

LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUEER AND HIV-AFFECTED HATE VIOLENCE IN 2012

A REPORT FROM THE
NATIONAL COALITION OF ANTI-VIOLENCE PROGRAMS (NCAVP)

**LESBIAN, GAY, BISEXUAL, TRANSGENDER,
QUEER AND HIV-AFFECTED
HATE VIOLENCE IN 2012**

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MISSION

The National Coalition of Anti-Violence Programs (NCAVP) works to prevent, respond to, and end all forms of violence against and within lesbian, gay, bisexual, transgender, queer and HIV-affected communities. NCAVP is a national coalition of local member programs, affiliate organizations, and individuals who create systemic and social change. We strive to increase power, safety, and resources through data analysis, policy advocacy, education, and technical assistance.

PREFACE

2012 was a meaningful year for the National Coalition of Anti-Violence Programs (NCAVP) and for lesbian, gay, bisexual, transgender, queer (LGBTQ), and HIV-affected movements. The year began with an alarming trend of violent homicides of transgender people of color, leading into the spring, throughout the nation. In late spring, the Minneapolis Hennepin County District Attorney charged CeCe McDonald, a transgender woman of color, with second-degree murder, after she defended herself in response to a hate violence attack in Minneapolis. In response community organizations mobilized across the country to demand Hennepin County drop the charges against CeCe. In the summer of 2012, NCAVP worked closely with organizations in Puerto Rico to amplify attention to the crisis of violence and homicides of LGBTQ and HIV-affected people, which were being ignored by local authorities and local media. The year concluded with a tumultuous political season, in which NCAVP saw an increase in national reports of anti-LGBTQ and HIV-affected violence surrounding LGBTQ and HIV-affected-specific ballot initiatives and campaigns across the nation.

The broader LGBTQ and HIV-affected movement witnessed historic gains on specific issues in 2012, during a time when other progressive agendas came under sharp attack. For the first time, marriage equality initiatives won at the ballot box in Maine, Maryland, and Washington, showing a marked shift in public opinion on the rights of same-gender couples. NCAVP continued to advance our agenda to make federal anti-violence legislation, policies, and funding more inclusive of LGBTQ and HIV-affected communities in 2012. Through NCAVP's multi-year leadership advocating for specific LGBTQ provisions in the Violence Against Women Act (VAWA) Reauthorization, the Senate passed Senate Bill 1925, with specific protections for LGBTQ survivors included in the bill for the first time. Unfortunately, the House of Representatives stripped LGBTQ people from their version of the bill, and VAWA languished in conference before it could become law in 2012. NCAVP continued to mobilize our base and constituents to action in 2013 and a fully LGBTQ-inclusive VAWA passed the Senate and the House of Representatives, and was signed into law on March 7th, 2013. This reauthorized VAWA included *the first ever national non-discrimination protections explicitly naming sexual orientation and gender identity*. On another front, as a result of NCAVP's advocacy with the Department of Justice's Office on Violence Against Women (OVW) and Office for Victims of Crime, increased training and technical assistance, increased attention and inclusion and increased funding became available this year to support programs to reduce the pervasive gap in services for LGBTQ and HIV-affected survivors across the country. NCAVP's OVW funded National Training and Technical Assistance Center continued to provide critical training and technical assistance to non-LGBTQ and HIV-affected anti-violence organizations across the nation to support them to meet the needs of LGBTQ and HIV-affected survivors and victims.

Still, LGBTQ and HIV-affected people experience poverty at higher rates than non-LGBTQ and HIV-affected people¹, and within LGBTQ and HIV-affected communities, rates vary significantly. Transgender people

¹ Williams Institute Comparison of Hate Crimes Across Protected and Unprotected Groups. Accessed from: <http://williamsinstitute.law.ucla.edu/research/violence-crime/comparison-hate-crime-rates-update/> on April, 2012

experience poverty at twice the national rate, while transgender people of color experience four times the national poverty rate.² As specific LGBTQ and HIV-affected initiatives advanced, policy changes that reduced our nation's social safety net placed low-income LGBTQ and HIV-affected people, LGBTQ and HIV-affected people of color, LGBTQ and HIV-affected immigrants, and other marginalized communities at further risk of violence. Policies cutting aid and support for low-income people³, immigration policies by the Obama administration which deported record numbers of undocumented people⁴, and a political environment so hostile toward reproductive justice and women's rights that it became known as the "war on women,"⁵ during the 2012 Presidential election, reduced the stability and safety of marginalized communities within the United States. NCAVP knows from our membership and our national data that policies, which negatively impact marginalized communities, can also contribute to an increase in their experiences of homophobic, transphobic, and biphobic violence and barriers to services.

In 2012 NCAVP members organized locally to achieve substantial progress in addressing anti-LGBTQ and HIV-affected police violence. In New Orleans, NCAVP members collaborated with the Department of Justice to obtain a consent decree⁶, which acknowledged and memorialized local law enforcement's pervasive corruption and violence against LGBTQ and HIV-affected communities in addition to many other discriminatory policing practices. After multiple years of community actions against police violence, Los Angeles NCAVP members won campaigns that successfully led to new law enforcement policies to protect transgender and gender non-conforming people from unjust profiling, harassment, and violence. NCAVP member organizations in Washington, DC organized tirelessly throughout the year to hold local law enforcement accountable for poorly responding to police violence against LGBTQ and HIV-affected people, and to reform discriminatory policing practices, which profiled and targeted transgender people of color. In New York City, NCAVP's member organizations successfully advocated for improved rules in the NYPD's patrol guidelines to explicitly address and monitor the way that officers engage with transgender and gender non-conforming communities. These same New York based LGBTQ and HIV-affected organizations are working in coalition with communities of color, immigrant, and civil rights organizations to advance citywide legislation, which would prevent profiling based on an individual's sexual orientation, gender identity or expression, immigration status, age, race, housing status, ethnicity, religion or national origin, and to increase oversight of the NYPD.

Recognizing the need to explore alternative methods to reduce and prevent violence without relying on the criminal legal system, NCAVP members concluded their two-year study on community accountability and transformative justice in 2012. NCAVP members are continuing to explore and implement these models and

² National Center for Transgender Equality and National Gay and Lesbian Task Force, "Injustice at Every Turn" fact sheets. Accessed from: http://transequality.org/PDFs/BlackTransFactsheetFINAL_090811.pdf and http://transequality.org/Resources/Injustice_Latino_englishversion.pdf on April, 2013

³ Curtis Skinner, "Protecting the Safety Net in Tough Times: Lessons from the states." National Center for Children in Poverty. Accessed from: http://www.nccp.org/publications/pdf/text_1061.pdf on May 28, 2013.

⁴ Corey Dade, "Obama Administration Deported Record 1.5 Million People: It's All Politics." National Public Radio. Accessed from: <http://www.npr.org/blogs/itsallpolitics/2012/12/24/16797002/obama-administration-deported-record-1-5-million-people> on May 28, 2013.

⁵ Wikipedia, "War on Women." Accessed from: http://en.wikipedia.org/wiki/War_on_Women on May 28, 2013.

⁶ A consent decree is a settlement that is contained in a court order. The court takes over the settlement to ensure that it is completed. A consent decree can be against an agency, business, or a person.

organizing campaigns in their local communities across the country. NCAVP's membership is further deepening our political analysis to inform our national agenda through a current political education study on the intersections violence, racial justice, economic justice, and violence prevention.

NCAVP's Southern capacity-building project brought our annual Roundtable in-person meeting and Regional Training Academy to Richmond, Virginia in August of 2012. Through the support of the Arcus Foundation, NCAVP expanded its staff to have a Southern based organizer, who provided region-specific training, technical assistance, and rapid incident response organizing in the South. As a result of this project, NCAVP's Southern membership increased by 40%, and NCAVP worked to launch an online reporting form to meet the specific data collection needs of our Southern members. This project is continuing through the leadership of NCAVP's Southern members who are providing peer-to-peer technical assistance to implement anti-violence strategies in the unique racial, economic, and political conditions of the South.

As we reflect on the year, we are poised at a critical time of great change for LGBTQ and HIV-affected movements. An LGBTQ-inclusive Violence Against Women Act was signed into law, the Supreme Court has heard cases focused on same-gender couples' right to marry and the constitutionality of the Defense of Marriage Act, and LGBTQ and HIV-affected immigration advocates have ensured that LGBTQ and HIV-affected communities are a part of the national dialogue on comprehensive immigration reform. At the same time, the nation's economic system and policymakers are increasingly leaving low-income people with fewer and fewer resources and national initiatives to protect LGBTQ and HIV-affected people from employment discrimination and poverty are missing from the public discourse. Our nation's social safety net is dissolving amidst threats and attempts at sequestration and government shutdown. Anti-LGBTQ and HIV-affected violence is occurring at the intersection of these overlapping currents of change. Major findings from 2012 highlight that, for the third year in a row, transgender people, transgender people of color, and LGBTQ people of color experience disproportionately severe violence. NCAVP's 2012 Hate Violence Report reflects the on the ground work of our members who organized and advocated to prevent, respond to, and end violence against LGBTQ and HIV-affected communities across the country. We hope that this report will be used as a tool to amplify survivors' experiences, provide research for anti-violence campaigns, and advance our national agenda to increase power, safety, and resources for LGBTQ and HIV-affected communities.

NCAVP's Governance Committee

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EXECUTIVE SUMMARY

In 2012 overall reports of anti-LGBTQ and HIV-affected hate violence and homicides stayed relatively consistent with 2011 with slight decreases. NCAVP's 2012 hate violence report continues previous trends revealing that anti-LGBTQ and HIV-affected hate violence disproportionately impacts LGBTQ and HIV-affected communities of color, transgender people, and transgender people of color. Also consistent with previous years, white gay cisgender⁷ men represented the largest group of hate violence survivors and victims' in 2012, showing that hate violence remains a pervasive and persistent issue for all LGBTQ and HIV-affected people. These findings continue to shed light on the importance of hate violence prevention, strategic responses to violence, research, and accurate hate violence reporting as it affects LGBTQ and HIV-affected communities.

KEY FINDINGS

REPORTED INCIDENTS:

- 2012 reports of anti-LGBTQ and HIV-affected hate violence stayed relatively consistent to 2011, with a 4% decrease (2,092 in 2011, 2,016 in 2012).

HATE VIOLENCE HOMICIDES:

In 2012 anti-LGBTQ and HIV-affected homicides decreased by 16.7% from 2011, (30 in 2011 to 25 in 2012). However, the total homicides for 2012 remains the fourth highest ever recorded by NCAVP. Additionally, the disproportionate impact of homicides against people of color, transgender women, and gender non-conforming LGBTQ and HIV-affected people continued in 2012. 73.1% of all homicide victims in 2012 were people of color, yet LGBTQ and HIV-affected people of color only represented 53% of total survivors and victims. The overwhelming majority of homicide victims were Black/African American, (50%), 19.2% of victims were Latin@, 11.5% of victims were White and 3.9% of victims were Native American. 50% of total victims were transgender, all of whom identified as transgender women, yet transgender survivors and victims only represent 10.5% of total reports to NCAVP. 38.5% of homicide victims were men all of who identified as gay. Gay people represented 47.4% of victims, which mirrors the overall total of gay survivors and victims reported to NCAVP (45.3%).

MOST IMPACTED COMMUNITIES:

Transgender people were:

- 3.32 times as likely to experience police violence as compared to cisgender survivors and victims.

⁷ Cisgender is a term used to identify individuals whose gender identity and gender expression matches the sex they were assigned at birth. In the past, NCAVP has defined cisgender as "non-transgender." In this report, NCAVP replaced the term non-transgender with "cisgender" to reflect contemporary language used in the LGBTQ communities.

- 2.46 times as likely to experience physical violence by the police compared to cisgender survivors and victims.

Transgender people of color were:

- 2.59 times as likely to experience police violence compared to white cisgender survivors and victims.
- 2.37 times as likely to experience discrimination compared to white cisgender survivors and victims.

Transgender women were:

- 2.90 times as likely to experience police violence as compared to survivors and victims who were not transgender women.
- 2.71 times as likely to experience physical violence by the police as compared to survivors and victims who were not transgender women.
- 2.14 times as likely to experience discrimination as compared to survivors and victims who were not transgender women.

Gay men were:

- 3.04 times as likely to report incidents of hate violence to the police as compared to survivors and victims who were not gay men.
- 1.56 times as likely to require medical attention compared to survivors and victims who were not gay men.

LGBTQ people of color were:

- 1.82 times as likely to experience physical violence as compared to white LGBTQ survivors and victims.
- 1.70 times as likely to experience discrimination as compared to white LGBTQ survivors and victims.

SURVIVOR AND VICTIM DEMOGRAPHICS:

Almost half of survivors and victims identified as gay (45.3%), and 20.6% of survivors and victims identified as lesbian. Bisexual survivors and victims represented 8.7% of total survivors in 2012. Gay and bisexual survivors and victims remained consistent with 2011, but lesbian survivors and victims decreased slightly (24% in 2011, and 20.6% in 2012). 30.4% of total hate violence survivors and victims identified as men, a considerable decrease from 50% in 2011. Women represented the second highest number of reports (25%), which is a decrease from 34% in 2011. Transgender identified survivors and victims represented 10.5% of overall survivors and victims, a decrease from 18% in 2011. Undocumented survivors represented 6.4% of total survivors, a slight decrease from 8% in 2011.

POLICE RESPONSE:

Only 56% of survivors reported their incidents to the police, a slight increase from 2011 (52%). Of survivors and victims' who reported to the police, 48% reported incidents of police misconduct to NCAVP, a considerable increase from 2011 (32%). While total number of survivors reporting to the police remains small, NCAVP finds that this number is growing incrementally over the years, 45.3% in 2010, 52% in 2011

and 56.5% in 2012. Of those who interacted with the police, 26.8% reported that the police attitudes were hostile, an increase from 2011 (18%).

POLICE CLASSIFICATION:

In 2012, 77.2% of hate violence incidents reported to the police were classified as bias crimes, a substantial increase from 2011 (55%).

DISABILITY:

In 2012 40% of survivors and victims reported having a disability, a substantial increase from 2011 (11%). Of those who reported having a disability, 52.8% of survivors and victims reported having a disability associated with their mental health. 35.8% of survivors and victims reported having a physical disability, 6.3% of survivors and victims reported having a learning disability, 2.8% of survivors reported being blind and 2.3% of survivors reported being deaf.

CHARACTERISTICS OF OFFENDERS:

Cisgender men made up the highest proportion of hate violence offenders in both 2011 and 2012, with a decrease in the number of cisgender men in 2012 (46% in 2012, 60% in 2011). Police made up 23.9% of unknown offenders, a considerable increase from 2011 (8%). In 2012, 63% of survivors reported one offender, a decrease from 2011 (78%). 19% of survivors reported 2-5 offenders, consistent with 2011 (20%). 16% of survivors reported 10 or more offenders, an increase from 2011 (10%).

CHARACTERISTICS OF INCIDENT SITES:

The most common site type remains private residence (38.6% in 2012, more than double the 18% reported in 2011). The second highest site type was the street (24.8% in 2012, an increase from 15% in 2011).

RECOMMENDATIONS

FOR POLICYMAKERS AND FUNDERS IN BRIEF

End the root causes of anti-LGBTQ and HIV-affected violence through addressing anti-LGBTQ and HIV-affected institutional, cultural, and interpersonal discrimination.

- Federal, state, and local governments should pass and amend non-discrimination laws such as the Employment Non-Discrimination Act, the Repeal HIV Discrimination Act, and the Fair Housing Act. Federal, state, and local governments should also enact policies that protect LGBTQ and HIV-affected communities from discrimination based on sexual orientation, gender identity, gender expression, and HIV-status.
- Policymakers and public figures should promote safety for LGBTQ and HIV-affected people by denouncing homophobic, biphobic, and transphobic statements, laws, and programs.
- Federal, state, and local governments should pass laws and policies that prevent LGBTQ and HIV-affected students from experiencing bullying, harassment, and violence in schools such as the Student Non-Discrimination Act and the Safe Schools Improvement Act.
- Federal, state, and local governments should mandate trainings that increase first responders' and non-LGBTQ and HIV-affected direct service providers' knowledge and competency on serving LGBTQ and HIV-affected survivors of violence.

Decrease Risk of Severe Violence and Homicide through ending LGBTQ and HIV-affected poverty in LGBTQ and HIV-affected communities.

- Policymakers and law enforcement agencies should end policies, which profile and police people engaged in survival crimes, and support harm reduction services to support people engaged in survival crimes, such as sex work.
- Federal, state, and local governments should remove barriers to access public benefits including food stamps and public housing for people with criminal records.
- Federal, state, and local governments should end laws and policies, which criminalize homelessness, HIV-status, participation in sex work, and drug possession to increase safety for the most severely impacted LGBTQ and HIV-affected survivors and victims of hate violence.
- The United States Interagency Council on Homelessness should establish an LGBTQ and HIV-affected specific research agenda to research policies and programs to address hate violence against LGBTQ and HIV-affected homeless people.

