acknowledge those who helped compile this report and its findings, including: Elena Esina, Dr. Deinera Exner-Cortens, and Elizabeth Dozois. Finally, we would like to thank the United Way of Calgary and area and The City of Calgary FCSS for contributing funds to this important work.

Suggested Citation

Hansen, B. & Wells, L. (2015). *Consulting the community on advancing an lgbtq framework on the prevention of domestic violence.* Calgary, AB: The University of Calgary, Shift: The Project to End Domestic Violence.

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[1] The asterisk denotes the diverse and evolving terminology utilized to define or describe gender and sexually diverse populations.

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1.0 Executive summary

Between November 2014 and March 2015, Shift: The Project to End Domestic Violence (University of Calgary, Faculty of Social Work) conducted a series of six consultations across Alberta to better understand risk factors related to domestic violence victimization and perpetration within lesbian, gay, bisexual, transgender and queer (LGBTQ) communities in the province, as well as barriers to help-seeking. The framework for these consultations was based on a literature review conducted by Shift, with consultations used to add the richness of lived experience to this framework. A total of 81 individuals from across Alberta were involved in the consultations, including representatives from the LGBTQ communities, the domestic violence sector, health services, school systems and law enforcement.

Participants from across Alberta agreed that there is a need for improved capacity among government and community-based organizations to provide better services to LGBTQ victims and perpetrators of domestic violence. In particular, many participants noted that a lack of appropriate and informed services presents a significant barrier to LGBTQ individuals who are trying to exit unhealthy relationships and/or violent circumstances. Domestic violence service providers themselves acknowledged the limitations of their knowledge about the unique experiences of LGBTQ individuals; however, these providers also demonstrated a genuine desire to learn about, and improve, the provision of care to prevent domestic violence within the LGBTQ community.

Stakeholders confirmed Shift's literature-based framework (Please see Appendix 1 for framework) on risk factors for domestic violence in LGBTQ relationships, saying that it was consistent with their experiences. The only significant revision that was suggested (and implemented as of September 2015) was to add, *"internalized homo/bi/transphobia"* as an additional risk factor in the framework.

When asked to identify opportunities to improve supports to LGBTQ individuals who are experiencing domestic violence, participants provided a large list of areas that need to be strengthened in order to effectively support LGBTQ individuals in maintaining healthy relationships and exiting violent relationships. These areas include:

- Increased support programs to support LGBTQ seniors experiencing abuse;
- Improving organizational culture within government and community-based organizations to be more "safe" or "[LGBTQ] friendly";
- Improving intake processes and forms (within the domestic violence sector) to be inclusive of LGBTQ individuals' experiences;
- Improving reporting forms to better collect data on prevalence and quality of service access by LGBTQ persons;

- Increased connectivity/networking between service providers to better coordinate services for LGBTQ communities;
- Increased funding for organizations engaging in LGBTQ prevention of domestic violence work;
- Increased support programs for parents of LGBTQ youth; and,
- Additional resources to support LGBTQ youth in the school system, specifically creating and supporting Gay-Straight Alliances (GSAs).

Finally, during the consultations, Shift presented a set of recommendations on how to prevent domestic violence within LGBTQ communities and participants endorsed the following recommendations specifically aimed at the Alberta government. These are,

1) Amend the Child, Youth and Family Enhancement Act to include early stigmatization and forced gender and sexual conformity of LGBTQ children and youth by parents and guardians as a form of psychological abuse.
2) Implement a social media campaign that helps to shift social norms to be more inclusive of gender and sexual diversity, and that provides information and resources to assist parents and other adult role models to provide supportive responses and assistance to LGBTQ children and youth in their care.
3) Repeal section 11.1 of the Alberta Human Rights Act, which allows parents to remove their children from educational programming that focuses on religion, human sexuality, or sexual orientation.
4) Implement a Gay-Straight Alliance policy directive with all funded Alberta school boards to create school environments free from violence and harassment, and provide awareness and education on issues related to gender and sexual identity, LGBTQ-phobia and heterosexism, and healthy relationships.[2]
5) Ensure the Government of Alberta's new Plan for Promoting Healthy Relationships and Preventing Bullying (released in 2015) targets the eradication of LGBTQ-phobia, bullying and harassment within schools and the community.
6) Increase funding to programs that focus on preventing domestic violence with a specific focus on LGBTQ children & youth and their parents.
7) Ensure current investments in domestic violence services across Alberta reflect the needs and solutions identified by the LGBTQ community.
8) Invest in action-oriented research with LGBTQ communities so that their experiences and challenges can be better understood and addressed in order to prevent domestic violence.

[2] Note: on March 19, 2015, *Bill 10 – An Act to Amend the Bill of Rights to Protect our Children* was passed which satisfies this recommendation.

In addition to confirming these recommendations, the consultation participants suggested that the Government of Alberta:

1) Fund and advance programs/initiatives that support parents of LGBTQ youth in order to reduce familial rejection, and
2) Work in partnership with the Alberta Council of Women's Shelters to develop a provincial policy for women's shelters to support the provision of consistent and culturally sensitive services to LGBTQ clients seeking shelter.

Based on the research and the information that was collected during the consultations, it is apparent that there is a need for additional work in Alberta on the prevention of domestic violence in LGBTQ communities, as well as a need to improve existing domestic violence services to better support these communities. The consultations also revealed that there is a desire by many around the province to participate in this work, and to improve the capacity of both policy makers and service providers who work with LGBTQ clients. Shift encourages the Government of Alberta and community-based organizations throughout Alberta to respond to these gaps immediately.

