

When Love Turns Deadly: Risk Factors for Serious Harm for Queer & Trans API Survivors

Sharing New Research

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Introductions

- Susan Ghanbarpour, Independent Consultant
- Ada Palotai, Asian Pacific Institute on Gender-Based Violence
- Biney Kaur Dev, Asian Pacific Institute on Gender-Based Violence

Other Team Members

- Fatima Arain, The Northwest Network of LGBT Survivors of Abuse
- Carrie Lippy, The Northwest Network of LGBT Survivors of Abuse

Dialogue will focus on...

- Context Setting/Background
 - The Domestic Violence Homicide Prevention Demonstration Initiative
 - Culturally Responsive Project – Conducting Research about DV Homicide Risk Factors related to API Queer & Trans (QT) communities
- What We've Been Learning So Far (Preliminary Findings)
- What We Think This Means (Potential Implications for the Field)

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Free Thinking Objectives

- Is there anything else you would like from today's experience?

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What We Knew About Domestic Violence/Intimate Partner Violence

- General dynamics
 - Pattern of power and control
- Unique factors for API communities
- Unique factors for QT communities

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What We Knew About DV Homicide When We Started:



- On average, three women a day die as a result of domestic violence.¹
- Domestic violence victims are five times more likely to be killed if their abuser has access to a gun.²
- Children, coworkers, neighbors and police officers are also killed as a result of domestic violence.³
- A domestic dispute of some sort was a contributing factor in about a fifth of mass public shootings and nearly all of the familicide mass shootings.⁴

¹ Bureau of Justice Statistics, Intimate Partner Violence: Attributes of Victimization, 1993-2011 (Special Report NCJ243300).

² <https://www.thetrace.org/wp-content/uploads/2016/08/FemicideDr.Campbell.pdf>

³ Emily Meyer, Lori Post. Collateral Intimate Partner Homicide <https://doi.org/10.1177/2158244013484235>, SAGE Publications, April 2013.

⁴ <https://fas.org/sqp/crs/misc/R44126.pdf>

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What We Knew About DV Homicide in Historically Marginalized Communities

- A 2008 WSCADV report showed that women of color were found to be victims of IPH at higher rates than white women.⁵
- 19.7% of domestic violence homicide victims in Washington State were born outside the U.S. but only make up 12.1% of the population.⁶
- In a report that looked at 160 homicide cases involving APIs, largest group (68%) of victims were intimate partners, followed by:⁷
 - Children (also primary victims of familicides)
 - Perpetrators' in-laws/parents of victims

⁵ Fawcett, Jake, et al. "Now That We Know: Findings and Recommendations from the Washington State Domestic Violence Fatality Review." Washington State Coalition Against Domestic Violence. December 2008.

⁶ Washington State Domestic Violence Fatality Review. "Immigrant and Refugee Victims of Domestic Violence Homicide in Washington State." June 2011.

⁷ Dabby, C., Patel, H. & Poore, G. Shattered Lives: Homicides, Domestic Violence and Asian Families. February 2011.



What We Knew About IPV in Queer Communities

- The smallness of API QT communities impacts how survivors access supports (fear of getting support from LGBTQ and/or API services because of perceived lack of confidentiality)
- The threat of outing survivors to family/community is commonly leveraged by abusers to control survivors
- The criminalization of abusers makes survivors less likely to seek support. (i.e., there need to be alternative methods for abuser accountability besides carceral punishment)



What We Knew About IP Homicide in QT Communities

- NOT MUCH AT ALL

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History and Purpose of the DVHP DI

- To implement promising domestic violence homicide reduction and prevention models focused on identifying high-risk victims and offenders in order to target specific community-based resources directly to those cases
- To improve upon existing cooperative efforts and partnerships between and among systems agencies, victim advocacy groups, other service systems, and other parties involved in the prevention and responses to domestic violence
- Provide training and technical assistance on evidence-based risk factors for domestic and dating violence homicide and how to appropriately administer risk assessment instruments
- ***Adapt risk assessment tools and accompanying interventions to be culturally appropriate***

Timeline of the DVHP DI

- March 2013 – Vice President Biden and former Attorney General Holder announced the initial grant awards establishing the demonstration initiative
- Fall 2013 – Phase One – 12 initial sites were assessed for readiness for model implementation and data-sharing capacity
 - Culturally Specific TA Providers brought in as consultants on the project
- Fall 2014 – Phase Two – 4 sites selected to implement 2 promising domestic violence homicide prevention models: 1) Lethality Assessment Program (LAP); and 2) Domestic Violence High Risk Team (DVHRT)
 - Culturally Specific TA Providers brought in as equal partners on the project
- Fall 2016 – 2 additional sites selected to implement; continued technical assistance to all sites