Collect Data and Expand Research on LGBTQ and HIV-affected communities' experiences of violence.

- Federal, state, and local governments should collect and analyze data on LGBTQ and HIV-affected hate violence survivors and victims whenever demographic information is requested.
- Private funders should support community-based organizations and research institutions to collect data and research on the prevalence, severity, and causes of anti-LGBTQ and HIV-affected hate violence.
- Federal, state, and local governments should reduce reporting barriers for LGBTQ and HIV-affected survivors including removing laws and policies that prevent survivors from accessing law enforcement.

End law enforcement violence against LGBTQ and HIV-affected people.

- Federal, state, and local governments should enact policies that prohibit police profiling such as the End Racial Profiling Ban that includes provisions on profiling based on sexual orientation, gender identity, gender expression, immigration status, housing status, and race.
- Policymakers should ensure that police officers are investigated and held accountable for homophobic, biphobic, and transphobic harassment and violence.
- Federal, state, and local governments should enact humane, LGBTQ-inclusive immigration reform policies which create a pathway to citizenship for undocumented immigrants and end “enforcement-only” policies such as the Secure Communities program.
- The Center for Disease Control and the Department of Justice should issue guidance condemning reliance on the use of condoms as evidence of prostitution law violations to improve the public safety and public health of LGBTQ and HIV-affected people. State and local law enforcement agencies should prohibit the use of condoms as evidence of prostitution law violations.

Increase Funding for LGBTQ and HIV-affected anti-violence support and prevention programs.

- Federal, state, and local governments should fund programs that increase government support for LGBTQ and HIV-affected anti-violence programs by including LGBTQ and HIV-affected specific funding in all federal, state, and local anti-violence funding streams.
- Public and private funders should support programs that provide training and technical assistance on serving LGBTQ and HIV-affected survivors of violence to anti-violence grantees.
- Public and private funders should support community-based hate violence prevention initiatives to target programming within communities that are disproportionately affected by violence or underreporting their incidents of violence.
- Policymakers and funders should support public education and awareness campaigns to reduce and end homophobia, biphobia, and transphobia.

INTRODUCTION

The 2012 LGBTQ and HIV-affected hate violence report highlights annual and multi-year trends grounded in contemporary research to give policymakers, LGBTQ and HIV-affected communities, and anti-violence practitioners a wide-ranging viewpoint on the current dynamics in homophobic, biphobic, and transphobic hate violence. It represents the most in-depth information to date on anti-LGBTQ and HIV-affected hate violence available throughout the U.S. including: detailed demographic information on survivors and victims of violence, information on hate violence offenders, and data on police and medical response to anti-LGBTQ and HIV-affected incidents of violence.

Data on LGBTQ and HIV-affected communities in the United States is extremely limited, making it challenging for NCAVP to compare its data on LGBTQ and HIV-affected survivors and victims to data on overall LGBTQ and HIV-affected communities. Current data that exists suggests that between 20 – 25% of lesbian and gay people experience hate violence within their lifetimes.⁸ Unfortunately, data on the prevalence of hate violence against queer, bisexual, transgender, and HIV-affected people is virtually non-existent. The U.S. Census and the American Community Survey, the main data collection surveys for the federal government, and the National Crime Victimization Survey, the federal survey on violence in the U.S., contains no questions on sexual orientation or gender identity. However, as of 2011 The U.S. Census and the American Community Survey both ask questions regarding same-sex couple households. The only comparable data to NCAVP's hate violence report is the "Hate Crime Statistics" report annually released by the FBI's Criminal Justice Information Services Division. This report documents hate crimes motivated by bias against sexual orientation that local law enforcement agencies report to the FBI annually. The FBI is currently working to collect information on hate crimes data motivated on the basis of gender identity in accordance with the Matthew Shepard James Byrd Jr. Hate Crime Prevention Act, but this information is not currently published.⁹ In 2011¹⁰

Definitions In This Report

Cisgender: A term used to describe an individual whose self-perception of their gender matches the sex they were assigned at birth.

Gay: A term that describes a person who identifies as a man who is primarily or exclusively attracted to other people who identify as men. It is also sometimes used as an umbrella term to describe LGBTQ communities.

Gender identity: A term that describes how an individual describes their gender. A person's gender identity may be different than social norms and/or stereotypes of the sex they were assigned at birth. There are a wide range of gender identities and expressions, including identifying as a man, woman, identifying as neither, and identifying as gender non-conforming.

Gender non-conforming: A term that describes a person whose gender identity or expression falls outside or transcends what is considered to be traditional gender norms for their assigned sex at birth.

Lesbian: A term that describes a person who identifies as a woman who is primarily or exclusively attracted to other people who identify as women.

(Continued on next page)

⁸ Hate Crime Victimization Among Lesbian, Gay, and Bisexual Adults: Prevalence, Psychological Correlates, and Methodological Issues Access from: <http://psychology.ucdavis.edu/rainbow/html/violence.PDF> on May 2013.

⁹ FBI « Criminal Justice Information Services Division 2011 Hate Crimes Report ». Accessed from: <http://www.fbi.gov/about-us/cjis/ucr/hate-crime/2010/tables/table-4-offenses-offense-type-by-bias-motivation-2010.xls> on April, 4 2013.

¹⁰ NCAVP compared their 2011 data to the FBI's 2011 data because the 2012 FBI data is not available.

NCAVP documented over 500 more survivors and victims of hate violence than the FBI in 2011 (1,508 survivors and victims compared to 2,092 survivors and victims.)¹¹ While the FBI tracks hate crimes and NCAVP tracks hate violence including incidents that may not reported to law enforcement or incidents that law enforcement may not classify as a hate crime, NCAVP still finds the stark difference between these incidents disconcerting.

Without comprehensive data about violence against LGBTQ and HIV-affected communities, policymakers, advocates, practitioners, and LGBTQ and HIV-affected communities have less information on the dynamics of anti-LGBTQ and HIV-affected hate violence. This reduces LGBTQ and HIV-affected communities' ability to create programs that increase safety and support for LGBTQ and HIV-affected survivors and victims and limits LGBTQ and HIV-affected anti-violence programs' ability to measure and evaluate the impact of their programs. This lack of prevalence and demographic data creates barriers for programs seeking to measure their impact because they cannot compare their programmatic rates of violence with overall rates of hate violence for LGBTQ and HIV-affected communities. It also affects anti-violence programs' ability to tailor programming to the communities who are most severely impacted by violence.

Recognizing the unique and critical role that NCAVP's hate violence report serves, NCAVP continually strives to ensure that this report is accessible to multiple audiences, reflects the current lived experiences of LGBTQ and HIV-affected communities, and provides practical tools to assist anti-violence programs and policymakers working to end anti-LGBTQ and HIV-affected hate violence. In 2012 NCAVP continued the data enhancement project, which originally started in 2011. This project allowed NCAVP to highlight the specific impact of hate violence and intimate partner violence on transgender and LGBTQ and HIV-affected communities of color among many other communities within our annual reports. In this year's report NCAVP staff conducted the person-level statistical analysis with limited assistance from consultants. This increased the amount of variables and types of person-level analysis that NCAVP conducted, which allowed NCAVP to perform a deeper investigation into multi-year trends on severe violence against LGBTQ and HIV-affected communities of color, transgender communities of color, and transgender communities. The increasing severity of hate violence LGBTQ and HIV-affected communities face only reinforces NCAVP's goal to find new ways to document and analyze hate violence to support critical legislative, policy, and cultural change.

Definitions In This Report (continued)

Queer: A political and sometimes controversial term that some LGBTQ people have reclaimed. Used frequently by younger LGBTQ people, activists, and academics, the term is broadly inclusive, and can refer either to gender identity, sexual orientation or both. It is also sometimes used as an umbrella term to describe LGBTQ communities.

Sexual orientation: A term that describes a person's physical or emotional attraction to people of a specific gender or multiple genders. It is the culturally defined set of meanings through which people describe their sexual and romantic attractions. Sexual orientation is not static and can shift over time.

Transgender: An umbrella term used to describe a group of individuals whose gender identity and how it is expressed, to varying degrees, are different than the sex assigned at birth. Transgender identity relates to a person's gender identity.

¹¹ Ibid.

METHODOLOGY

HOW ORGANIZATIONS COLLECTED THE DATA

This report contains data collected in 2012 by NCAVP's member programs. Fifteen NCAVP members and ally organizations across eighteen states submitted data to NCAVP. Organizations collected this information from survivors and victims who contacted LGBTQ and HIV-affected anti-violence programs in person, by calling a hotline, or by making a report online. Most NCAVP member programs used NCAVP's Uniform Incident Reporting Form to document the violence that occurred to these individuals. Others have adapted and incorporated the form into other data collection systems. In 2012, NCAVP continued to use data collection tools that were developed in previous years with NCAVP staff and consultants. With the use of these tools, NCAVP collected aggregate data and person-level data from local organizations that gives policy makers, first responders, and LGBTQ and HIV-affected communities a comprehensive depiction of anti-LGBTQ and HIV-affected hate violence. Person-level data allowed NCAVP to anonymously analyze multiple facts about one victim or survivor. This allowed us to explore trends in hate violence, such as whether or not types of violence varied across LGBTQ and HIV-affected survivor's identities (i.e. "do women experience more physical violence?"). It also allowed NCAVP to examine survivors and victims with multiple intersecting identities such as LGBTQ and HIV-affected people of color and transgender people of color and the types of violence they experienced.

DATA COMPILATION AND ANALYSIS

With support from the Arcus Foundation, NCAVP provided each member program with tailored support to submit data in ways that met their program's needs while remaining consistent across all organizations. NCAVP cleaned and coded the data to compile it for the person-level data analysis. For the aggregate data, NCAVP compared data proportionally for each variable between 2011 and 2012 allowing NCAVP to accurately assess increases or decreases in violence, demographic shifts for survivors and victims, or demographic shifts for offenders across these two years. For the person-level data, NCAVP coded one hundred-forty six variables on 2,079 survivors and victims in order to explore the relationships between various identities and experiences in this report. This is a 92.7% expansion from 2011's person-level data set, which analyzed 1,079 survivors and victims. NCAVP selected statistics for publication based upon their relevance, statistical significance ($p \leq 0.05$), and reliability. Additional data not included in the report may be available upon request by contacting NCAVP. In order to protect survivor confidentiality, not all information will be available to the public.

CONTRIBUTING ORGANIZATIONS

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- Community United Against Violence (CUAV)**, San Francisco, CA
- Equality Michigan** Detroit, MI
- Fenway Health Violence Recovery Program**, Boston, MA
- Montrose Counseling Center**, Houston, TX
- New York City Anti-Violence Project (AVP)**, New York, NY
- SafeSpace at the RU12? Community Center**, Winooski, VT
- Sean's Last Wish**, Greenville, SC (*data also reflects reports from North Carolina and Georgia*)
- Southern Poverty Law Center**, located in Montgomery, AL (*collects national hate violence data*)
- Wingspan Anti-Violence Programs**, Tucson, AZ

AGGREGATE ONLY

- Los Angeles Gay & Lesbian Center**, Los Angeles, CA
- Kansas City Anti-Violence Project (KCAVP)**, Kansas City, MO (*data reflects reports from Kansas and Missouri*)
- OutFront Minnesota**, Minneapolis, MN

LIMITATIONS OF THE FINDINGS

The vast majority of this report contains information from LGBTQ and HIV-affected-identified individuals who experienced hate violence and sought support from NCAVP member programs. Local member organizations then submitted data to NCAVP, which NCAVP compiled and analyzed for national trends. Since NCAVP only measures data collected from individuals who self-reported and from other public sources, it is unlikely that these numbers represent all incidents of violence against LGBTQ and HIV-affected people in the United States. NCAVP's data may particularly omit populations such as incarcerated people, people in rural communities, people who may not know about their local anti-violence program (AVP), people living where the closest AVP is too far away to reach, people who are not out, people who are uncomfortable with reporting violence, and people who face other barriers to accessing services or reporting. While the information contained in this report provides a detailed picture of the individual survivors and victims; it cannot and should not be extrapolated to represent the prevalence of hate violence against LGBTQ and HIV-affected communities in the United States. NCAVP members' capacity for data collection also varied based upon the programs' financial resources, access to technology, and other factors. These considerations resulted in some programs submitting partial information in some categories creating incomplete and dissimilar amounts of data for different variables within 2012's data set. Recognizing this, NCAVP continues to work to address these issues to create the most complete and consistent data set possible.

NCAVP made only slight changes to the data collection forms from 2011 to 2012. These slight changes allowed increased accuracy for NCAVP's 2012 data analysis. When comparable data is not available, NCAVP documents this within the report. In addition, NCAVP has worked to increase reporting from our members and decrease the amount of unknown data. As NCAVP continues to collect aggregate data, our data analysis and annual comparisons from year to year gradually become more accurate and the reader may see shifts in the proportions over time. NCAVP recognizes that these shifts are in part, illuminating a more precise depiction of the experiences of LGBTQ and HIV-affected survivors and victims of hate violence.

FINDINGS

NCAVP's 2012 findings are based on analyzing aggregate and person-level data from reporting members. The findings include information on survivor demographics, incident details, most impacted identities, information about offenders, data on access to services for LGBTQ and HIV-affected hate violence survivors and victims, and information on police response for survivors and victims. This data can help us identify key gaps in survivor and victim's access to support and trends in LGBTQ and HIV-affected survivor and victim demographics over time. This year's findings contain an analysis of both aggregate and person level data.

MAJOR FINDINGS IN THIS SECTION

ANTI-LGBTQ AND HIV-AFFECTED VIOLENCE:

Reports of anti-LGBTQ and HIV-affected hate violence decreased by 4% (2,092 in 2011, 2,016 in 2012).

HATE VIOLENCE HOMICIDES:

Anti-LGBTQ and HIV-affected homicides decreased from 30 in 2011 to 25 in 2012, a 16.7% decrease.

HATE VIOLENCE SURVIVOR AND VICTIM DEMOGRAPHICS

Almost half of survivors and victims (45.3%) identified as gay, and 20.6% of survivors and victims identified as lesbian. 30.4% of total hate violence survivors and victims identified as men a considerable decrease from 50% in 2011.

MOST IMPACTED IDENTITIES:

- Transgender people were 3.32 times as likely to experience police violence compared to cisgender survivors and victims.¹²
- Transgender people of color were 2.59 times as likely to experience police violence compared to white cisgender survivors and victims.¹³
- Transgender women were 2.90 times as likely to experience police violence compared to overall survivors and victims.¹⁴
- Gay men were 3.04 times as likely to report incidents of hate violence to the police compared to survivors and victims who were not gay men.¹⁵
- LGBTQ people of color were 1.82 times as likely to experience physical violence compared to white LGBTQ survivors and victims.¹⁶

TRENDS IN ANTI-LGBTQ AND HIV-AFFECTED VIOLENCE:

The most common type of violence reported to NCAVP in 2012 was discrimination (16.5%), which represents a decrease from 2011 (23%).

POLICE RESPONSE

Only 56% of survivors and victims reported their incidents to the police a slight increase from 2011 (52%). Of those who interacted with the police, 26.8% reported that the police attitudes were hostile, an increase

¹² n=694, 95% CI=1.848, 5.994

¹³ n=519, 95% CI=1.274-5.305

¹⁴ n=694, 95% CI=1.526, 5.485

¹⁵ n=389, 95% CI=2.005, 4.603

¹⁶ n=646, 95% CI=1.280, 2.573

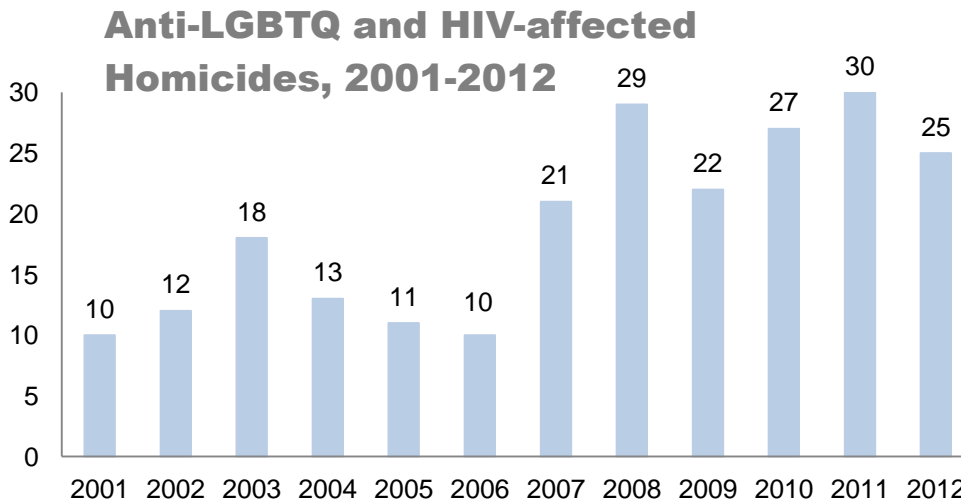
from 2011 (18%). 77% of survivors and victims reported that police took their complaint, a slight decrease from 2011 (81%).