2.0 Introduction

The goal of Shift: The Project to End Domestic Violence (Shift) is to significantly reduce domestic violence in Alberta by using a primary prevention approach. In short, primary prevention means taking action to build resilience and prevent problems before they occur; in the case of domestic violence, this means stopping first-time victimization and perpetration. To achieve this goal, Shift works to enhance the capacity of policy makers, systems leaders, clinicians, service providers and the community at large around domestic violence and domestic violence prevention. Shift also focuses on making their research accessible and working collaboratively with a diverse range of stakeholders to inform and influence current and future domestic violence prevention efforts. This report is positioned within Shift's broader research agenda, and focuses specifically on domestic violence in lesbian, gay, bisexual, transgender and queer (LGBTQ) communities.

The lives of LGBTQ individuals are rich with complexities stemming from, in part, the social positioning of LGBTQ persons within a heteronormative societal structure.[3] In contemplation of these complexities and their relationship to domestic violence, in 2012, Shift engaged in a scoping literature review of peer reviewed and grey literature sources (e.g., government and organizational reports and documents). The purpose of this scoping review was threefold. First, our aim was to investigate the risk factors specific to domestic violence perpetration and victimization in LGBTQ communities. Second, we sought to identify the barriers to help-seeking that present challenges to LGBTQ individuals trying to exit unhealthy relationships. Third, and finally, we endeavored to create a database of the existing literature on the subject area. This research was summarized in Shift's 2014 report *Domestic Violence in Alberta's Gender and Sexually Diverse Communities: Towards a Framework for Prevention.*

The scoping review identified a set of risk factors (e.g., child abuse and exposure to domestic violence, parental alcohol abuse, etc.) that generalize to all individuals and that create conditions that can increase an individual's likelihood of being a victim of violence and/or a perpetrator of violence. The review also identified a set of *additional* risk factors that are unique to LGBTQ individuals and serve to further increase LGBTQ individuals' violence vulnerability. These additional factors include:

- LGBTQ-phobia and rigid gender norms, which ground society's concept of the set of "appropriate" behaviours for men and women and often serve to marginalize LGBTQ individuals and relationships;

[3] Heteronormativity refers to the institutionalization of heterosexuality as the normative standard and both the expected and presumed social, sexual, and romantic relations that occur between people.

- Early stigma and LGBTQ-phobic harassment experienced by children and adolescents; and,
- Social exclusion and isolation throughout the lifespan.[4]

The scoping review also found that LGBTQ individuals are as likely, if not more likely, to experience the same types of violence that are present in heterosexual relationships, and that the combination of these general risk factors and additional, LGBTQ-specific risk factors may contribute to an excess burden of violence in LGBTQ communities. The result is that LGBTQ persons may experience additional types of abuses as a result of their minority status, including:

- Shame – abusers may shame their partner for their sexual orientation and/or question the validity of their gender identity or their status as a 'real' lesbian, gay man, bisexual, or transgender person;
- Fear – abusers may use society's perceived fear and hatred of LGBTQ persons to convince their partner of the dangers and repercussions of reaching out to others;
- Control – abusers may try to control their partner's expression of sexual/gender identity; and,
- Exposure – abusers may threaten to 'out' their partner's sexual orientation or gender identity by telling others.[5]

These abuses, combined with a societal environment that is stigmatizing of non-heterosexual sexual orientations, can further exacerbate barriers to help-seeking for LGBTQ individuals. The general lack of knowledge about these issues, plus the lack of tailored policies and services, may make it more difficult for LGBTQ individuals to access support and exit abusive relationships.

Drawing on the findings of the scoping review, Shift developed a conceptual framework for domestic violence within LGBTQ communities (see Appendix 1). The framework details how general domestic violence risk factors and unique LGBTQ-specific risk factors can compound and result in increased experiences of victimization and perpetration of violence, and how structural violence, which "occurs in the context of establishing, maintaining, extending, or reducing hierarchical relations between categories of people within a society,"[6] can also create barriers for individuals who are attempting to exit unhealthy relationships where violence is present.

[4] Lorenzetti, L., Wells, L., Callaghan, T., & Logie, C. (2014). *Domestic violence in Alberta's gender and sexually diverse communities: Towards a framework for prevention*. Calgary, AB: The University of Calgary, Shift: The Project to End Domestic Violence.
[5] ibid.
[6] Iadicola, P. & Shupe, A. (2013). *Violence, Inequality, and Human Freedom.* Plymouth, UK: Rowman & Littlefield Publishers, Inc., p.390.

3.0 Methods

In order to test the validity of the conceptual framework in the Alberta LGBTQ context, Shift conducted six community consultations throughout the province of Alberta between November 2014 and March 2015.[7] The consultations focused on sharing the findings from Shift's research and establishing their relevance in the Alberta context. To do this, Shift presented the conceptual framework, and engaged key stakeholders in discussions about domestic violence in LGBTQ communities, soliciting their experiences, challenges and successes working with this population. Shift also presented a set of recommendations specific to the Alberta government to gauge their perceived relevance and effectiveness at addressing domestic violence in LGBTQ communities across Alberta.