Partners of the DVHP DI

- Office on Violence Against Women (funder)
- Model Technical Assistance Providers
 - Maryland Network Against Domestic Violence (creator of the LAP)
 - Jeanne Geiger Crisis Center (creator of the DVHRT)
- Culturally Specific Technical Assistance Providers
 - **Asian Pacific Institute on Gender-Based Violence** (Language Access)
 - Casa de Esperanza's National Latin@ Network for Healthy Families and Communities (Organizational Assessment)
 - Howard University (Community Engagement)
- Evaluation Team
 - National Institute of Justice
 - Yale University
 - Local Site Evaluators

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The Culturally Responsive DV Homicide Prevention Project

- To build upon the work done in Phase Two, continuing technical assistance around language access planning, cultural responsiveness, engagement of culturally specific groups/organizations, etc.
- To dig deeper into our analysis of risks posed to victims and survivors due to cultural context
 - What about risk factors beyond the interpersonal/single perpetrator-single victim sphere?
 - What about cultural context beyond just racial/ethnic identity?
 - What about those victims/survivors who are living at the intersections?

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The Culturally Responsive DV Homicide Prevention Project

- How did we land on this particular intersection?
 - Because it was meaningful to people on our team and represented real lived experience of some of us doing the work
 - Because of prior meaningful collaborations between members of our team and members of the NWN team

Culturally Responsive Project Timeline



Who we spoke to

- Interviews with 6 participants, ages 28-42
- 5 states: CA, WA, NY, NM, HI (all urban)
- Identities:
 - Korean queer cis woman
 - Japanese & white trans woman / trans feminine / non-binary
 - Japanese & white genderqueer / transmasculine person
 - Cambodian cis lesbian woman
 - Native Hawaiian & Caucasian queer cis woman
 - Native Hawaiian (Filipina, Portuguese, Irish, German) heterosexual trans woman

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What We Asked

- Personal Experiences & Identities
- Abuser Characteristics
- Family
- Friends & Other Social Supports
- Cultural Communities (e.g., racial / ethnic or sexual orientation / gender identity communities)
- Support Services
- Broader Systems

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What We've Been Learning: Risk Factors for Serious Harm

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Notable Quotes

"I didn't have access to my family. I got cut off from my family when they found out about my queerness, my trans identity, and all that stuff. This person who I was dating that was White was turning me against my own family in a way that at that time felt like they were sort of like..I was like, 'This person is on my side. They are sympathizing with me that I have this hard dynamic with my family,' and it took me a long time in getting out of that relationship and all of the work that I've done after that to parse out what was actually going on, that that was something that also was being used to isolate me from not just my family but my culture and my support."

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Risk Factors

- Isolation
 - Outing weaponized by abuser
 - Culture of silence
 - Small community
 - Language barriers

- Immigration Status / Experience
 - Multi-level effects: Personal and systems
 - Lateral culture clashes
 - Home country culture vs. U.S. culture

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Risk Factors Cont'd

- Systems
 - Housing / homelessness
 - Police
 - Courts
 - Mental health services
 - Organized religion

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Risk Factors Cont'd

- Support Services
 - Siloing of services means forced to choose between identities (API or QT)
 - Language barriers / no language access
 - Further traumatizing
 - misgendered
 - poor understanding of API or QT dynamics
 - shelters don't accept trans folks, men, GNC / non-binary
 - Exacerbate isolation

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Notable Quotes

"...Going back to how traumatizing being a survivor of a genocide could be and how there's always unresolved mental illness. If you're gay, lesbian or queer growing up in that environment and internalizing like, "I can't talk about this." It goes back to the culture of silence, not being able to talk about anything including mental illness. That could really be internalized to affect how comfortable someone feels coming out."

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Risk Factors Cont'd

- Trauma & PTSD
 - Intergenerational & historical trauma
 - Normalization of trauma & violence
 - Witnessing violence in family / community

- Abuser characteristics
 - Leverage race / racism against survivor
 - Social standing / systemic power
 - Violence not taken seriously because of QT identity

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Notable Quotes

“What I know about domestic abuse and homicide in my community is that it's normal. It's something that happens all the time, all across the world. It happens a lot within the Native Hawaiian and Asian Pacific Islander community. It's because it's normalized in cis relationships as well. But trans women accept a lot more abuse for whatever reason. Some of those reasons are, we think we're not going to be able to have another relationship like that one. Some of the other reasons are that he's financially supporting me or he accepts me for who I am. Some of the other reasons are intimidation or fear. I have trans girls that move across the fucking country to go be with these military boys and they get killed. The desperation for acceptance and love makes us do very high risk things in our romantic relationships and compromise a lot of our own beliefs and our own values, doing it.”