CHARACTERISTICS OF HATE VIOLENCE OFFENDERS

Cisgender men made up the highest percentage of hate violence offenders in both 2011 and 2012, with a decrease in the number of cisgender men in 2012 (46% in 2012, 60% in 2011). 73% of unknown offenders were strangers. Police made up 23.9% of unknown offenders, an increase from 2011(8%).

HATE VIOLENCE HOMICIDES

While NCAVP had a slight decrease in homicides in 2012, the severity of violence against transgender, transgender people of color, and LGBTQ and HIV-affected people of color remains alarmingly high and suggests these communities are at highest risk of homicide.



HATE VIOLENCE HOMICIDE DEMOGRAPHICS

In 2012 anti-LGBTQ and HIV-affected homicides decreased from 2011 by 16.7% (30 in 2011 to 25 in 2012). While NCAVP had a decrease in homicides in 2012, the total homicides for 2012 remains the fourth highest ever recorded by NCAVP. Severe violence against people of color, transgender, and gender non-conforming LGBTQ and HIV-affected people remains alarmingly high. 73.1% of all homicide victims in 2012 were people of color, yet LGBTQ and HIV-affected people of color only represented 53% of total survivors and victims. The overwhelming majority of homicide victims were Black and African American (53.8%), 15.4% of victims were Latin@, 11.5% of victims were White, and 3.85% of victims were Native American. More than half (61.5%) of victims were women, many of whom identified as transgender women. 53.8% of total victims were transgender women, yet transgender survivors and victims only represent 10.5% of total reports to NCAVP. 34.6% of homicide victims were gay men. Gay people¹⁷ represented 47.4% of victim’s, which mirrors the overall total of gay survivors and victims reported to NCAVP (45.3%).

This data continues a three year trend in which transgender women, LGBTQ and HIV-affected people of color, and transgender people of color experienced a greater risk of homicide than other LGBTQ and HIV-affected people. This data demonstrates that the most marginalized LGBTQ and HIV-affected communities experience

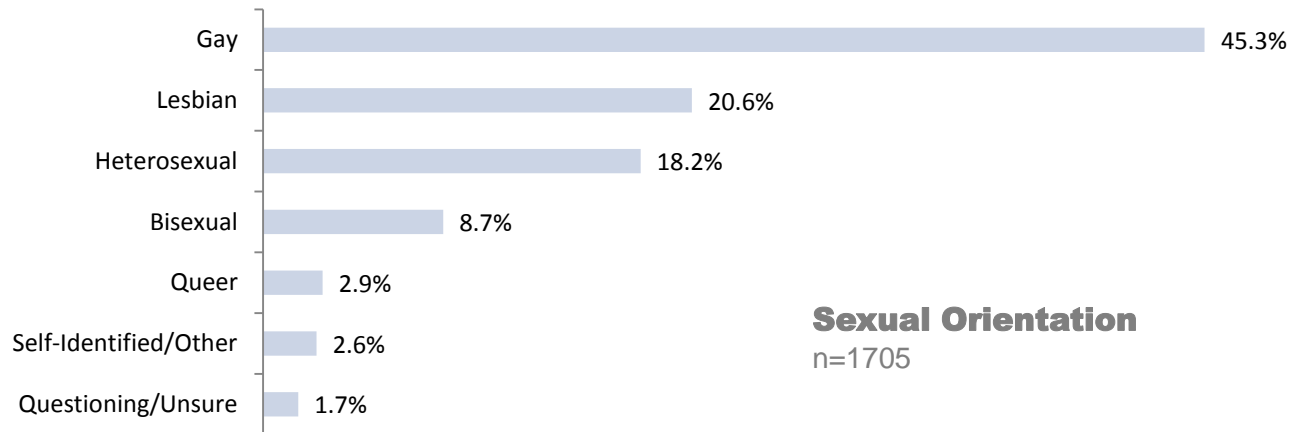
¹⁷ NCAVP uses the term gay people to deliberately describe the experiences of all survivors and victims who identify as gay regardless of gender identity.

higher rates of severe violence. NCAVP will continue to document this trend and to research strategies to address this violence for these communities. In addition to the homicides listed within this report, NCAVP monitored several additional LGBTQ and HIV-affected homicides in 2012. Unfortunately there was not enough information from media sources, NCAVP member programs, or law enforcement for NCAVP to connect these homicides to homophobic, biphobic, or transphobic hate violence.

SURVIVOR AND VICTIM DEMOGRAPHICS

The data in the following section describes the many identities of LGBTQ and HIV-affected Hate Violence survivors and victims in 2012. LGBTQ and HIV-affected people often have several intersecting marginalized identities, such as their racial identity, gender identity, socio-economic status, immigration status, and disability status. In this section NCAVP examines the identities of LGBTQ and HIV-affected survivors and victims who sought assistance from NCAVP programs, thus allowing NCAVP to better understand the diversity of LGBTQ and HIV-affected Hate Violence survivors and victims in 2012.

SEXUAL ORIENTATION

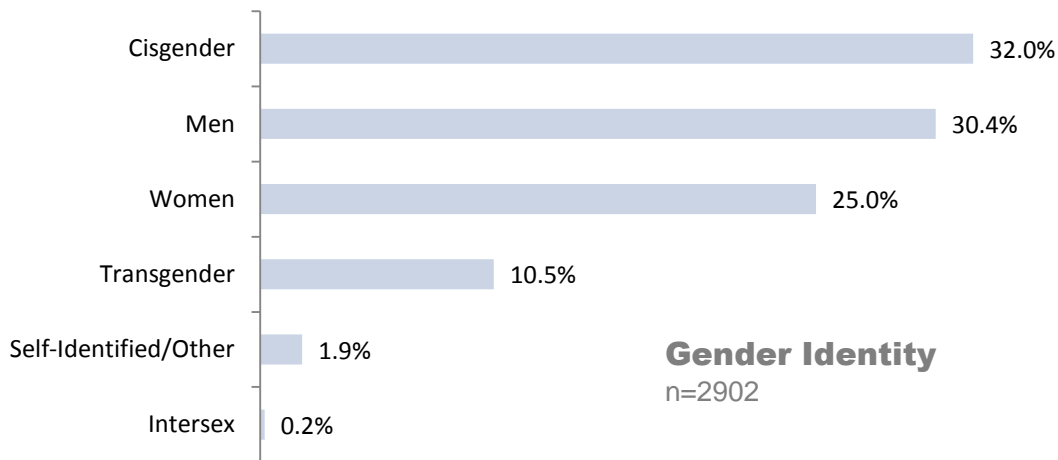


In 2012, gay survivors and victims represented the highest percentage of total reports (45.3%). This is consistent with 2011's findings, where gay survivors and victims represented 46% of overall survivors and victims. Lesbians represented 20.6% of survivors and victims in 2012, a slight decrease from 2011's findings (24%). Heterosexual people represented 18.2% of survivors and victims in 2012, a slight increase from 15% in 2010.¹⁸ Bisexual survivors and victims represented 8.7% of survivors and victims in 2012, consistent with 2011 (9%). Queer survivors and victims represented 2.9% of survivors and victims in 2012, a slight decrease from 2011 (4%). Self-Identified/other survivors and victims represented 2.6% of survivors and victims in 2012, consistent with 2011 (2%). Questioning/Unsure survivors represented 1.7% of survivors and victims in 2012, which is consistent with 2011 data (2%). NCAVP members believe that the large amount of gay survivors and victims may result from the historical relationship many member programs have with the gay cisgender men. Many anti-violence programs were founded by gay cisgender men to address issues of violence against this community. Anti-violence programs may have more experience in reaching gay men and may exist in locations where many gay men live and feel more comfortable reporting incidents of violence. Anti-violence programs may also receive fewer reports from other LGBTQ and HIV-affected survivors and victims if their outreach events are oriented towards gay cisgender men.

NCAVP members have also observed that in some communities fewer LGBTQ and HIV-affected people are identifying with the term "lesbian" and are using other terms, such as "queer" or "gay." For some anti-violence programs, the proportions of reports received from lesbians are higher than the NCAVP's overall proportions. OutFront Minnesota in Minneapolis, Minnesota has long-term and targeted outreach efforts within lesbian communities. In 2012, OutFront had 28.9% of survivors and victims who identified as lesbians and 31% of survivors and victims who identified as gay, a distinct difference from other NCAVP member programs.

¹⁸ Within NCAVP's data, "heterosexual" includes multiple identities and most likely represents more transgender people than cisgender people within heterosexual communities in the United States.

GENDER IDENTITY

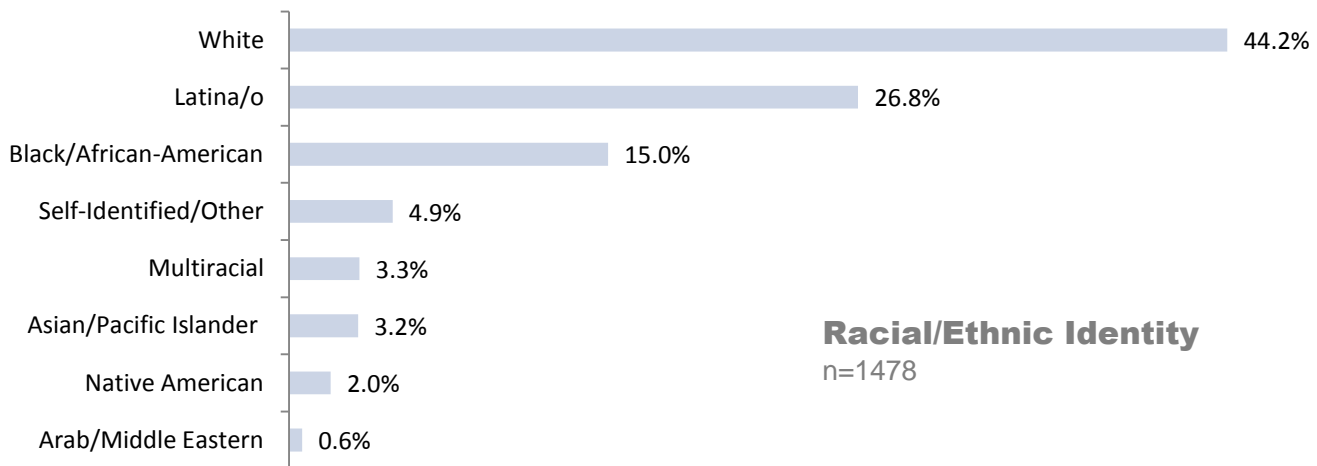


Cisgender survivors and victims represent the largest gender identity with 32% of survivors and victims, this is a considerable decrease from 2011 where cisgender survivors and victims represented 75% of survivors and victims. In 2012, 30.4% of total hate violence survivors and victims identified as men, a large decrease from 2011 (50%). Women represented the second highest (25%) gender identity in 2012, which is a decrease from 2011, when women represented 34% of survivors and victims. Transgender identified survivors and victims represented 10.5%, a decrease from 2010 (18%). 10.5% of total hate violence survivors and victims were self-identified/other, an increase from 2011 (2%). 0.2% of survivors and victims identified as intersex, which is consistent with 2011 (0%).¹⁹

Cisgender people may make up the largest proportions of survivors and victims because they may be more comfortable reporting violence to NCAVP's member programs, due to cisgender communities long term relationships with LGBTQ and HIV-affected anti-violence programs. NCAVP believes that the decrease in reports from men and cisgender people shows increased gender diversity within LGBTQ and HIV-affected anti-violence programs outreach and advertising. Some NCAVP programs are designing specific programs that would contribute to increased gender diversity including programs that are working to address violence against transgender communities and transgender communities of color. Both the New York City Anti-Violence Project and the Los Angeles Gay and Lesbian Center have programs designed to specifically serve transgender survivors and victims, which increases NCAVP's ability to collect reports from these communities.

¹⁹ NCAVP's intake form allows survivors and victims to select multiple gender identities in order to respect survivors and victims preferences. This results in proportions that are greater than 100%.

RACIAL/ETHNIC IDENTITY



White survivors and victims represented the largest proportion of survivors and victims in 2012 (44.2%), consistent with 2011 (45%). Latin@ survivors and victims represented 26.8% of overall survivors and victims, the second highest group, which is a slight decrease from 2011 (29%). Black and African American survivors and victims represented the third highest group of survivors, making up 15% of total survivors and victims, which is also consistent with 2010 (15%). Asian and Pacific Islander (3.2%) and multiracial (3.3%), survivors and victims each made up similar amounts of the total survivors and victims, consistent with 2011 (3%). Native American survivors and victims' made up 2% of overall survivors and victims, consistent with 2011 (2%). Arab and Middle Eastern survivors and victims represented 0.6% of the total, consistent with 2011 (1%). Self-Identified/Other survivors and victims' made up 4.9% of total survivors and victims, an increase from 2011(3%).²⁰

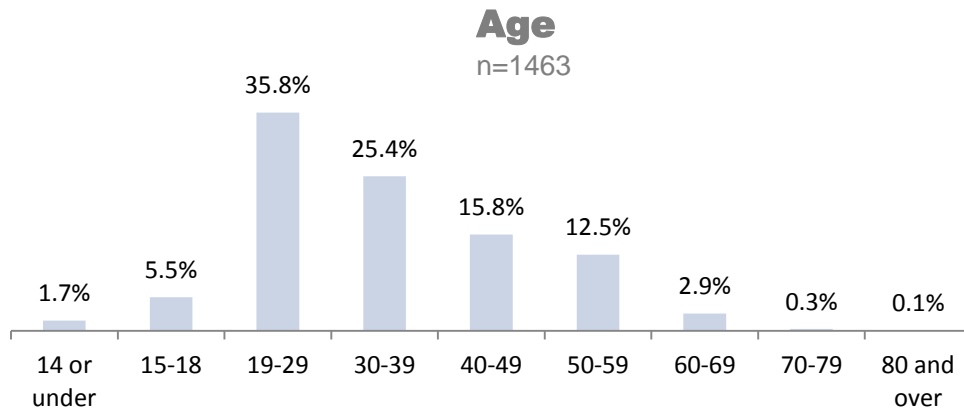
Consistent with 2011, white survivors and victims are underrepresented within NCAVP's reports. White people made up 78% of the general population within the United States in 2011, but they made up only 44.2% of NCAVP's survivors and victims.²¹ Latin@s are overrepresented within NCAVP's reports, representing 16% of people in the U.S. and making up 26.8% of NCAVP's reports. Black and African American people are relatively consistent with the overall population, representing approximately 13% of the general population but making up 15% of reports. With regard to Asian/Pacific Islander and Native American survivors and victims who report to NCAVP their representation mirrors or is close to the general population of the United States. Asian/Pacific Islander survivors and victims made up 3.2% of total reports to NCAVP, and 5% of the U.S. population. Native American survivors and victims made up 2% of total reports to NCAVP, and 1.2% of the U.S. population. This

²⁰ NCAVP's intake form allows survivors and victims to select multiple gender identities in order to respect survivors' and victims' preferences. This results in proportions that are greater than 100%

²¹ U.S. Census Bureau. "State & county Quick facts: Data derived from Population Estimates, American Community Survey". Accessed from: <http://quickfacts.census.gov> on April, 2013.

data reinforces that LGBTQ and HIV-affected people of color are at higher risk for violence. To some degree, these figures may also reflect a higher percentage of people of color living in regions covered in this report. This report contains data from states known for high Latin@ populations such as: Arizona, California, Colorado, Illinois, New York, and Texas. This may result in a higher proportion of Latin@s among NCAVP's data set. Many programs also reside in regions with high populations of Black and African American people. These numbers also demonstrate NCAVP's member program's outreach efforts within LGBTQ and HIV-affected communities of color. For example, NCAVP member organization CUAIV in San Francisco, California does extensive outreach to low-income communities of color, in 2012 34% of their survivors and victims identified as Latin@.