Consultations were held throughout the province: South Region (Medicine Hat, Lethbridge), Calgary Region (Calgary), Edmonton Region (Edmonton) and the Northeast Region (Fort McMurray, Grande Prairie). To generate a list of key stakeholders within each city, Shift worked in coordination with local contacts; the list of participant stakeholders included service providers working in the domestic violence sector, as well as representatives from the LGBTQ community, school systems, and law enforcement. The community consultations engaged a total of 81 individuals from 67 distinct organizations throughout the province. A chart of participants by sector is provided in Appendix 2.

Invitations were sent out approximately four weeks in advance of the consultation and were accompanied by a copy of Shift's issue brief, *Preventing Domestic Violence in LGBTQ Communities: Understanding How Discrimination, Stigma, and Social Exclusion are Barriers to Healthy Relationships*, which summarized the findings of the research report and provided participants with the information necessary to ground the consultations. All consultations were scheduled for two hours and utilized the full allotment of time.

All consultations were conducted by a Shift research associate, Brian Hansen, who was accompanied by one or more community partner supports, including Pam Krause, President and CEO of the Calgary Sexual Health Centre (CSHC) and Brandi Kapell, LGBTQ* Program Coordinator for Peer Support Services (PSS) in Calgary. The role of the community partner(s) was to: 1) provide a more nuanced description of both the everyday experiences of individuals in LGBTQ communities along with the organizations that provide services to them, and 2) provide information on supports available for service providers to help them integrate the research into their practice. These community partners were selected because of their organizations' demonstrated ability to provide training, capacity building and support to professionals working with LGBTQ individuals.

[7] This project has been approved by the University of Calgary Conjoint Faculties Research Ethics Board.

All consultations followed the same general structure. Each started with a 15-20 minute presentation that familiarized the participants with Shift's broader work and goals, and communicated the research findings on the prevention of domestic violence within LGBTQ communities. This portion of the consultation served a knowledge translation function. Following the initial presentation, participants were guided through a series of conversation topics (see Appendix 3), designed to:

1) Elicit feedback on Shift's conceptual framework of domestic violence in LGBTQ communities;
2) Identify areas of strength and momentum in dealing with domestic violence within the local LGBTQ populations;
3) Identify key areas to improve the provision of, and reduce barriers to, accessing services for LGBTQ persons experiencing violence in relationships; and,
4) Review and get feedback on specific recommendations to the Government of Alberta that could prevent domestic violence from happening in the first place within LGBTQ communities.

Notes were taken during the consultations by the research associate as well as the co-facilitator(s), and further field notes were recorded following each of the consultations. Note-taking focused on the participants' reactions to the presented findings, as well as the participants' comments about their community's perceived strengths and weaknesses in dealing with domestic violence in LGBTQ communities. Efforts were made to capture direct quotations from the consultation's participants.

The field notes from the consultations were subsequently explored for common trends. This approach revealed themes that emerged throughout the consultations. A confirmatory approach was also used to assess the degree to which the presented research findings and conceptual framework resonated with the participants' own experiences working in the field of domestic violence and/or working with LGBTQ populations. This analysis focused on participant comments that either confirmed or disconfirmed the presented materials and resulted in some revisions to Shift's conceptual framework. The revised framework is included throughout this report and in Appendix 1.

The presentation and discussion of these themes comprises the remainder of this report.

4.0 Findings

The findings presented herein represent the five key themes that emerged from the aggregate data from the community consultations:

1) Overall support for Shift's conceptual framework on general and unique risk factors for domestic violence in LGBTQ relationships and barriers to help-seeking;
2) Ideas on how to enhance service providers' capacity to deliver effective programs that better meet the needs of LGBTQ populations to prevent domestic violence;
3) Specific recommendations for improving service provision for LGBTQ persons experiencing domestic violence in Alberta's communities;
4) Ideas on how to prevent domestic violence in Alberta's LGBTQ communities; and,
5) Equity-focused versus equality-focused approaches to service provision.

Each of these themes is summarized briefly in the sections below, which are then followed by a discussion of the findings.

Theme 1: Support for Shift's conceptual framework on *Risk Factors and Barriers to Domestic Violence Prevention in Gender and Sexually Diverse Communities (LGBTQ)*

One of the primary objectives of the community consultations was to explore Shift's conceptual framework on domestic violence risk factors and barriers to help-seeking in LGBTQ populations (Appendix 1). Service providers working in the domestic violence sector agreed that the list of general risk factors in the framework (e.g., childhood abuse, alcohol misuse, parental mental illness, etc.) increased the likelihood of domestic violence for everyone, regardless of gender identity or sexual orientation. The list of unique risk factors[8] experienced by LGBTQ individuals, however, was the subject of considerable interest and discussion.

Many of the participants attending the consultations did not come from LGBTQ-specific organizations, and most reported that they had minimal interactions with LGBTQ clients up to this point. Because of their limited exposure, stakeholders found the information on unique risk factors very helpful and, in many cases, new information.

Those participants who identified as LGBTQ and/or worked with LGBTQ-serving organizations were able to speak more comprehensively to the unique risk factors outlined in the framework and endorsed the unique risk factors that were presented. In particular, these individuals appreciated the identification of the heteronormative understanding of intimate relationships and violence as a key barrier to help-seeking for LGBTQ persons, as this understanding maintains an uncritical assumption that individuals are heterosexual and serves to perpetuate a general misunderstanding of LGBTQ-specific struggles and issues.[9]

[8] Including: Heterosexism, homo/bi/transphobia, gender and sexuality norms, and sexual stigma.
[9] For a further discussion of the impacts of hetero-normativity, see: Perlesz, A., Brown, R., Lindsay, J., McNair, R., De Vaus, D., & Pitts, M. (2006). Family in transition: Parents, children and grandparents in lesbian families give meaning to 'doing family'. *Journal of Family Therapy, 28*, 175–99.