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Risk Factors Cont'd

- Gender Norms
 - Policing / self-policing masculinity
 - Dangers of disclosure
 - Patriarchal / sexist cultural norms

- Personal Characteristics & Identities
 - Overlapping / Stacking of marginalized identities = more vulnerability, fewer sources of support, more for abuser to weaponize
 - Substance use, economic insecurity, class, HIV status

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Risk Factors Cont'd

- Parents & Family; Social Supports (Friends, Peers, Chosen Family); Cultural Communities
 - Reinforce homophobia, culture of silence and normalization of violence couched in cultural values
 - Disrespectful to bring family into "personal issues"
 - Sense of duty to family
 - Being ostracized, disowned
 - Children
 - Small communities
 - Not sure what to do, how to help; fear of harm to themselves

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Notable Quotes

“Queer POC people are a lot of times isolated from their families because of this sort of queerness being seen as in proximity to whiteness, or the conversation being dominated by white analysis of queer experience in the States.”

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Notable Quotes

“I feel like I've heard from a lot of the Pacific Islander communities that we've worked with that there are legacies of trans and queer people being essential persons of those communities and that really the impacts of colonization have shaped and religion have really shaped, Western religions, have really shaped a lot of the stigma.”

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Risk Factors Cont'd

- Privilege, Oppression & Colonization
 - Institutional & systemic oppression
 - Codified discrimination (e.g., being fired because of Queer identity)
 - Queerness conflated with Whiteness
 - Forced to choose
 - Forced to abandoning cultural identity
 - Amnesia about how pre-colonial culture recognized different gender identities
 - No cultural resources to help respond to / heal from trauma
 - Internalized oppression
 - Impact of military presence
 - Impact of homophobia stemming from religion

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What We've Been Learning: Protective Factors and Existing or Desired Supports

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Notable Quotes

"I think it's hard because our communities often or our cultural backgrounds are often framed as weaknesses or sources of, like violence is coming from those communities. I think there's so much racism that gets attached to linking the problem to our cultural uniqueness...like non-white or non-mainstream identity. Some of the models that I see really working well are ones that are based in cultural responses and actually use our cultures' power to shape prevention efforts or to shape healthy relationship models."

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Notable Quotes

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Protective Factors

- Community responses
 - Prefer social networks & family / chosen family to formal services, so build up community's ability to respond positively
 - Spaces that support community building (yoga, film screenings, etc.)
 - Straight API allies activating to educate / mobilize others
- Cultural roots
 - Local grassroots programs that support community cultural traditions
 - Connect back to pre-colonial culture around gender identities / sexuality

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Protective Factors Cont'd

- Awareness & education
 - Normalizing / making visible queer API identities
 - More collaborations between API and LGBTQ programs
 - Leveraging small communities (big impact in compact geographic area)
 - More awareness and education in LGBTQ communities of DV / SA
- Systems reform
 - Police / courts
 - Immigration
 - Gun control
 - BUT more resources into grassroots/community efforts

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What We Think This Means: Implications for the Field

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Considerations for Working with API QT Survivors

Similar DV dynamics, but some unique considerations / circumstances:

- Isolation
- Abuser's leverage points
- Discrimination / oppression
- Social networks and family support
- Difficulties with shelters
- Siloing of services
- Privilege, oppression and colonization
- Normalization of violence
- Trauma

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More Considerations

- You're already working with QT survivors!
- Expand support to QT survivors & attending to their challenges improves support for *everybody*
- Break down siloing so API QT folks can be their whole selves
- Be intentional about hiring API QT advocates & recognizing their work (not tokenizing)
- Support / Engage in Normalization of Queerness
 - E.g., HIV / AIDS status – reducing stigma can mitigate weaponization
- Get back to our cultural roots around gender diversity

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Notable Quotes

“I think a lot of DV and SA work, to begin with, if you prioritize, or you center the conversation in the advocacy, in the policies, in everything around folks that are experiencing the most oppression, and are experiencing the most barriers in access to this stuff, then everybody else is going to benefit from it. If we can address this layer, anybody in those communities, like trans, queer, or not is going to be benefiting from that cultural shift of being able to talk about this stuff more.”

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More Considerations

- Understand that API service providers play an important role, but can't replace the role of friends and family in survivors' lives
 - Not just about improving systems / service provider response, but ALSO dedicating resources to supporting and building capacity of community-based responses
- Reconsider rules that exacerbate barriers / isolation
 - E.g., prohibiting contact with abuser; severing ties from community
- Reconsider how you are defining "safety"
 - Safety is in the eye of the beholder
 - Focus on/emphasize self-determination
 - "Decisional balance" -- trade-offs

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Resources

Organization Name	Contact Information
Asian Pacific Institute on Gender-Based Violence	415-568-3315
The Northwest Network of LGBT Survivors of Abuse	206-568-7777
Asian Women's Shelter	1-877-751-0880
Communities United Against Violence	415-333-HELP
API Chaya	1-877-922-4292

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**Thank
You!**

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