AGE

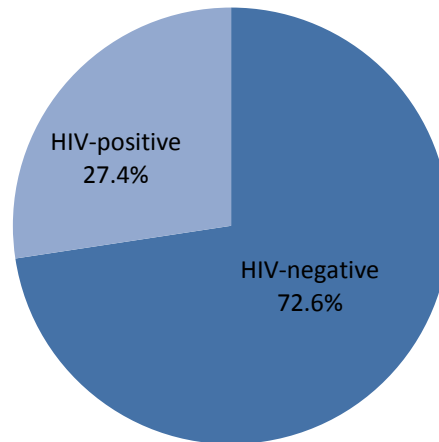


Survivors and victims between the ages of 19-29 represented 35.8% of overall hate violence survivors and victims in 2012, a slight increase from 2011 (33%). Survivors and victims between the ages of 30-39 represented 25.4% of reports, a slight increase from 2011 (22%). Ages 40-49 made up 15.8% of reports, a slight decrease from 2011 (18%). Ages 50-59 represented 12.5% of reports, a slight decrease from 2011 (15%). Ages 15-18 represent 5.5% of reports, a slight decrease from 2011 (7%). Ages 60 and above continue to be the least represented age group (3.3 %), which is relatively consistent with 2011 (4%). This data clearly demonstrates the need for targeted programming to youth and young adults to prevent hate violence and also to support survivors. The large representation of reports from age’s 19-29 people may result from several factors. Many of NCAVP’s member groups have programming and outreach directly targeted to youth and young adults including the Branching Seedz of Resistance youth organizing project of the Colorado Anti-Violence Program and the KC LOVE project of the Kansas City Anti-Violence Project.

HIV STATUS

HIV Status

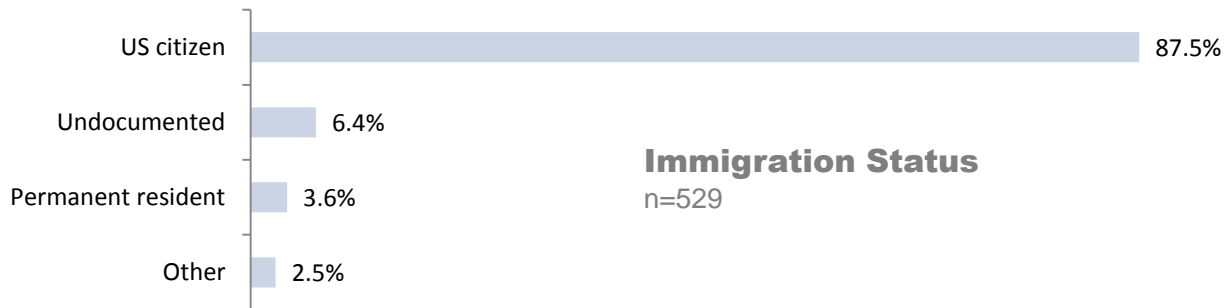
n=292



Of the survivors and victims who disclosed their HIV status in 2012, 27% were HIV-positive, a substantial decrease from 2011 (58%). 73% were HIV-negative, a considerable increase from 2011 (42%). The proportion of people who were HIV-positive was much higher in NCAVP's sample than the percentage nationwide. This high proportion of HIV-positive community members can suggest an increased risk of violence for HIV-positive people as well as a high number of HIV-positive survivors and victims feeling safe to report to NCAVP member organizations. Many NCAVP member programs' have outreach initiatives that focus in HIV-affected communities, which can also lead to a high proportion of HIV-positive community members reporting hate violence. NCAVP also recognizes the disproportionate impact HIV has on the LGBTQ and HIV-affected community. Current studies indicate that one in five young gay and bisexual men are infected with HIV.²² Despite this overrepresentation of HIV-positive people within NCAVP's sample, a low number of survivors and victims (292) provided this information to NCAVP. This could be due to the sensitive nature of discussing HIV-status and may mean that this data may not fully capture the experiences of all the survivors and victims that NCAVP served.

²² Human Rights Coalition. Accessed from: <http://www.hrc.org/blog/entry/sobering-statistics-hiv-aids-and-the-lgbt-community> on May 2013.

IMMIGRATION STATUS



In 2012, 87.5% of survivors and victims who disclosed their immigration status were US citizens, an increase from 2011 (73%). NCAVP believes this increase is due to greater data accuracy as this data has only been collected for two years and is likely more accurate than in 2011. Undocumented survivors and victims made up 6.4% of reports, a slight decrease from 2011 (8%). Permanent residents made up 3.6% of reports, a decrease from 2011 (14%). This decrease in undocumented survivors and victims could be connected to federal and state anti-immigrant policies which target immigrant communities. Immigration enforcement programs and legislation such as Secure Communities and Arizona’s SB 1070 increase the likelihood of deportation for immigrant communities. NCAVP members have observed that these policies create fear and reduce the potential that immigrant communities trust that they can safely report violence even to anti-violence programs. The number of undocumented survivors and victims may not reflect the overall proportion of undocumented hate violence survivors and victims within NCAVP’s sample as some undocumented survivors and victims are reluctant to report their immigration status because of pending legal proceedings, fear of having their immigration status revealed, and fear of deportation.

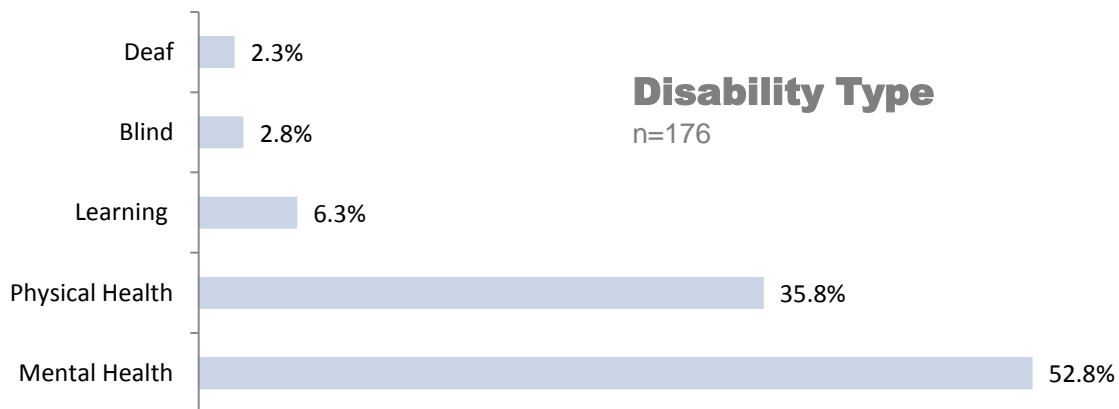
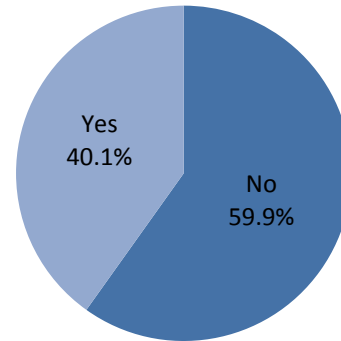
PEOPLE WITH DISABILITIES

In 2012 40% of survivors and victims reported having a disability, a substantial increase from 2011 (11%). This increase is likely associated with NCAVP members more accurately reporting this data to NCAVP than an increase in survivors and victims with disabilities. Of those who reported having a disability, 52.8% of survivors and victims reported having a disability associated with their mental health, 35.8% of survivors and victims reported having a physical disability, 6.3%

of survivors and victims reported having a learning disability, 2.8% of survivors and victims reported being blind and 2.3% of survivors and victims reported being deaf.²³ LGBTQ and HIV-affected survivors and victims with disabilities can face increased risk of hate violence in addition to specific barriers when trying to access law enforcement, medical assistance, and social services in the aftermath of experiencing violence. NCAVP will continue to document and research the intersection of anti-LGBTQ and HIV-affected hate violence and disability to better respond to the need of LGBTQ and HIV-affected survivors and victims with disabilities.

Disability

n=558



²³ This is the first year that NCAVP included this data in the report.

MOST IMPACTED IDENTITIES

NCAVP's person-level data highlights the identities that are most impacted by various forms of hate violence. Similar to findings for 2011, 2012's data suggests that LGBTQ and HIV-affected people of color, transgender people, and transgender people of color experience more severe and deadly forms of violence while simultaneously having less access to anti-violence services and support. The person-level findings below describe the ways in which these identities are specifically impacted by hate violence in order to assist policymakers and practitioners to craft specific programs, campaigns, policies, and legislation to address this violence.

GENDER IDENTITY AND SEXUAL ORIENTATION

Transgender people were more likely to experience police violence and physical violence from law enforcement.

The breadth and severity of violence reported by transgender people in 2012 highlights the specific vulnerability of transgender communities to severe hate violence. Transgender people were 3.32 times as likely to experience police violence compared to cisgender survivors and victims.²⁴ Transgender people were 2.46 times as likely to experience physical violence when interacting with the police compared to cisgender survivors and victims.²⁵ Transgender communities experience of discriminatory and violence policing can be a barrier to accessing emergency support in the aftermath of violence, placing transgender people at greater risk when they do experience violence. NCAVP will continue to examine these dynamics in addition to researching specific programs to address the severity of transphobic violence.

Transgender people were more likely to experience discrimination, threats, and intimidation.

Transgender people were 2.30 times as likely to experience discrimination compared to cisgender survivors and victims.²⁶ Transgender people were 1.66 times as likely to experience threats and intimidation compared to cisgender survivors and victims.²⁷ Discrimination, threats, and intimidation can often go occur simultaneously and can negatively impact the mental health, access to services, access to housing, and access to employment for transgender communities. Consequently, these factors can create a vicious cycle by increasing the risk for additional forms of violence for transgender survivors and victims. This data reinforces that transgender people are disproportionately impacted multiple forms of violence and discrimination, some which reinforce each other.

²⁴ n=694, 95% CI=1.848, 5.994

²⁵ n=565, 95% CI=1.081, 5.581

²⁶ n=852, 95% CI=1.597, 3.327

²⁷ n=852, 95% CI=1.169, 2.358

Transgender women were more likely to experience police violence, discrimination, threats, and intimidation.

The severity of violence reported by transgender women in 2012 compounded by the high proportion of transgender women homicide victims, suggests that transgender women face an alarming vulnerability to hate violence. Concurrent with the findings for transgender survivors and victims, transgender women also experienced disproportionate impacts of police violence, discrimination, threats, and intimidation to similar or heightened degrees. Transgender women were 2.89 times as likely to experience police violence as compared to survivors and victims who did not identify as transgender women.²⁸ Transgender women were 2.71 times as likely to experience physical violence when interacting with the police as compared to survivors and victims who were not transgender women.²⁹ Additionally, transgender women were 2.14 times as likely to experience discrimination³⁰ and were 1.75 times as likely to experience threats and intimidation as compared survivors and victims who did not identify as transgender women.³¹ These findings demonstrate the severe and pervasive violence that transgender women face from both the police and overall society. This data suggests a need for NCAVP member programs to continue to strengthen their services for transgender women and strategies to address and prevent transphobic law enforcement violence.

Gay people were more likely to report incidents of hate violence to the police and at higher risk of police violence.

Gay people were 2.41 times as likely to report incidents of hate violence to police as compared to survivors and victims who were not gay.³² This data demonstrates a close relationship between gay communities and law enforcement than other LGBTQ and HIV-affected communities. Yet, a seemingly contradictory finding is that gay people were 2.71 times as likely to experience physical violence when interacting with the police compared to survivors and victims who were not gay.³³ While gay people may historically have greater access to services and police reporting than other LGBTQ and HIV-affected survivors and victims, NCAVP's data highlight that they simultaneously experience a high risk of police violence.

Gay people were more likely to experience threats, intimidation, injury, and require medical attention, and to experience threats and intimidation.

Gay people were 1.75 times as likely to experience threats and intimidation as compared to survivors and victims who were not gay.³⁴ Gay people were 1.68 times as likely to require medical attention compared to

²⁸ n=694, 95% CI=1.526, 5.486

²⁹ n=565, 95% CI=1.155, 6.373

³⁰ n=852, 95% CI=1.438, 3.196

³¹ n=852, 95% CI=1.194, 2.571

³² n=406, 95% CI=1.604, 3.627

³³ n=565, 95% CI=1.155, 6.373

³⁴ n=852, 95% CI=1.194, 2.571

survivors and victims who were not gay.³⁵ Gay people were 1.49 times as likely to experience injury compared to survivors and victims who were not gay.³⁶ Injuries and medical attention are often associated with each other. High experiences of threats and intimidation coupled with disproportionate experiences of injury and medical attention highlight the need to ensure that first responders are LGBTQ and HIV-affected culturally competent to ensure that the specific needs of gay survivors and victims are met.

Gay men experienced harassment and higher rates of reporting hate violence to the police.

Gay men make up a large proportion of hate violence survivors and victims in 2012. Gay men were 3.03 times as likely to report incidents of hate violence to the police compared to survivors and victims who were not gay men.³⁷ Gay men did not experience any other disproportionate forms of hate violence suggesting that law enforcement may have more competency and expertise in serving the needs of gay men than other LGBTQ and HIV-affected communities.

LGBTQ AND HIV-AFFECTED PEOPLE OF COLOR

Transgender people of color were more likely to experience police violence, discrimination and threats and intimidation.

Transgender people of color faced multiple disproportionate experiences of violence. Transgender people of color were 2.59 times as likely to experience police violence as compared to white cisgender survivors and victims.³⁸ Transgender people of color were 2.37 times as likely to experience discrimination when compared to white cisgender survivors and victims.³⁹ Transgender people of color were 1.63 times as likely to experience threats and intimidation as compared to white cisgender survivors and victims.⁴⁰ The intersection of racism and transphobia can make these survivors and victims more vulnerable to violence and more likely to experience discrimination and violence from first responders. This is a deadly combination for these survivors and victims and highlights the urgent need for specific programs, research, policies, and legislation to increase the safety of transgender people of color.

LGBTQ and HIV-affected people of color were more likely to receive hate violence classification by police, physical violence, discrimination, and violence in the street and in public areas.

LGBTQ and HIV-affected people of color were 2.77 times as likely to receive hate violence classification by the police compared to white LGBTQ and HIV-affected survivors and victims.⁴¹ The high rates of hate violence classification is most likely connected to the greater risk of severe injury that LGBTQ and HIV-

³⁵ n=486, 95% CI=1.099, 2.578

³⁶ n=539, 95% CI=1.012, 2.216

³⁷ n=389, 95% CI=2.005, 4.603

³⁸ n=519, 95% CI=1.274, 5.305

³⁹ n=622, 95% CI=1.454, 3.870

⁴⁰ n=622, 95% CI=1.030, 2.600

⁴¹ n=145, 95% CI=1.305, 5.905

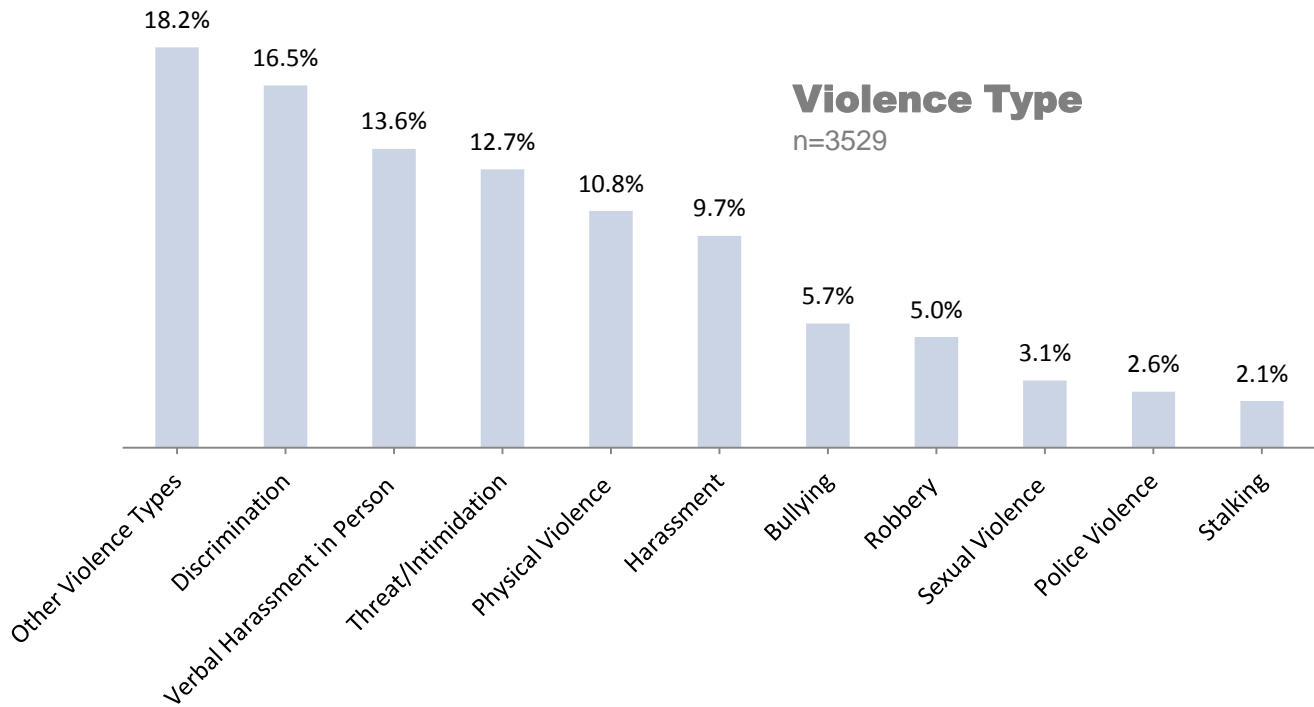
affected people of color experience. Severe violence often requires emergency medical attention and through getting medical attention these incidents are reported to the police. This finding is supported by data that demonstrates that LGBTQ and HIV-affected people of color were also 1.81 times as likely to experience physical violence compared to white LGBTQ and HIV-affected survivors and victims⁴² and were 1.51 times as likely to experience violence in the street or a public area.⁴³ LGBTQ and HIV-affected people of color were also 1.69 times as likely to experience discrimination compared to white LGBTQ and HIV-affected survivors and victims.⁴⁴ These numbers highlight the severe impact of violence that LGBTQ and HIV-affected people of color experience in public areas.