Participants were also asked whether any risk factors were missing from the framework. One notable gap that was identified at two of the consultations was the lack of "*internalized* homo/bi/transphobia" as a listed unique risk factor for domestic violence in LGBTQ populations. Internalized homophobia consists of "the gay person's direction of negative social attitudes towards the self."[10] While internalized homo/bi/transphobia was generally addressed in Shift's research report, several LGBTQ-identified individuals felt that it should be included in the conceptual framework as well. Shift has since taken steps to amend the conceptual framework to include internalized homo/bi/transphobia amongst the list of LGBTQ-specific risk factors as a result of this feedback.

Theme 2: Ideas on how to enhance service providers' capacity to deliver effective programs to prevent domestic violence that better meet the needs of LGBTQ populations

A prominent theme that emerged throughout the consultations was the lack of capacity among service providers to meet the needs of LGBTQ populations experiencing domestic violence. Service providers themselves said that they had insufficient information and training about the unique challenges and struggles of LGBTQ persons, and several were quite candid about their own knowledge shortfalls in this area. Many shared a genuine concern that they might be unintentionally offensive to LGBTQ clients and underserving or, potentially even re-victimizing, this population; however, their opportunities to develop increased competency were limited. Some felt caught in the dilemma of wanting more training, but were reluctant to seek it out because they worried they would be shamed for their lack of knowledge. As one stakeholder commented: "we never talked about this stuff when I was [growing] up."

Emergent within this theme was a lack of understanding of the experiences and issues faced by transgender individuals. A few of the participants' felt they had a good grasp of diverse sexual orientations, but said they did not have an equivalent understanding of gender identities. For many, this lack of understanding translated to discomfort when dealing with transgender individuals. For example, one participant shared that he worried he might use the wrong language or pronouns to talk to/about someone who is transgender, so he shies away from such interactions.

In general, there was an overwhelming demand for training around gender identities; this was particularly pronounced among individuals working in shelters, who shared that current shelter systems are often not equipped to adequately support individuals that are transitioning from male to female. One shelter representative reported that their shelter

[10] Meyer, I. H., & Dean, L. (1998). Internalized homophobia, intimacy, and sexual behavior among gay and bisexual men. In G. M. Herek (Ed.), Stigma and sexual orientation: Understanding prejudice against lesbians, gay men, and bisexuals (pp. 160-186). Thousand Oaks, CA: Sage.

was developing policies on how to handle cases involving transwomen, but no specifics on these policies or their development were provided.

In addition to cultural competency training around transgender clients, participants also identified a number of other areas where increased training is needed. These included:

- Basic education on LGBTQ identities, terminology, and issues;
- Developing a common language among service providers that is inclusive of LGBTQ persons
- Strategies for conveying that a service provider is a "safe person for disclosure" or that an agency is "LGBTQ friendly";
- How to create an LGBTQ-friendly environment for clients *and* staff;
- Understanding facts and dispelling myths and misconceptions about LGBTQ individuals and communities;
- How to improve intake procedures for client-serving organizations and develop more inclusive forms and promotional resources;
- How to deliver effective services to prevent and stop domestic violence; and,
- Developing a provincial set of policies around supporting persons with diverse sexual orientations and gender identities who access shelters.

The areas identified for additional service provider training can be grouped into three broad categories: 1) improving interactions between clients and personnel, 2) creating "safe spaces" for clients and co-workers, and 3) developing and delivering effective services specific to LGBTQ populations. All of these are areas for which Shift's community partners – The Calgary Sexual Health Centre and Peer Support Services – provide professional development training.

Theme 3: Specific recommendations for improving service provision for LGBTQ persons experiencing domestic violence in Alberta's communities

Many service providers agreed that service providers themselves can create significant barriers for LGBTQ individuals who are trying to exit violent relationships. In one instance, a law enforcement official spoke of the challenges that victims face when they feel uncomfortable "outing" themselves to responding officers. In another case, a trans-identified participant shared their experiences of being misgendered by frontline service providers, prompting them to seek support elsewhere. Examples such as these affirm the portion of the conceptual framework that outlines barriers that can be created by service providers. In addition to barriers, participants identified a number of gaps/weaknesses in service provision that should be addressed, including:

- Increased support programs for parents of LGBTQ youth, particularly during pre- and early adolescence;
- Increased support programs for LGBTQ seniors experiencing abuse;
- Improving organizational culture within government- and community-based organizations to be more "safe" or "[LGBTQ] friendly";
- Improving intake processes and forms (within the domestic violence sector) to be inclusive of LGBTQ individuals' experiences;
- Improving reporting forms to better collect data on prevalence and quality of services accessed by LGBTQ persons;
- Increased connectivity/networking between service providers to better coordinate services with LGBTQ communities;
- Increased funding for organizations engaging in LGBTQ prevention of domestic violence work; and,
- Additional resources to support LGBTQ youth in the school system, specifically creating and supporting Gay-Straight Alliances (GSAs).