⁴² n=585, 95% CI=1.069, 2.140

⁴³ n=646, 95% CI=1.280, 2.573

⁴⁴ n=646, 95% CI=1.230, 2.324

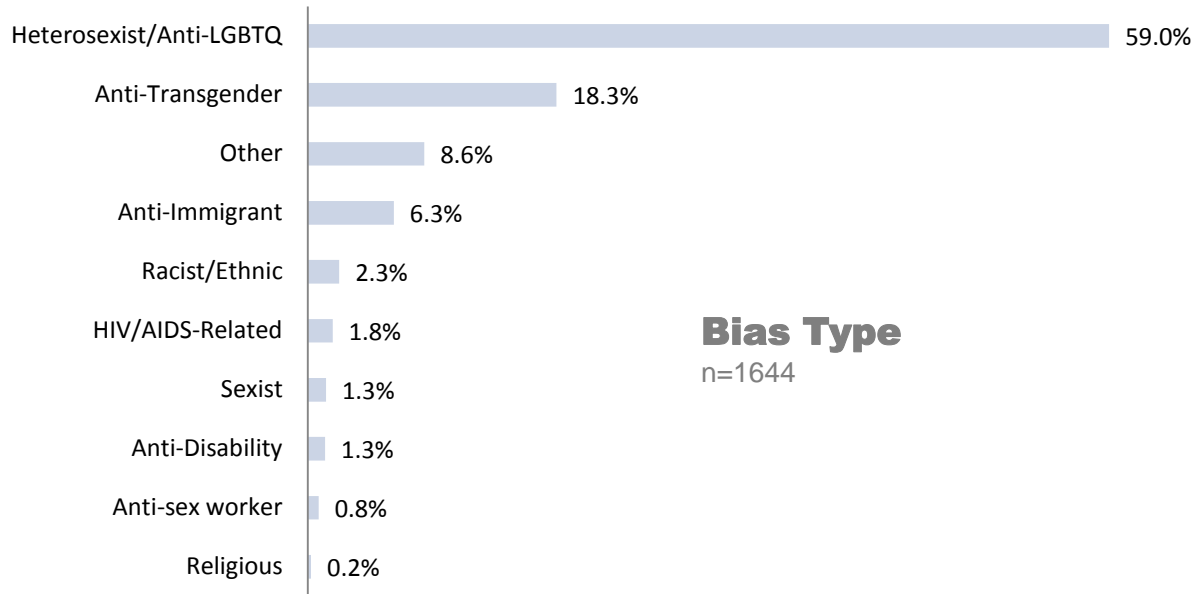
INCIDENT TRENDS



45

The most common type of violence reported to NCAVP in 2012 was discrimination (16.5%), a decrease from 2011 (23%). Verbal harassment in person accounted for 13.6% of reports, a slight decrease from 2011 (15%). Threats and intimidation accounted for 12.7% of reports, which is consistent with 2011 (12%). Physical violence accounted for 10.8% of reports, a decrease from 2011 (17%). Harassment accounted for 9.7% of reports, a slight increase from 2011 (8%). Bullying and robbery each accounted for 5% of reports, robbery slightly increased from 2011 (3%), while bullying remained consistent (5%). All other categories of violence each made up less than 3% of all incidents, which are similar to their values for 2011. 18.2% of violence was accounted for as other, which included categories like blackmail and attempted physical violence. These findings point to the increasing diversity hate violence that LGBTQ and HIV-affected people experience. This data also suggests a need to continue prevention and response efforts that include initiatives that address multiple forms of anti-LGBTQ and HIV-affected violence, ranging from anti-bullying education, to institutional change to end harassment, to homicide prevention efforts.

⁴⁵ The total number of responses in this category can exceed the total number of reports because survivors and victims can select multiple categories.

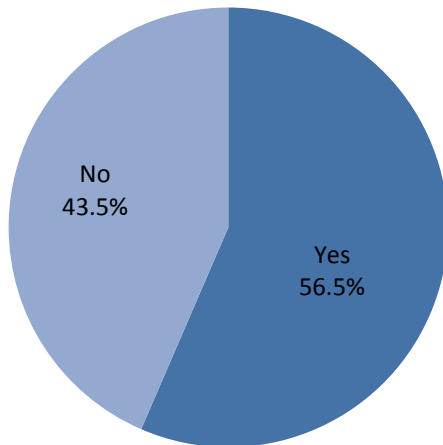


In 2012, 59% of survivors and victims reported anti-LGBTQ/heterosexist bias, consistent with 2011 (59%). 18.3% of bias reports were anti-transgender, a slight increase from 2011 (14%). Anti-immigrant bias represented 6.3% of reports which is a slight increase from 2011 (2%). 2.3% of survivors and victims reported racist/ethnic bias, which is relatively consistent with 2011 (3%). 1.8% of survivors and victims reported HIV/AIDS related bias, a slight decrease from 2011(3%). Sexist, anti-disability, anti-sex worker, and religious based bias individually made up 1.3% or less of bias type reported by survivors and victims, consistent with 2011. The increase in anti-transgender bias type suggest that NCAVP member groups should continue to create specific programs for transgender communitites as they are disproportionally impacted by anti-LGBTQ and HIV-affected violence and bias.

POLICE RESPONSE

Reported to Police

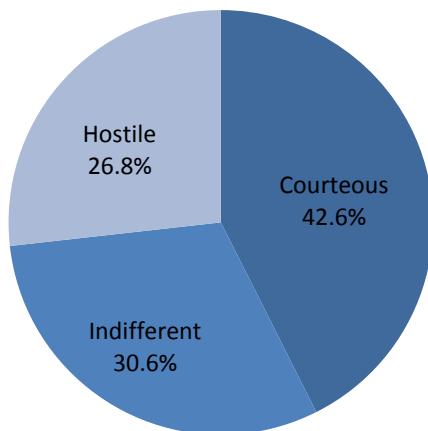
n=740



Only 56% of survivors and victims reported to the police, slight increase from 2011 (52%). This could suggest an increase in LGBTQ and HIV-affected survivors' and victims' comfort in reporting to the police. Despite this shift, almost half of LGBTQ and HIV-affected survivors and victims did not report to the police, indicating that substantial barriers to police reporting and high amounts of mistrust continue to exist for many LGBTQ and HIV-affected hate violence survivors and victims. NCAVP will continue to create strategies to support LGBTQ and HIV-affected survivors and victims that do not rely on police reporting while simultaneously working to increase the LGBTQ and HIV-affected cultural competency of law enforcement.

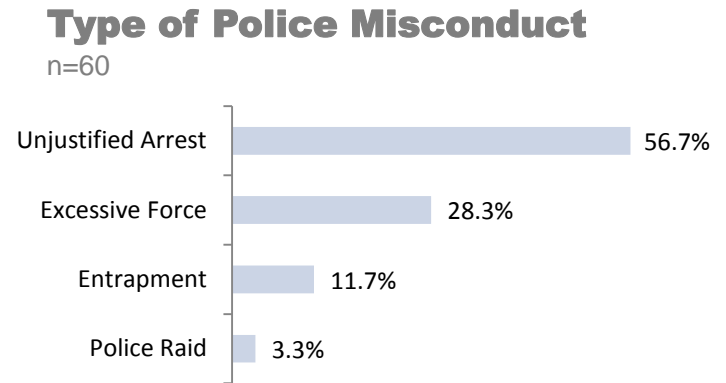
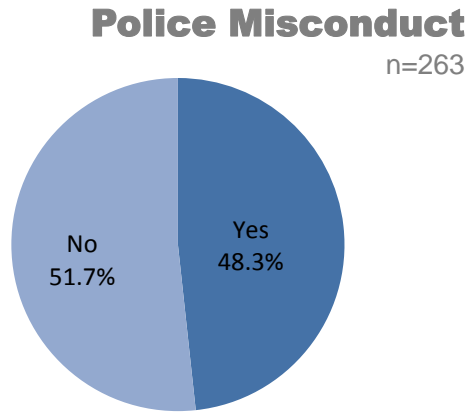
Police Attitude

n=310

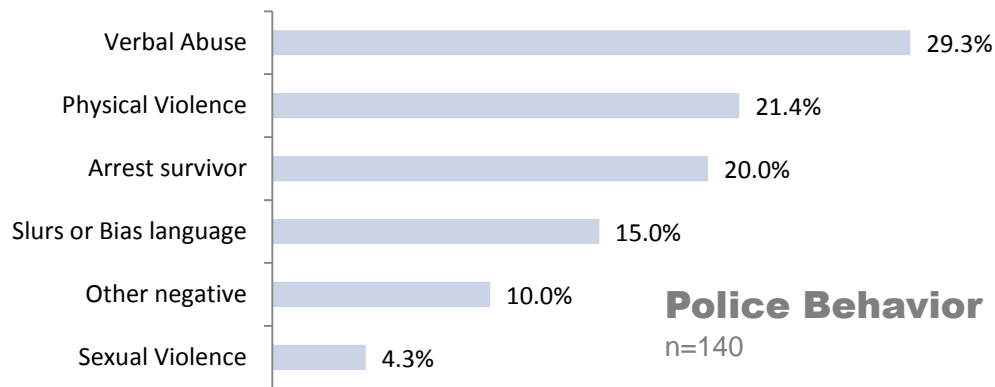


Only 42% of survivors and victims who interacted with law enforcement in 2012 reported that the police were courteous. This is consistent with 2011, when 42% of survivors and victims reported courteous interactions with the police. 27% of survivors and victims reported hostile attitudes on behalf of the police in 2012, an increase from 18% in 2011. 31% reported indifferent attitudes from the police in 2012, a decrease from 2011 (38%). This increase in hostile police attitudes is alarming particularly since many NCAVP member programs in 2012 continued or increased programming to educate law enforcement, first responders, and other direct service providers on the

specific needs of LGBTQ and HIV-affected survivors and victims of violence. Member programs such as OutFront in Minneapolis, Minnesota, LAGLC in Los Angeles, California, BRAVO in Columbus, Ohio and NYC AVP in New York City all have police training programs where officers receive LGBTQ competency training. This data suggests that the majority of LGBTQ and HIV-affected survivors and victims who report this data to NCAVP are having indifferent and hostile experiences with the police. Due to these experiences survivors and victims may not choose to engage with law enforcement in the future. NCAVP will continue to document this issue in future reports.



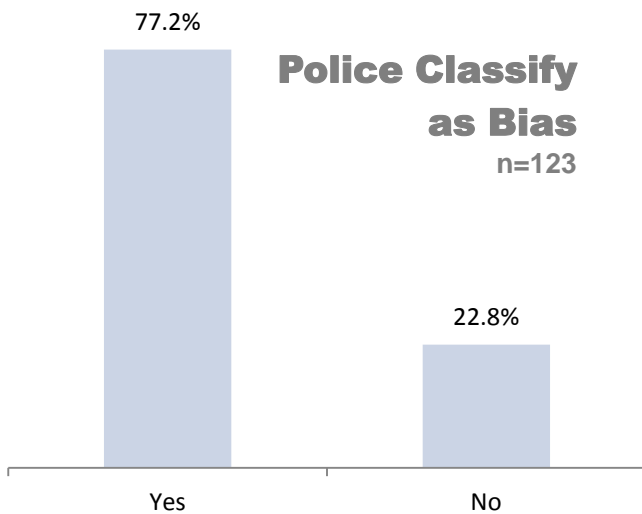
Of the survivors and victims who interacted with the police, 48% of overall survivors and victims reported incidents of police misconduct to NCAVP, an increase from 2011 (32%). The total number of reports remains fairly small in this area, as it is only the second year that NCAVP has collected this data. Within police misconduct 56.7% of survivors and victims experienced unjustified arrest, a slight increase from 2011 (52%). Excessive force accounted for 28.3% of police misconduct, which is a slight increase from 2011 (27%). Entrapment accounted for 11.7% of police misconduct, a decrease from 2011 (17%). Police raids accounted for 3.3% of police misconduct, a slight decrease from 2011 (5%). The number of survivors and victims reporting their experiences of police misconduct remained exactly the same from 2011 to 2012 at 60 reports.



LGBTQ and HIV-affected survivors and victims in 2012 experienced various forms of negative police behavior. Verbal abuse, which can include threats, insults, and intimidating language, accounted for 29.3% of reports, an increase from 2011 (14%). Physical violence accounted for 21.4% of reports, an increase from 2011 (9%). Police arrested survivors and victims within 20% of the reports, a considerable decrease from 2011 (39%). Slurs and bias language accounted for 15% of reports, consistent with 2011 (14%). Other negative behavior accounted for 10% of reports, a decrease from 2011 (25%). Sexual violence accounted for 4.3% of reports.⁴⁶ Police misconduct can reduce trust and create barriers for LGBTQ and HIV-affected survivors and victims to seek support from law enforcement and anti-violence programs. Police misconduct can also contribute to a fear of re-victimization when

⁴⁶ Sexual violence was included in “other negative” police behavior in 2011.

survivors and victims report to the police. In order to address these issues police officers should be held accountable for incidents of homophobic, biphobic, and transphobic violence and harassment.



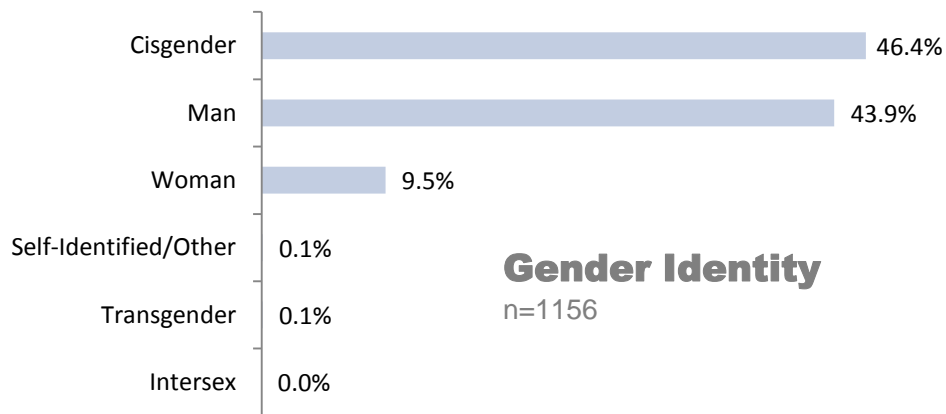
In 2012, 77.2% of hate violence incidents reported to the police were classified as bias incidents also known as hate crimes. This is a considerable increase from 2011 (55%). Bias classification often increases the minimum sentence for the crime in order to acknowledge the impact that hate violence has in causing fear to the community at large in addition to the individual. For some survivors and victims, bias classification is a critical component of having their incident acknowledged as hate violence, and this assists in their healing process after an incident of violence. Bias classification also allows for the recognition and documentation of homophobia, biphobia, and transphobia as underlying motivations of anti-LGBTQ and HIV-affected violence.

The enhanced penalties within hate crimes laws are also heavily criticized within LGBTQ and HIV-affected communities. Many LGBTQ and HIV-affected individuals and organizations feel that bias crime laws are not preventative and can be disproportionately used against communities of color. Recognizing the many documented racial and economic biases within the criminal legal system some LGBTQ survivors and victims are wary about using the criminal legal system to address the violence that they experience. Another issue with bias crime classification is that federal hate crime reporting guidelines require that a hate crime be classified as motivated by a single type of bias. Therefore, a hate incident which was motivated by racism and homophobia would be reported as motivated by race or sexual orientation, which fails to demonstrate and address the multiple forms of bias involved.

OFFENDER DEMOGRAPHICS

The following charts offer an overview of aggregate data on offender demographics, as reported by survivors and victims, or the media in a small number of cases. This data differs from crime statistics and the survivor and victim demographics because the anti-violence programs are unlikely to have direct contact with the offender to verify this information. This information is based on survivor reports, which particularly for unknown offenders, can be biased or based upon on assumptions and approximations. These findings summarize age, racial and ethnic identity, and gender identity, of hate violence offenders in 2012.

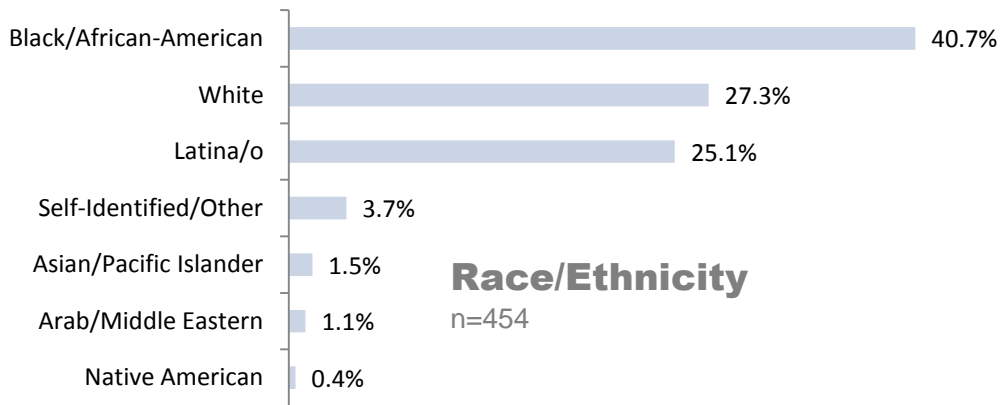
GENDER IDENTITY OF OFFENDERS



In 2012, cisgender offenders represented 46.4% of reports, a substantial increase from 2011 (19%). Men (43.9%) accounted for a majority of offenders, a considerable decrease from 2011 (60%). Women made up 9.5% of offenders, a decrease from 2011 (20%). 0.1% of offenders were self-identified/other, which is relatively consistent with 2011 (0%). 0.1% of offenders were transgender, consistent with 2011 (0.1%). Intersex offenders made up 0% of survivors and victims.⁴⁷ These findings suggest that offenders are more likely to target people of the same identity they hold. This is the second year NCAVP has collected this data, and we believe that this data, while reflecting the survivors’ and victims’ perception, is more accurate for men and cisgender offenders than for other gender identities. This data gives policymakers and practitioners’ critical information about the need to target hate violence prevention programs towards cisgender men.

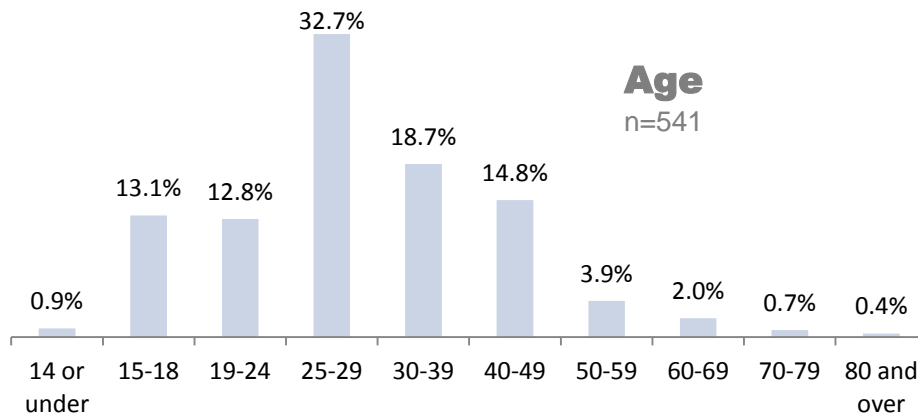
⁴⁷ NCAVP did not collect this data in 2011.

RACIAL/ETHNIC IDENTITY OF OFFENDERS



In 2012, Black and African American offenders represented 40.7%, a substantial increase from 2011 (24%). White offenders represented 27.3%, a considerable decrease from 2011 (51%). Latin@s represented 25.1% of offenders, an increase from 2011 (19%). Self-identified/other offenders represented an increase from 2011 (2%). Asian/Pacific Islander, Arab/Middle Eastern, and Native Americans make up a combined total of 3% of offender racial identities. The increase in Black offenders is driven by the New York City Anti-Violence Project’s large increase in black offenders and it increases the overall offender race demographics. If New York City’s offender racial data is removed, Black and African-American offenders only represent 2.4% of overall offenders. It is also important to note that offender race is based on the survivor or victim’s perception of the offenders’ racial identity.

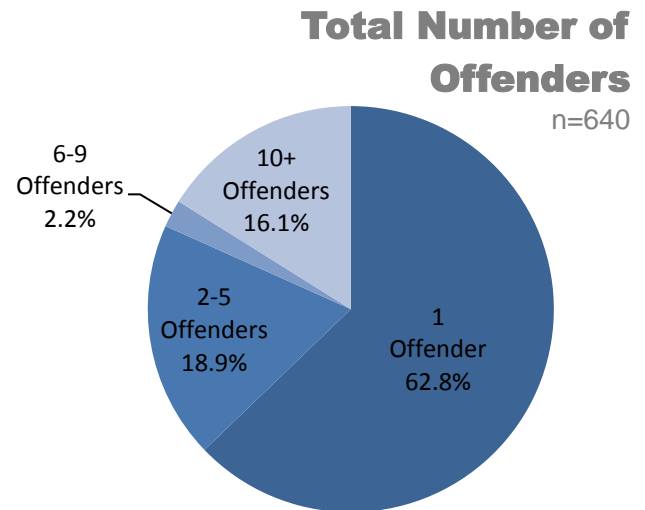
AGE OF OFFENDERS



45.5% of offenders were between the ages of 19-29 an increase from 2011 (34%). Ages 30-39 represented 18.7% of offenders, a decrease from 2011 (22%) and 14.8% of offenders were between the ages of 40-49, a slight decrease from 2011 (19%). Offenders between the ages of 15-18 represented 13.1%, which is consistent with 2011 (13%). These age categories mirror the age categories for LGBTQ and HIV-affected survivors and victims suggesting that offenders are likely to be close in age with the survivors and victims they attack. This data also shows the need for prevention strategies and education programs targeted to youth and young adults to addressing anti-LGBTQ and HIV-affected bias.

TOTAL NUMBER OF OFFENDERS

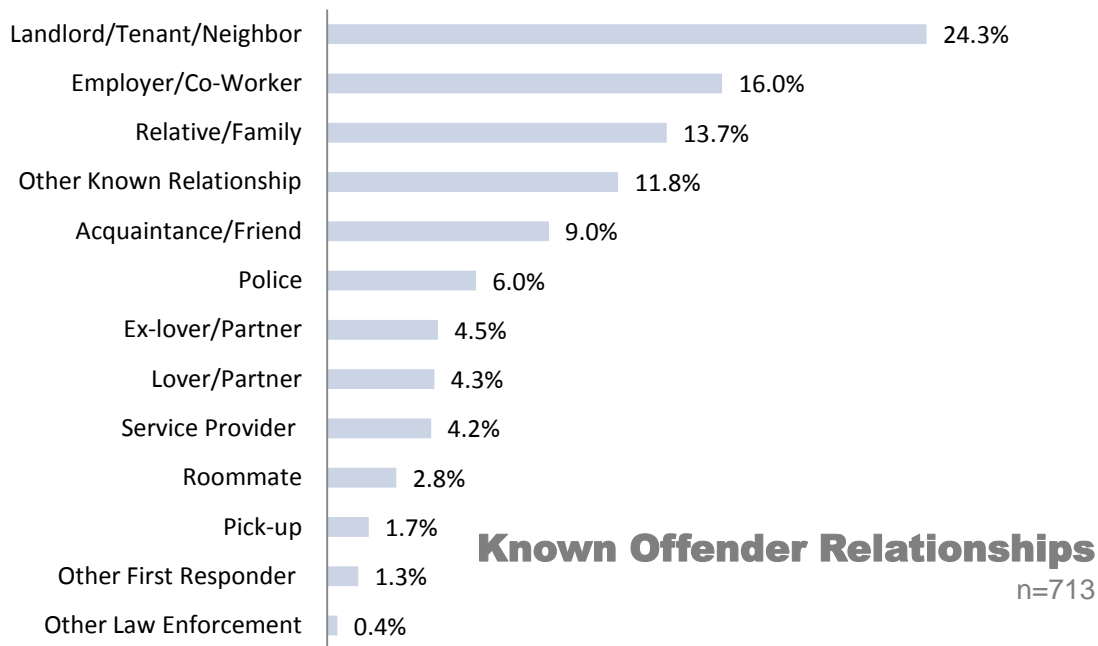
In 2012, 63% of survivors and victims were attacked by one offender, a decrease from 2011 (78%), 19% of survivors and victims reported 2-5 offenders, consistent with 2011 (20%), and 16% of survivors and victims reported 10 or more offenders, an increase from 2011 (10%). Only 2% of survivors and victims reported 6-9 offenders, which is relatively consistent with 2011 (1%). NCAVP recognizes that the increase reports of multiple offenders likely reflects more accurate reporting by NCAVP members. NCAVP members often observe that more than other types of violence, hate violence is more likely to involve group violence. Scholars observe that hate violence is often fueled by a sense of peer approval⁴⁸, which increases the amounts of offenders. Anti-LGBTQ and HIV-affected group violence may be particularly common due to a need on the part offenders to assert their heterosexuality in front of their peers. This “peer mentality” can make hate violence incidents more severe and in some cases more deadly.⁴⁹



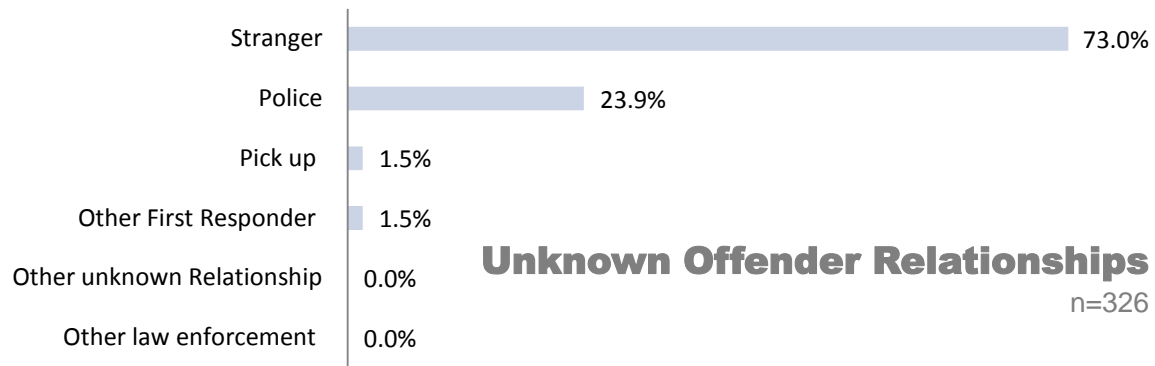
⁴⁸ “Hate Crimes: Characteristics of Incidents, Victims, and Offenders”, McDevitt, J. et al. Accessed from: http://www.sagepub.com/upmdata/14238_Chapter6.pdf on April, 2013.

⁴⁹ Ibid

OFFENDER RELATIONSHIPS



In 2012, landlords, tenants, and neighbors represented the highest level of known offenders (24.3%), a slight increase from 2011 (20%). Employers and co-workers represented 16% of known offenders, an increase from 2011 (9%). Relatives and family represented 13.7% of known offenders, another increase from 2011 (9%). Within known offenders, other relationships represented 11.8% of total reports, a decrease from 2011 (23%), which shows that 2012 data is increasingly more accurate. Acquaintances and friends represented 9% of known offenders, a decrease from 2011 (18%). The police represent 6% of known offenders, a slight decrease from 2011 (9%). Ex-lovers/Ex-Partners, Lovers/Partners, Service Providers, Roommates, other first responders, and other law enforcement each represented 5% or less of known offenders. These findings reflect the diversity of hate violence offenders showing that hate violence can occur from landlords, from employers, within families, and from law enforcement. The increase in hate violence from employers points to the need for non-discrimination policies for LGBTQ and HIV-affected people to prevent workplace based hate violence. For some LGBTQ and HIV-affected, communities the pervasive experiences of hate violence and discrimination from employers can result in long-term economic consequences such as poverty and unemployment.



In 2012, 73% of unknown offenders were strangers, relatively consistent with 2011 (72%). 23.9% of unknown offenders were police, a considerable increase from 2011 (8%). 1.5% of unknown offenders were related to pick-up violence, a slight decrease from 2011 (3%). Other first responders, other unknown relationships, and other law enforcement combined made up 1.5% of total unknown offenders.

DISCUSSION

Slight Decrease in Reports

In 2012 reports of anti-LGBTQ and HIV-affected hate violence and anti-LGBTQ and HIV-affected homicides decreased slightly. NCAVP's 2012 hate violence report continues to reveal that anti-LGBTQ and HIV-affected hate violence, particularly physical violence and police violence disproportionately impacts LGBTQ and HIV-affected communities of color, transgender people, and transgender people of color. NCAVP believes that these decreases represent a decrease in reporting, not a decrease in violence. In 2012 the decrease in reports is distributed among multiple NCAVP member programs including programs in Colorado, California (San Francisco and Los Angeles), Michigan, Massachusetts, Missouri, and South Carolina. One common theme among these organizations is that a substantial number of them lost staff or went through major staff transitions in 2012. Staff decreases can reduce the amount of outreach, crisis intervention, intake, and other direct services that directly relate to an anti-violence program's ability to collect reports. Even temporary staff transition can interrupt anti-violence programming while organizations conduct hiring processes and train new staff. These capacity shifts can be particularly devastating for small organizations. Many of the organizations listed above have fewer than five paid staff that perform anti-violence work. These issues highlight the need for increased funding and resources for LGBTQ and HIV-affected anti-violence programs, particularly for outreach and crisis intervention programs.

Disproportionate Impact of Homicide and Severe Violence On Transgender Communities and LGBTQ and HIV-Affected Communities of Color

Despite a slight decrease in 2012, NCAVP documented the fourth highest amount of hate violence homicides ever recorded by NCAVP. These homicides continue a multi-year trend that highlights the disproportionate impact of homicide against transgender communities, LGBTQ and HIV-affected communities, and transgender communities of color. These homicide rates were disproportionately high for these three communities when compared to their representation within NCAVP's overall sample. In addition to disproportionate experiences of homicide, NCAVP's person-level data found that LGBTQ and HIV-affected people of color, and transgender people, were more at risk for physical violence an additional multi-year trend. This clearly demonstrates that communities who experience multiple forms of bias and oppression, including racism, sexism, classism, homophobia, transphobia, and biphobia, have a heightened vulnerability to lethal and severe hate violence. This bias and oppression can also reduce access to culturally competent, non-revictimizing, and appropriate anti-violence prevention for these survivors and victims.

NCAVP members frequently observe that the elevated risk of hate violence for these communities is connected to the pervasive experiences of poverty, unemployment, homelessness, and criminalization that transgender people, transgender people of color, and LGBTQ and HIV-affected people of color experience. Many studies chronicle that low-income communities experience higher rates of violence and less access to resources to

address violence.⁵⁰ Poverty can increase violence by limiting access to safe and stable employment. LGBTQ and HIV-affected people of color, particularly those who identify as Black and Latin@, have higher unemployment and poverty rates⁵¹ within LGBTQ and HIV-affected communities. Transgender people experience legalized employment discrimination, and have twice the national rates of poverty.⁵² Transgender people of color, especially those who identify as Black and Latin@, experience poverty at four times the national average.⁵³ According to the National Center Transgender Equality's (NCTE) findings in "Injustice at Every Turn," 34% of Black transgender people and 28% of Latin@ transgender people were living in extreme poverty.⁵⁴ Coupled with these statistics, NCAVP's 2012 data also shows a rise in hate violence perpetrated by employers. All of these combined factors can have an alarming impact on the ability for these communities to secure safe and stable employment. NCTE also found that 34% of transgender Latin@ respondents and 50% of transgender Black respondents had engaged in sex work or sold drugs at some point in their lives.⁵⁵ Sex work and drug sales are accessible and lucrative forms of employment for communities that face barriers to traditional forms of employment. Since these forms of employment are illegal people who engage with sex work or drug sales are more vulnerable to violence from the general society and law enforcement violence. LGBTQ and HIV-affected communities engaged with this work can be particularly vulnerable because they are often unlikely to report violence or seek support from community organizations or law enforcement for fear that their illegal activity will be reported. In NCAVP's 2012 data 23% of homicides were connected to sex work, continuing a trend from 2011 and 2010 where 22% and 18% of homicides were connected to sex work.