Examples emerged during the consultations of stakeholders who felt that efforts within the human service sector could be made to improve organizational policies and procedures to ensure LGBTQ populations are properly served. For example, one service provider mentioned that their workplace has a "same-sex danger assessment" that is specific to same-sex relationships, but it is never used. Another participant shared their trepidation around using inclusive screening procedures, stating: "if they say yes [to being LGBTQ], then what do I do?" Utilizing the tools and strategies that are already in place at some organizations is one opportunity for improvement; however, screenings and assessments are not helpful without a commensurate capacity to provide the services that are needed.

Theme 4: Ideas on how to prevent domestic violence in Alberta's LGBTQ communities

The capacity to prevent domestic violence in Alberta's LGBTQ communities varied significantly by region. While some regions had visible LGBTQ communities and resources, in other regions, LGBTQ communities were very much concealed from public view and had access to few, if any, services. There were varying degrees of awareness about LGBTQ resources on the part of the consultation participants. There seemed to be a correlation between the relative visibility of LGBTQ persons within a given community and the degree of awareness of LGBTQ services and supports within that community. For example, in one city where very few LGBTQ resources exist, one participant acknowledged: "In [our city], it's still very much a secret and some people would like to keep it that way." Statements such as this provide support for Shift's proposition that social attitudes serve as a barrier to increasing support for LGBTQ victims of violence.

Not surprisingly, the highest concentration of services identified by participants were in the province's largest cities, Calgary and Edmonton. This points to the paucity of services available to LGBTQ individuals in some of Alberta's smaller cities and rural areas, which serves as a potential barrier to help-seeking for victims of violence. However, in each consultation, regardless of city and region, examples emerged of individuals, groups and organizations that were actively, and sometimes heavily, engaged in serving the LGBTQ communities in their area. These ranged from individual healthcare professionals, support workers and community advocates in smaller communities to LGBTQ-serving organizations in larger ones.

4.1 Leverage existing resources throughout Alberta

Participants provided a wealth of information about the existing resources and infrastructure available in their cities. In the main, these resources were identified by participants who identified as LGBTQ or worked closely with LGBTQ populations. The extent to which these resources were known to main-stream service providers was mixed. The list of resources included:

- Pride festivals/parades
- LGBTQ theatre groups
- Social events, such as monthly dances
- Campus clubs that cater to an LGBTQ membership
- Publications, such as newsletters, that assume an LGBTQ readership
- HIV/AIDS organizations
- LGBTQ community organizations
- Local law enforcement "diversity officers"
- Anti-bullying/anti-homophobia events and campaigns
- Social "meet up" groups
- Affirming church(es)

Overall, these resources stand as a testament to the availability in some jurisdictions of community resources for LGBTQ persons. These community resources, however, are not typically focused on domestic violence and may not be sufficient to address the unique complexities associated with being a victim or perpetrator of domestic violence as well as a person who identifies as LGBTQ. For example, local HIV/AIDS organizations were identified in nearly every city as being advocates for LGBTQ persons, but their scope of work typically does not focus on domestic violence and their staff are thus likely ill-equipped to provide services specific to domestic violence prevention. However, organizations such as these may act as entry points for LGBTQ persons experiencing violence because they are recognized by the community as being safe spaces to access services and support. As such, there is a need to build and maintain connections between LGBTQ-serving organizations and the domestic violence sector. One encouraging example

of this type of coordination is taking place in Edmonton, where a mapping project is currently underway to chart out the list of available LGBTQ services in the city and connect them with other (mainstream) service providers. Initiatives such as this may be beneficial in other communities where service providers struggle to make appropriate referrals for their LGBTQ clients.

4.2 Increase Diversity Officers within Law Enforcement

Another promising example that emerged in several municipalities was the presence of "diversity officers" within law enforcement. The role of the diversity officer, broadly speaking, is to serve as an advocate for LGBTQ victims; raise awareness within law enforcement of LGBTQ issues; create and maintain a favorable image of law enforcement within the LGBTQ community; and, broker relationships between law enforcement services and the LGBTQ community and LGBTQ-serving organizations. It was not clear, however, if diversity officers existed in every city, and even in the largest municipalities this role was described as limited to a person or small number of persons.

4.3 Promote School-Based Gay-Straight Alliances

In the consultations, school-based student clubs – known as gay-straight alliances (GSAs) – were consistently mentioned by both those working in and outside of the education sector as being an important resource for LGBTQ youth in their community.[11] Aligning with current research on GSAs,[12] there was a sense among the consultation participants that GSAs brought value to their communities by supporting all youth and creating safer school environments for LGBTQ youth in particular. Some participants did, however, express their concerns about the accessibility of supports *after* graduation, saying that resources for individuals once they are out of school may be limited in some smaller communities.