High rates of homelessness among these disproportionately impacted communities, also increases their risk of violence. NCTE documented that within transgender communities 19% of respondents reported experiencing homelessness at some point in their lives and 11% reported being evicted because of their gender identity or gender expression. These same communities can also face discrimination within homeless shelters with NCTE finding that the majority of those trying to access a homeless shelter were harassed by shelter staff or residents (55%), and 29% were turned away altogether.⁵⁶ The challenge of finding safe housing can expose transgender communities to an increased risk of violence. Homeless LGBTQ and HIV-affected people spend more time in public, placing them at increased risk for hate violence motivated based on bias against their gender identity or gender expression, racial identity, and housing status due to their increased visibility. Having access to safe space indoors can be life saving for these communities. In 2012, the Department of Housing and Urban Development (HUD) released a landmark new rule prohibiting discrimination based upon sexual orientation and gender identity in all HUD funded housing.⁵⁷ This rule adds critical new protections for communities

⁵⁰ Carolina Reid. "Addressing the Challenges of Unemployment in Low-Income Communities". Accessed from: http://www.frbsf.org/publications/community/investments/0905/Reid_Carolina.pdf on May, 2013.

⁵¹ US Department of Labor, Bureau of Labor Statistics data, Accessed from: <http://www.bls.gov/cps/cpsrace2009.pdf> on May 2013.

⁵² Grant, Jaime M., Lisa A. Mottet, Justin Tanis, Jack Harrison, Jody L. Herman, and Mara Keisling. "Injustice at Every Turn: A Report of the National Transgender Discrimination Survey". Accessed from http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf on May, 2013.

⁵³ Ibid

⁵⁴ National Center for Transgender Equality and National Gay and Lesbian Task Force, "Injustice at Every Turn" fact sheets. Accessed from: http://transequality.org/PDFs/BlackTransFactsheetFINAL_090811.pdf and http://transequality.org/Resources/Injustice_Latino_englishversion.pdf on April, 2013.

⁵⁵ Ibid.

⁵⁶ Ibid

⁵⁷ Federal Register Rules and Regulations Department of Housing and Urban Development/ Vol. 77, No. 23 / Friday, February 3, 2012 / Accessed from <http://portal.hud.gov/hudportal/documents/huddoc?id=12lgbtfinalrule.pdf> on April, 2013.

most impacted by hate violence by increasing LGBTQ access to public housing. To continue with this groundbreaking progress, the federal government should amend the Fair Housing Act to prohibit discrimination against sexual orientation, gender identity, and gender expression in order to increase safety for LGBTQ people.

In order to reduce severe violence against these communities, policymakers and practitioners need to create legislation, policies, and programs that increase economic opportunities for transgender, and LGBTQ and HIV-affected people of color in addition to programs that reduce discrimination. Programs such as the Transgender Economic Empowerment Initiative⁵⁸, recruits transgender-friendly employers which decreases the risk of transgender people being driven to engage in employment that places them at higher risk for violence. Project Empowerment⁵⁹ is a model of an education and employment program specifically for transgender people created in Washington, DC. This program was created following recurring reports of severe violence and homicide against transgender people of color. It includes city funded transgender-specific classes geared to increasing economic opportunity and employment options for transgender communities as a violence prevention strategy.

Because pervasive oppression and discrimination against LGBTQ and HIV-affected people of color, transgender people, LGBTQ immigrants and LGBTQ and HIV-affected youth results in a greater risk for these communities to engage in drug sales, sex work, and survival crimes, many survivors and victims from these marginalized communities hold criminal records. In many states these criminal records can bar access to basic needs such as Supplemental Nutrition Assistance Program (SNAP) formerly known as food stamps, public assistance (Temporary Assistance for Needy Families or TANF), public housing, and employment. These restrictions are also known as collateral consequences of criminal convictions. Under the Personal Responsibility and Work Opportunity Act of 1996, a lifetime ban from federally funded SNAP and TANF is placed on people with drug felony convictions. Ten states currently maintain this ban without modification, 24 states limit the ban if offenders meet certain criteria, and 16 states including the District of Columbia have eliminated the ban entirely.⁶⁰ With regard to public housing, in most cases Public Housing Authorities (PHAs) possess broad discretion to determine individuals' suitability for public housing. Under federal law, 42 U.S.C. §13661(c) permits, but does not require, denial of public housing for people who have engaged in criminal activity within a "reasonable" amount of time. This can include people who were arrested but not convicted of a crime. A lack of access to these programs further continues the cycles of poverty, discrimination, and vulnerability that increase exposure to violence for LGBTQ and HIV-affected communities. Federal, state, and local governments should remove restrictions to government assistance to meet basic survival needs and other collateral consequences of criminal records for people with criminal records.

⁵⁸ Transgender Economic Employment Initiative. Accessed from: <http://www.teeisf.org/> on April, 2013.

⁵⁹ Project Empowerment is a program of the Washington DC Department of Employment Services which provides training and job placement for people with criminal records and histories of substance abuse. Accessed on April, 2013.

⁶⁰ Legal Action Center, (2011). "Opting Out of Federal Ban on Food Stamps and TANF Advocacy Toolkit". Accessed from <http://www.lac.org/toolkits/TANF/TANF.htm> on May, 2013

All government agencies can play a crucial role in reducing violence against these communities. The Department of Health and Human Services (HHS) funds violence prevention initiatives, however very little specific HHS funding supports LGBTQ and HIV-affected anti-violence initiatives. In addition to supporting comprehensive LGBTQ and HIV-affected hate violence prevention initiatives, HHS and other governmental agencies should identify violence against transgender women of color, transgender women, and LGBTQ and HIV-affected people of color as a public health crisis to address the disproportionate violence against these communities.

Substantial Impact of Homicide against Cisgender Gay Men

With a slight decrease from previous years 45.3% of survivors and victims reporting in 2012 identified as cisgender men. Of these men, 85% an overwhelming majority, identified as gay. This high proportion of gay men homicide victims is likely connected to the severity of violence against gay men. NCAVP's 2012 data highlights that gay people were more likely to need medical attention and to experience injury as a result of hate violence as compared to survivors and victims who did not identify as gay. Historically, gay men hold more social and cultural visibility than other LGBTQ and HIV-affected community members and can face discrimination based on a multitude of anti-gay stereotypes. For some gay men this visibility can lead to more access, but for others it can increase their risk of hate violence. In a study that examined rates of hate violence based on FBI hate crime data, the Williams Institute found that gay men experienced higher rates of hate-motivated physical violence than lesbians, bisexuals or other federally protected groups including Black people and Jewish people.⁶¹ This study documented that not only do gay men not only experience the same types of hate crimes but that also when lesbians, gay men, and bisexuals are compared gay men experienced more hate crimes.⁶² This finding is certainly supported by NCAVP's data and shows that while homicide does disproportionately impact gay men, gay men continue to represent the largest reporting group within NCAVP's data set.

Media bias can also drive this finding. Due to the visibility gay men experience within LGBTQ communities, the media is often more likely to publish stories about anti-gay hate violence than other forms of anti-LGBTQ and HIV-affected violence. Therefore the high proportion of anti-gay homicides may partially result from increased documentation of these homicides and not increased violence. Despite this violence against gay men remains pervasive and deadly. LGBTQ and HIV-affected programs need to continue to develop targeted and specific programming to support gay men particularly gay men of color and younger gay men to prevent violence against these communities. Anti-violence organizations should expand education, support, and outreach efforts specifically targeted towards gay men and work to create safety for this population.

⁶¹ Williams Institute. "Comparison of Hate Crime Rates Across Protected and Unprotected Groups: an Update" (2012). Accessed from: <http://williamsinstitute.law.ucla.edu/research/violence-crime/comparison-hate-crime-rates-update/> on May 15, 2013.

⁶² Ibid

High Reports of Discrimination among Transgender Communities and LGBTQ and HIV-Affected Communities of Color

In NCAVP's 2012 data transgender communities and LGBTQ and HIV-affected communities both experienced a higher likelihood of discrimination as compared to cisgender white survivors and victims. As previously mentioned discrimination can increase homelessness, unemployment, and poverty all of which increase risk of hate violence. LGBTQ and HIV-affected survivors and victims of violence can also face discrimination from law enforcement and direct service providers, which directly reduces the support that survivors and victims receive in the aftermath of violence. While discrimination is a pervasive experience for LGBTQ and HIV-affected communities, this data shows the need for specific interventions for transgender and LGBTQ and HIV-affected communities of color.

Discrimination operates through multiple settings, sometimes simultaneously, from institutional discrimination, to cultural discrimination, and finally to interpersonal discrimination. Institutional discrimination occurs through government institutions often bolstered by discriminatory laws that either explicitly exclude LGBTQ and HIV-affected communities from rights that other communities are entitled to, such as the Defense of Marriage Act, or others that do not include LGBTQ and HIV-affected communities within the protections that they offer other marginalized communities, such as the Fair Housing Act. Institutional discrimination sends a message to the broader society that reinforces and justifies anti-LGBTQ and HIV-affected bias and hate violence. Cultural discrimination happens through media, art, music, television, and other forms of culture. Movies, television, music, and art can all either reduce or increase homophobic, transphobic, and biphobic bias. Celebrities and other public figures can decrease anti-LGBTQ and HIV-affected violence through their statements and the media that they produce. Cultural discrimination can also affect the information that we receive about incidents of violence and on strategies to increase LGBTQ and HIV-affected safety. Often when news media, artists, television, or music focus on LGBTQ and HIV-affected communities they do not focus on LGBTQ and HIV-affected communities of color or transgender communities. Interpersonal discrimination occurs through individuals but interpersonal discrimination is heavily influenced by both cultural and institutional discrimination. To address these forms of discrimination and their disparate impact on transgender and LGBTQ and HIV-affected communities of color there needs to be increased public awareness campaigns to address hate violence against these communities. Government agencies should support programs and campaigns to raise awareness about hate violence such as funding for community based organizations to implement organizing and public awareness campaigns to educate and mobilize their communities to prevent homophobic, biphobic, and transphobic violence, such as the Transgender Awareness campaign in Washington, DC. This city funded public awareness campaign focused on raising awareness about transgender people. The program was developed by DC Office of Human Rights (OHR) in close communication with the transgender community and advocates. The campaign is a series of posters in public places of transgender people aimed at increasing understanding and respect to decrease the incidents of transphobic discrimination and encourage people to report incidents of discrimination to OHR.⁶³

⁶³Office of Human Rights, D.C."Transgender and Gender Identity Respect Campaign. "Accessed from: <http://ohr.dc.gov/transrespect> on May, 2013.

Police Violence Against Disproportionately Impacted Communities

Within NCAVP's person level data transgender people, people of color, gay people, and transgender people of color all faced an increased risk of hate motivated police violence. In 2012, NCAVP data demonstrates an increase in reports of police misconduct as well as an increase in hostile police attitudes. Many NCAVP members supported LGBTQ and HIV-affected survivors and victims who were falsely arrested, experienced violence, or were profiled based upon their race, sexual orientation, gender identity, and gender expression. One common form of profiling, that many LGBTQ and HIV-affected community members experience is police officers profiling LGBTQ and HIV-affected people as sex workers. Another form of police profiling is falsely arresting or selectively arresting LGBTQ and HIV-affected couples for public displays of affection or sexual activity. NCAVP members in San Francisco, Los Angeles, New York City, and Washington DC also observe police profiling and arresting LGBTQ and HIV-affected people for possessing condoms or officers profiling LGBTQ and HIV-affected community members as engaging in sex work based on possessing condoms. As NCAVP's data suggests, these issues particularly affect transgender communities of color. In a 2012 report by Make the Road New York, 59% of respondents stopped by the police identified as transgender, an alarming high number for a demographic that makes up a small percentage of the LGBQTH community. Of those stopped 90% of respondents identified as Black and Latin@.⁶⁴

Police violence, misconduct, and profiling can have devastating impacts on LGBTQ and HIV-affected survivors' and victims' ability to access emergency services and to hold offenders accountable through the criminal legal system. Scholars note that many transgender survivors and victims hesitate to interact with the police for fear of re-victimization.⁶⁵ To address these conditions, police officers should be held accountable for homophobic, biphobic, and transphobic violence and harassment. Policymakers should pass legislation and create policies to prohibit profiling based on race, gender expression, and gender identity. The New York City Anti-Violence Project is a member of Communities United for Police Reform⁶⁶ a New York City based coalition working to pass the Community Safety Act (CSA). The CSA is landmark piece of legislation consisting of four bills aimed at ending discriminatory policing and bringing accountability to the NYPD for LGBTQ and HIV-affected communities, communities of color, immigrant communities, and low-income communities.

Police officers also need to increase their knowledge on LGBTQ and HIV-affected communities, particularly LGBTQ and HIV-affected communities of color, transgender communities, and LGBTQ and HIV-affected youth. Federal, state, and local governments should create legislation to require and fund these trainings. These laws should require that LGBTQ and HIV-affected specific anti-violence organizations directly provide these trainings to ensure that police officers receive the most current information on anti-LGBTQ and HIV-affected hate violence. Policymakers should also ensure that these trainings are evaluated regularly to determine their impact on police attitudes, law enforcement knowledge of LGBTQ and HIV-affected issues,

⁶⁴ Make the Road New York. "Transgressive Policing: Police abuse of LGBTQ Communities of Color in Jackson Heights". Access from: http://www.maketheroad.org/pix_reports/MRNY_Transgressive_Policing_Full_Report_10.23.12B.pdf on May, 2013.

⁶⁵ Stotzer, Rebecca. "Violence Against Transgender People: A review of United States data" (2009).

⁶⁶ Communities United for Police Reform. Access from: <http://changethenypd.org/community-safety-act> on May 2012.

and reducing anti-LGBTQ and HIV-affected hate motivated police violence for a wide range of survivors and victims. Policymakers should also create legislation and policies to document profiling based on gender identity, sexual orientation, and race/ethnicity to have the best data possible to create remedies for these issues. Federal, state, and local governments should require and fund police departments to create LGBTQ and HIV-affected police liaisons, LGBTQ and HIV-affected advisory committees, and other programs to reduce barriers to law enforcement. The focus of these programs should be to make sure LGBTQ and HIV-affected people do not face homophobic, biphobic, and transphobic violence and harassment when engaging with the police. It is important to highlight that NCAVP member programs like OutFront in Minneapolis, Minnesota, BreakOut in New Orleans, Louisiana, and the New York City Anti-Violence Project in New York, New York have programming aimed at police reform and/or training for local law enforcement focusing on LGBTQ cultural competency.

NCAVP's data also shows that 44% of survivors and victims did not report their incidents of violence to law enforcement. This highlights a continued need to for anti-violence programs to create community-based interventions that do not rely on the criminal legal system. Of the LGBTQ and HIV-affected 2012 homicide victims, 23% were known to have engaged in sex work at the time of their homicide. These conditions also increase police patrolling and profiling of LGBTQ and HIV-affected people of color and transgender people. These interventions could prove particularly supportive to meet the needs of marginalized LGBTQ and HIV-affected communities, many of who may be reluctant to seek or face barriers in seeking support for the violence that they experience. Community accountability models focus on alternative forms of safety outside of the criminal legal system and utilize the communities' resources to ensure safety for LGBTQ and HIV-affected survivors and victims of violence. NCAVP member program, Communities United Against Violence (CUAV) in San Francisco, California have a peer based leadership development model, which aims to increase the leadership skills of survivors and victims through their personal experience to address larger social, economic, and political conditions. Community accountability efforts should be funded and evaluated to continue to provide functioning alternatives where law enforcement is not supportive or adequate.

Poverty can increase LGBTQ and HIV-affected community members' likelihood to engage in sex work or the drug trade, both of which can increase the risk of hate violence and hate motivated police violence. These circumstances can also decrease a survivor's or victim's ability and willingness to report incidents to law enforcement out of fear of arrest. These types of employment also increase the likelihood that LGBTQ and HIV-affected people of color and transgender people have criminal records. People with criminal records also face extensive barriers in obtaining sustainable employment and housing, and in some instances are denied public housing and government sponsored food programs.

UNDERREPORTED CATEGORIES

NCAVP's 2012 dataset is the most accurate data that NCAVP has compiled to date. Despite this many survivors and victims did not report their HIV, disability, or immigration status to NCAVP. Often when NCAVP members do not collect information about survivors' or victims' identities it is to support the safety of those people. Advocacy and policy work needs to continue within these populations in order to ensure access to appropriate services for these communities. Given the high percentage of undisclosed answers in these particular categories, NCAVP found it important to look at the potential reasons as to why people were not disclosing in these categories.⁶⁷

IMMIGRATION STATUS

Within immigration status, almost three quarters of survivors and victims (73.8%) did not report their immigration status, a slight decrease from 2011 (77%). Some member programs do not collect data on immigration status intentionally to support undocumented survivors and victims who may be undergoing legal proceedings. Federal immigration programs such as Secure Communities (S-Comm), a fingerprint-sharing program that shares fingerprints of suspected undocumented people with the FBI's database when they encounter law enforcement creates a chilling effect on immigrant communities. Programs like S-Comm deter LGBTQ and HIV-affected immigrants and undocumented people from reporting to law enforcement and from reporting to community based organizations for deportation back to countries where they may be in even more danger due to their LGBTQ and HIV-affected identities. Immigrations and Customs Enforcement should end S-Comm and create alternatives to enforcement only," immigration policies, which respond to immigration by deporting and criminalizing immigrant communities rather than providing opportunities for undocumented immigrants to obtain documentation. In 2013 the Williams Institute released a report titled "LGBT Adult Immigrants in the United States." The report indicates that 267,000 undocumented immigrants are LGBT identified, which is 30% of the LGBT immigrant population in the US.⁶⁸ These numbers mirror the breakdown of the entire foreign-born population in the US. The Williams study points to the increasing needs for services for immigrant LGBTQ and HIV-affected survivors and victims.