Theme 5: Equity-focused versus equality-focused approaches to service provision

One of the most consistent messages that was heard throughout the consultations was the stated aim of "treating everyone equally." However, LGBTQ participants commented how this approach actually does a disservice to LGBTQ individuals, because it emphasizes equality rather than equity. Specifically, services that use an equality approach conflate all experiences as requiring similar treatment, whereas services that utilize an equity approach recognize that treatment must respect, and respond to, the diverse experiences of individuals. As noted in the conceptual framework, the experience of general *and* unique risk factors by LGBTQ persons necessitates a different and equity-

[11] Note: Half of the consultations were conducted prior to provincial legislation on GSAs – Bill 202 and Bill 10 – being introduced on November 20th and December 1st, 2014, respectively.
[12] See, for example: Egale Canada Human Rights Trust. (2011). *Every class in every school: The first national climate survey on homophobia, biphobia, and transphobia in Canadian schools.* Retrieved from http://egale.ca/every-class/

focused approach to violence prevention policies and services. Some consultation participants struggled with the notion of differential treatment, resisting the suggestion that victims of violence may require a response that more appropriately matched their unique experiences as an LGBTQ person. This tension was particularly salient among attendees from law enforcement; as one law enforcement officer said, "It's our job to treat everyone equally and serve the community without showing bias… I don't care who you are, we treat you the same." In another consultation, the prevalence of the endorsement of a 'one-size-fits-all' approach by police services was explicitly raised as a concern by other participants. In order to improve service provision for LGBTQ persons experiencing domestic violence, and advance the prevention of domestic violence, individuals, organizations, and community groups need to recognize the impact that an equality approach has on victims and take steps towards a more equitable approach to service delivery.

5.0 Discussion

Based on the discussions that occurred during the consultations and the themes that emerged, it is evident that there is a need for continued work to prevent domestic violence in LGBTQ communities in Alberta. There is a lack of knowledge amongst service providers about some of the populations that they are serving, despite service providers' well-meaning intentions. For some, this lack of knowledge could be, in part, a result of limited professional and/or personal exposure to individual who identify as LGBTQ. This suggests that LGBTQ individuals are either not accessing services or are not 'outing' themselves to service providers. In both cases, this serves as a barrier to help-seeking for LGBTQ persons who are trying to exit violent relationships.

In addition to a lack of exposure, a lack of training for service providers was frequently mentioned during the consultations. Many service providers do not have the knowledge-base to adequately support LGBTQ clients, and their opportunities to increase their knowledge are limited. Interestingly, while a number of local support resources were identified during the consultations (see Theme 4), most – if not all – cater to providing services for members of the public; none provide services or training designed specifically for agencies, professionals, or service providers in order to build their capacity to better serve LGBTQ clients. Based on some of the participants' comments, this lack of knowledge about LGBTQ individuals' issues and experiences translates into a lack of comfort dealing with persons who identify as LGBTQ. As shown in Theme 2, service providers may shy away from LGBTQ individuals from fear of being unintentionally offensive, which in turn can re-victimize LGBTQ individuals who do seek support. Moving forward, increased attention to, and investment in, training for service providers is necessary.

Beyond making improvements to existing service provision, a number of service gaps were identified throughout the consultations (see Theme 3). These identified gaps inform two broad recommendations. First, there is a need to ensure that organizational policies and practices create a safe environment; efforts to improve the inclusivity – and accessibility – of services for LGBTQ persons are essential to domestic violence prevention efforts throughout Alberta. Second, and in line with the first recommendation, the services offered by practitioners and the tools that they use need to be reviewed for a heterosexist understanding of individuals, relationships, and violence within relationships. This includes working with service providers to expand their understandings of the variety of identities and relationships that are common among LGBTQ persons.

Underlying beliefs that inform service provision are one of the biggest encumbrances to providing safe, appropriate, and adequate supports for LGBTQ perpetrators and victims of violence. For example, emphasizing equal treatment for all clients ignores the social context and unique experiences that put those clients at risk. As highlighted in Shift's conceptual framework (Appendix 1), adequate service provision requires acknowledgement of both the general and unique risk factors that are experienced by LGBTQ persons, and this requires accepting that some clients may need differential treatment that can respond to their individual situation and needs. To advance the prevention of domestic violence in LGBTQ relationships, existing, well-intentioned approaches to service provision need to be examined and adapted to support greater gender and sexual diversity.

Shift's conceptual framework contains a number of the unique domestic violence risk factors experienced by LGBTQ persons; however, the consultations highlighted the notable absence of internalized homo/bi/transphobia in this framework. The internalization of negative attitudes about one's sexual orientation or gender identity has been a well-documented risk factor for a number of negative health and social outcomes.[13,14,15] The absence of internalized homo/bi/transphobia was raised as a concern, in all cases, by participants who openly identified as LGBTQ and/or worked with LGBTQ-serving organizations. This may be indicative of a lack of understanding about internalized homo/bi/transphobia amongst the broader population of mainstream service providers. In response, any initiatives to improve awareness about LGBTQ

[13] Cimini, K. (1993). Psychological variables predicting internalized homophobia in gay men and ;esbians. *The Counseling Psychologist*, *27*, 132-147.
[14] Hatzenbuehler, M. L. (2009). How does sexual minority stigma "get under the skin"? A psychological mediation framework. *Psychological Bulletin, 135*, 707-730.
[15] Hatzenbuehler, M. L., Nolen-Hoeksema, S., & Erickson, S. J. (2008). Minority stress predictors of HIV risk behavior, substance use, and depressive symptoms: Results from a prospective study of bereaved gay men. *Health Psychology, 27*, 455-462.

experiences, issues or identities should include content on internalized homo/bi/transphobia.

Finally, it was clear from the consultations that the social, political, and cultural variability between Alberta's diverse regions results in uneven approaches to, and distribution of services for LGBTQ persons throughout Alberta. This presents a challenge for initiatives that might ignore regional diversity in favour of a generalized approach to domestic violence prevention. This reality is further augmented by the fact that service providers working solely in fields related to domestic violence may not be aware of the LGBTQ population within their city, the services available to them, or the best practices in serving them. In many cases, the domestic violence sector and LGBTQ-serving organizations operate in parallel to each other, rather than in collaboration and conversation. This perpetuates both a system of missed opportunities and a paucity of shared knowledge. Any efforts to address domestic violence in LGBTQ communities within Alberta's cities should, where possible, serve to connect the domestic violence sector with LGBTQ-serving organizations, and be developed with local partners who are familiar with the local social, political, and cultural context.

6.0 Next steps

Based on the findings of Shift's larger research report and the information that was collected during these consultations, it is apparent that there is a need for additional work in Alberta on the prevention of domestic violence in LGBTQ communities. The consultations also revealed that there is a desire from multiple professionals to participate in this work, and to improve the capacity of service providers to better serve LGBTQ populations experiencing abuse.

Moving forward, Shift intends to use the combined learnings from both the scoping review and the provincial consultations to draft a plan to address the structural challenges that negatively impact the lives of LGBTQ Albertans, with the intent of preventing domestic violence in LGBTQ communities. This plan will build on identified strengths and target the key areas for improvement that emerged in the community consultation process, such as improving supports for LGBTQ youth and their parents, improving human service organizational cultures to be more safe and inclusive, and increasing the networking and connectivity between service providers working both within the domestic violence sector and LGBTQ-serving organizations. This plan will build on the momentum started by the community consultation process around preventing domestic violence in LGBTQ populations across Alberta.

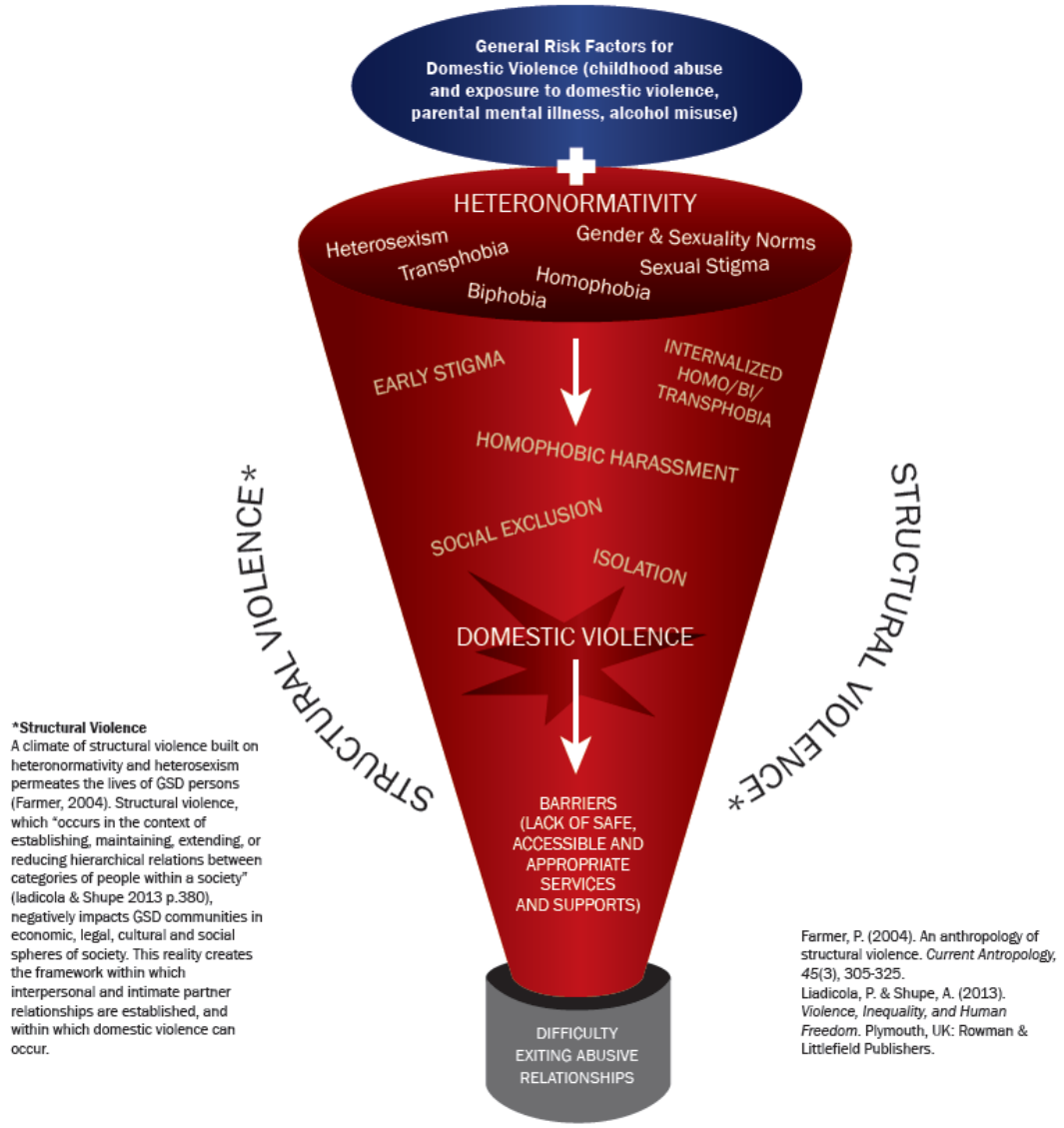
Further, Shift will continue to support organizations in their own efforts to improve capacity and service provision for LGBTQ persons. For example, the Calgary Sexual Health

Centre and Calgary Peer Support Services are working with regional service providers to improve spaces and services to be more inclusive of, and safe for, LGBTQ clients throughout Alberta.

As we advance with our next steps, it is clear that whatever action is taken needs to be responsive to the local social context and service landscape. We acknowledge that a universal approach that does not recognize the cultural nuances of Alberta's communities may prove ineffective in meeting the needs of smaller municipalities, while potentially duplicating the social infrastructure already available in Alberta's largest cities. In all cases, advancing these next steps will be undertaken in coordination with local and key government stakeholders and community leaders.

Appendix 1: Shift's conceptual framework

Risk Factors and Barriers to Domestic Violence Prevention in Gender and Sexually Diverse Communities (GSD)



***Structural Violence**
A climate of structural violence built on heteronormativity and heterosexism permeates the lives of GSD persons (Farmer, 2004). Structural violence, which "occurs in the context of establishing, maintaining, extending, or reducing hierarchical relations between categories of people within a society" (Iadicola & Shupe 2013 p.380), negatively impacts GSD communities in economic, legal, cultural and social spheres of society. This reality creates the framework within which interpersonal and intimate partner relationships are established, and within which domestic violence can occur.

Farmer, P. (2004). An anthropology of structural violence. *Current Antropology, 45*(3), 305-325.
Liadicola, P. & Shupe, A. (2013). *Violence, Inequality, and Human Freedom.* Plymouth, UK: Rowman & Littlefield Publishers.

Gender and Sexually Diverse communities experience unique risk factors for domestic violence stemming from heteronormavitiy and a climate of structural violence. Barriers to services and supports limit prevention efforts and may trap individuals in violent relationships.

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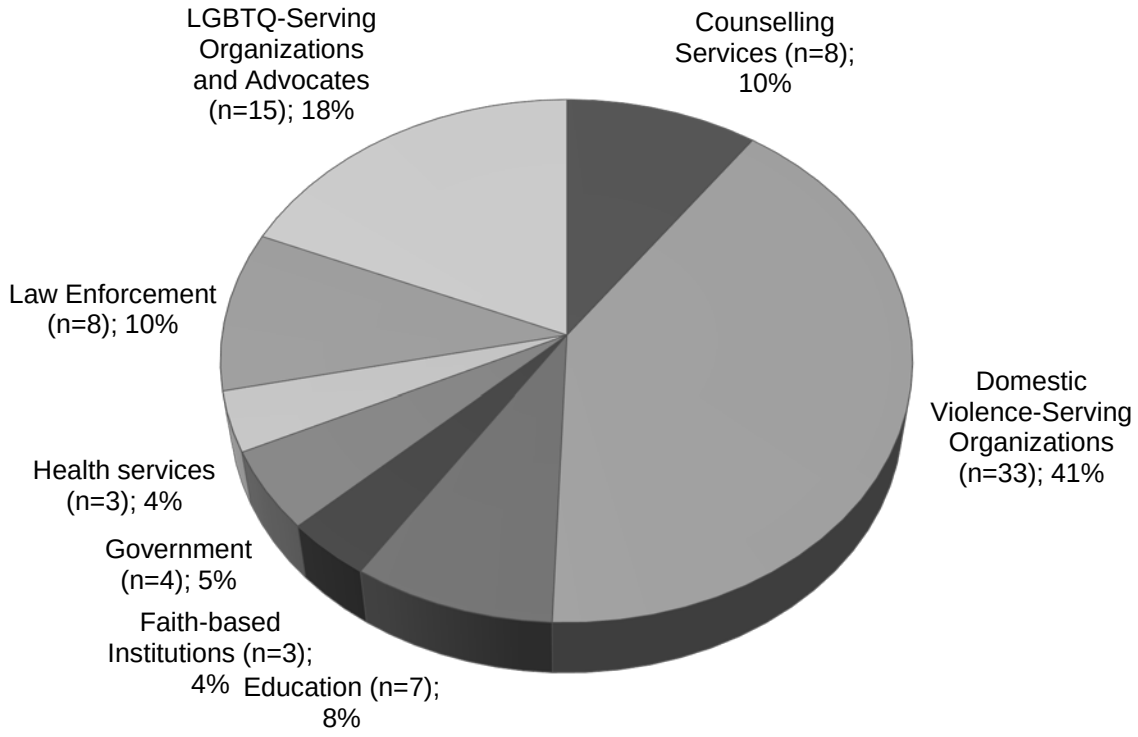
Appendix 2: Provincial consultation participants by sector (N=81)[16]



[16] Participants have been grouped into broad categories based on their sector of employment in order to protect anonymity.

Appendix 3: Facilitation guide

1) Does the research we presented resonate with you?
    a. Why/Why not?
2) Do the recommendations that we have developed make sense given what you know about the research and the Alberta context?
    a. Why/Why not?
    b. Anything missing?
3) What are the implications of this research for your practice?
    a. As an individual?
    b. Organization?
    c. Community?
4) What supports would you need to move this work forward?

SHIFT TO STOP VIOLENCE BEFORE IT STARTS

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THE PROJECT TO END DOMESTIC VIOLENCE

Initiated by The Brenda Strafford Chair in the Prevention of Domestic Violence

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