HIV STATUS

Similarly, 86% of respondents did not disclose their HIV status in 2012. Studies show that people living with HIV and AIDS face higher rates of discrimination and stigma related to their HIV status. Lambda Legal released a report in November 2010 which documented that stigma against HIV-affected communities, and lack of access to culturally competent services, leads HIV-affected survivors and victims to underreport violence or discrimination

⁶⁷ NCAVP determined a category to be underreported based on 50% or more of survivors and victims not giving NCAVP this type of demographic information.

⁶⁸ The Williams Institute: "LGBT Adult Immigrants in the United States" 2013. Accessed from: <http://williamsinstitute.law.ucla.edu/infographic-lgbt-undocumented/> on April 12, 2013.

related to HIV-status.⁶⁹ The low percentage of survivors and victims who reported their HIV status to NCAVP in 2012 may reflect these trends in HIV status disclosure and therefore may under-represent hate violence reports toward people living with HIV. Many of NCAVP's member programs have strong links in HIV-affected communities but may also have policies restricting how to ask or collect HIV-status information. In multiple states there are specific HIV confidentiality laws related to collecting information on HIV status that can also reduce NCAVP members' ability to collect information on violence against HIV-affected communities.

DISABILITY STATUS

In 2012, 72% of survivors and victims did not disclose their disability status, similar to 2011. These findings are consistent with the broader literature, which suggests that most reporting processes can create barriers for people with disabilities. For example, people with disabilities may not be able to call in or travel to make a report in person, or could have difficulty providing testimony or communicating their experiences to law enforcement. LGBTQ and HIV-affected people with disabilities may experience increased discrimination and barriers due to the combination of their LGBTQ and HIV-affected identity and their disability.⁷⁰ NCAVP should continue to research these issues and LGBTQ and HIV-affected anti-violence programs may need increased resources to ensure that their reporting tools and are as accessible as possible for LGBTQ and HIV-affected survivors and victims with disabilities. Additionally, LGBTQ and HIV-affected anti-violence organizations should also collaborate with disability justice organizations and independent living centers to address violence against LGBTQ and HIV-affected people with disabilities. Training for service providers should also focus on the ways in which social isolation, which disproportionately affects people with disabilities, increases vulnerability to violence and other victimization.⁷¹ Specific prevention programs should focus on community building and education to challenge isolation and increase understanding throughout a variety of LGBTQ and HIV-affected people with disabilities of the services available to them and the specific dynamics of homophobic, biphobic, and transphobic violence.

⁶⁹ Lambda Legal "HIV Stigma and Discrimination in the US: An Evidence-Based Report" November 2010. Accessed from: http://data.lambdalegal.org/publications/downloads/fs_hiv-stigma-and-discrimination-in-the-us.pdf on May 20, 2012.

⁷⁰ C. H. Hoong, N. Mguni, C. Cook, N. Coomber & A. Hedges. (2009). "Disabled Victims of Targeted Violence, Harassment, and Abuse: Barriers to Reporting and Seeking Redress." *Safer Communities*, 8(4): 27-24.

⁷¹ Ticoll, M. "Violence and People with Disabilities". Accessed from: <https://www.ncjrs.gov/App/Publications/abstract.aspx?ID=159729> on May, 2013.

UNDERREPRESENTED CATEGORIES

Underrepresented categories are communities that NCAVP believes could be underreporting to their experiences of violence to NCAVP members. These communities show NCAVP members where potential barriers exist and highlight the need for dedicated programming within specific communities.

TRANSGENDER MEN

In 2012, 17.2% of transgender survivors and victims identified as men. The low reporting of transgender men points to a need to increase services that address the needs of transgender men survivors and victims, but can also potentially demonstrate a lower percentage of transgender men in the U.S. within transgender people as a whole. While NCAVP's data does not have enough data to accurately analyze data on transgender men it should be noted that our data size is larger than the projected population of the transgender community nationally, where .5% of the total population is transgender adults (18-64) in the U.S.⁷²

⁷² The Williams Institute. "How Many People Are Lesbian, Gay, Bisexual, and Transgender". Access from: <http://williamsinstitute.law.ucla.edu/wp-content/uploads/Gates-How-Many-People-LGBT-Apr-2011.pdf> on May, 2013. Pg 5.

RECOMMENDATIONS

FOR POLICYMAKERS AND FUNDERS IN FULL

End the root causes of anti-LGBTQ and HIV-affected violence through addressing anti-LGBTQ and HIV-affected institutional, cultural, and interpersonal discrimination.

- Federal, state, and local governments should pass and amend non-discrimination laws such as the Employment Non-Discrimination Act, the Repeal HIV Discrimination Act, and the Fair Housing Act. Federal, state, and local governments should also enact policies that protect LGBTQ and HIV-affected communities from discrimination based on sexual orientation, gender identity, gender expression, and HIV-status.⁷³
- Policymakers and legislators should pass laws and policies to address LGBTQ and HIV-affected youth experiences of bullying, harassment, and violence in schools, foster care, family court, shelters, and the juvenile justice system by funding trainers familiar to work with these agencies on LGBTQ and HIV-affected cultural competency trainings and restorative justice models.
- Policymakers should prohibit offenders of anti-LGBTQ and HIV-affected hate violence from using “gay and transgender panic” defenses.
- Policymakers and public figures should promote safety for LGBTQ and HIV-affected people by denouncing homophobic, biphobic, and transphobic statements, laws, and programs.
- Federal, state, and local governments should pass laws and policies that prevent LGBTQ and HIV-affected students from experiencing bullying, harassment, and violence in schools such as the Student Non-Discrimination Act and the Safe Schools Improvement Act.
- Policymakers should support alternative sentencing programs including individual and group intervention programs, community service with LGBTQ and HIV-affected organizations, and LGBTQ and HIV-affected anti-violence education programs to encourage behavior change for hate violence offenders.
- Federal, state, and local governments should mandate trainings that increase first responders’ and non-LGBTQ and HIV-affected direct service providers’ knowledge and competency on serving LGBTQ and HIV-affected survivors and victims of violence.

Decrease the risk of severe violence and homicide through ending LGBTQ and HIV-affected poverty in LGBTQ and HIV-affected communities.

- Policymakers and law enforcement agencies should end policies that profile and police people engaged in survival crimes, and support harm reduction services to support people engaged in survival crimes.
- Federal, state, and local governments should remove barriers to access public benefits including food stamps and public housing for people with criminal records.

⁷³ The National Coalition for Transgender Equality has an extensive list of non-discrimination federal legislative and policy recommendations that expand upon this recommendation in more detail at <http://transequality.org/Issues/discrimination.html>.

- Federal, state, and local governments should end laws and policies that criminalize homelessness, HIV-status, participation in sex work, and drug possession to increase safety for the most severely impacted LGBTQ and HIV-affected survivors and victims of hate violence.
- The United States Interagency Council on Homelessness should establish an LGBTQ and HIV-affected specific research agenda to research policies and programs to address hate violence against LGBTQ and HIV-affected homeless people.
- Federal and state policymakers should raise the minimum wage to increase LGBTQ and HIV-affected low-income and low-wage workers to be able to escape poverty.
- Federal policymakers should pass the Runaway and Homeless Youth Act which would permit young people to receive primary and specialty health care services without the consent of a parent or guardian, and authorize and appropriate adequate federal funds for homelessness developmental, preventive and intervention programs targeted to LGBTQ and HIV-affected youth.

Collect data and expand research on LGBTQ and HIV-affected community’s experiences of violence.

- Federal, state, and local governments should collect and analyze data on LGBTQ and HIV-affected hate violence survivors and victims whenever demographic information is requested.
- Federal, state, and local governments should collect and analyze data on LGBTQ and HIV-affected communities within all federal data collection surveys.
- Private funders should support community-based organizations and research institutions to collect data and research on the prevalence, severity, and causes of anti-LGBTQ and HIV-affected hate violence.
- Federal, state, and local governments should reduce reporting barriers for LGBTQ and HIV-affected survivors and victims including removing laws and policies that prevent survivors and victims from accessing law enforcement.

End law enforcement violence against LGBTQ and HIV-affected people.

- Federal, state, and local governments should enact policies that prohibit police profiling such as the End Racial Profiling Ban that includes provisions on profiling based on sexual orientation, gender identity, gender expression, immigration status, housing status, and race.
- The Federal government should ensure that anti-discrimination and anti-profiling provisions based upon sexual orientation, gender identity, gender expression, immigration status, housing status, and race are a condition of block grant funding to local law enforcement.
- Local law enforcement agencies should prohibit policing protocols and practices that use searches to assign gender for detainees.
- The Department of Justice (DOJ) should revise its “Guidance Regarding the Use of Race by Federal Law Enforcement Agencies” to include sexual orientation, gender identity, gender expression, immigration status, and housing status.

- Policymakers should ensure that police officers are investigated and held accountable for homophobic, biphobic, and transphobic harassment and violence.
- Federal, state, and local governments should enact humane, LGBTQ-inclusive immigration reform policies, which create a pathway to citizenship for undocumented immigrants, and end “enforcement-only” policies such as the Secure Communities program.
- Policymakers should enact policies that address homophobic, transphobic, and biphobic violence within jails, detention centers, and prisons.
- Policymakers should implement the Prison Rape Elimination Act (PREA) in immigration detention centers.
- The Center for Disease Control and the Department of Justice should issue guidance condemning reliance on the use of condoms as evidence of prostitution law violations to improve the public safety and public health of LGBTQ and HIV-affected people. State and local law enforcement agencies should prohibit the use of condoms as evidence of prostitution law violations.

Increase funding for LGBTQ and HIV-affected anti-violence support and prevention programs.

- Federal, state, and local governments should fund programs that increase government support for LGBTQ and HIV-affected anti-violence projects by including LGBTQ and HIV-affected specific funding in all federal, state, and local anti-violence funding streams.
- Federal, state, and local governments should recognize that violence against LGBTQ and HIV-affected people, particularly transgender communities of color, at severely high risk of homicide, as a public health crisis and support initiatives to prevent this violence.
- Public and private funders should support programs that provide training and technical assistance on serving LGBTQ and HIV-affected survivors and victims of violence to anti-violence grantees.
- Public and private funders should support community-based hate violence prevention initiatives to target programming within communities that are disproportionately affected by violence or underreporting their incidents of violence.
- Policymakers and funders should support public education and awareness campaigns to reduce and end homophobia, biphobia, and transphobia.

BEST PRACTICES

Community based organizations, LGBTQ and HIV-affected anti-violence programs, non-LGBTQ and HIV-affected anti-violence programs, religious institutions, and other community-based organizations all play a critical role in challenging the culture of violence against LGBTQ and HIV-affected people. NCAVP recommends the following best practices for practitioners to address and prevent anti-LGBTQ and HIV-affected hate violence.

FOR COMMUNITY BASED HATE VIOLENCE INITIATIVES

Community Based Organizations should create programs and campaigns to prevent anti-LGBTQ and HIV-affected harassment and violence.

Community based organizations such as community pride centers, direct service organizations, political organizations, and civic organizations can play leadership roles in changing anti-LGBTQ and HIV-affected attitudes in order to create a culture of respect for LGBTQ and HIV-affected communities. Community based organizations should create public education programs and cultural events that increase public awareness of the impact of anti-LGBTQ and HIV-affected hate violence on LGBTQ and HIV-affected communities. Programs like the Transgender and Gender Identity Respect campaign by the DC Office of Human Rights (OHR) in Washington D.C. aim to increase understanding and respect for the transgender and gender non-conforming communities and decrease incidents of discrimination through a public awareness campaign with affirming and respectful images of transgender communities.⁷⁴ Organizations can also create community organizing campaigns to confront homophobic, biphobic, and transphobic institutions to change anti-LGBTQ and HIV-affected policies, to denounce anti-LGBTQ and HIV-affected rhetoric, or to challenge anti-LGBTQ and HIV-affected programs. One such program is Sean's Last Wish based out of Greenville, South Carolina, which provides education and awareness trainings, outreach, and research on hate violence as well as campaigns to reduce and prevent homophobia, biphobia, and transphobia.

Schools and universities should create LGBTQ and HIV-affected anti-violence initiatives and LGBTQ and HIV-affected-inclusive curricula to reduce hate violence and harassment.

As documented in this report, LGBTQ and HIV-affected youth and young adult survivors and victims consisted of 31.7% of total reports and youth and young adult offenders consisted of 59.5% of offenders. Schools and universities have a responsibility in preventing anti-LGBTQ and HIV-affected hate violence and ensuring the safety of their LGBTQ and HIV-affected students. As Lambda Legal points out in their School to Prison Pipeline work LGBT students face harsher punishments for similar infractions as their heterosexual peers and when faced with repeated bullying and harassment take matters into their own hands often resulting in higher rates of school violence.⁷⁵ LGBTQ and HIV-affected anti-violence

⁷⁴ Transgender and Gender Identity Respect Campaign: September, 2012. Accessed from: <http://ohr.dc.gov/transrespect> on April 11, 2013.

⁷⁵ Lambda Legal: School-to-Prison-Pipeline. Accessed from: <http://www.lambdalegal.org/blog/lambda-legal-helps-senate-address-school-to-prison-pipeline> on May, 2013.

programs should work with educational institutions to create curricula that increase LGBTQ and HIV-affected acceptance, create initiatives and events designed to decrease anti-LGBTQ and HIV-affected violence, assist educators in creating inclusive classrooms, and support school administrators in creating policies against anti-LGBTQ and HIV-affected violence. These partnerships can teach students to support all people's rights to safety regardless of sexual orientation, gender identity, or gender expression, and can also give students information on critical resources around anti-LGBTQ and HIV-affected violence. Organizations such as Gay, Lesbian, Straight Education Network (GLSEN) have established best practices in reducing anti-LGBTQ and HIV-affected violence with schools through creating Gay Straight Alliances, anti-bullying campaigns, and national networks of educators and students dedicated to reducing anti-LGBTQ and HIV-affected violence in schools. GLSEN and organizations like Lambda Legal have also been cautious in their approach to anti-bullying policies by supporting approaches that do not support criminalization and incarceration of youth. LGBTQ and HIV-affected anti-violence organizations, non-LGBTQ and HIV-affected youth, and family service organizations should research these models in order to create effective programs.

Religious institutions should create LGBTQ and HIV-affected affirming programs, denounce anti-LGBTQ and HIV-affected rhetoric, and collaborate with LGBTQ and HIV-affected community based organizations in violence prevention campaigns.

Through NCAVP's Southern project, NCAVP members in the South have expressed the need to collaborate with faith and religious institutions to challenge the culture of violence against LGBTQ and HIV-affected people. Within many communities religious leaders have the ability to influence the thoughts and actions of their constituents. LGBTQ and HIV-affected affirming religious leaders can reduce anti-LGBTQ and HIV-affected violence and provide crucial support for LGBTQ and HIV-affected survivors and victims of violence.⁷⁶ Many NCAVP members, survivors, and victims of hate violence feel that homophobic, biphobic, and transphobic rhetoric that some religious leaders promote supports violence against LGBTQ and HIV-affected people and inhibits community support for anti-LGBTQ and HIV-affected violence prevention initiatives. LGBTQ and HIV-affected affirming religious and faith communities contribute to reducing violence against LGBTQ and HIV-affected people by creating a culture that respects and supports LGBTQ and HIV-affected communities. Religious institutions should create and support campaigns that publicly denounce homophobic, biphobic, and transphobic rhetoric and that promote the safety of LGBTQ and HIV-affected people. Faith organizations should collaborate with anti-violence programs on hate violence prevention campaigns in their local communities. One such example is NCAVP's member program Rainbow Community Cares, a faith-based LGBTQ and HIV-affected anti-violence organization organizing against LGBTQ and HIV-affected hate violence in local religious communities. Rainbow Community Cares co-organizes events and forums with faith leaders to discuss and collaborate on hate violence prevention initiatives.

⁷⁶ Unity Fellowship Church. Accessed from http://www.unityfellowshipchurch.org/mainsite/?page_id=7 on May, 2013.

FOR SUPPORTING LGBTQ AND HIV-AFFECTED SURVIVORS AND VICTIMS

Increase survivor and victim leadership and decision making in LGBTQ and HIV-affected and anti-violence organizations.

Organizations should work to support LGBTQ and HIV-affected survivors and victims of violence, particularly transgender people, LGBTQ and HIV-affected people of color, and LGBTQ and HIV-affected youth in accessing leadership positions in the anti-violence movement. LGBTQ and HIV-affected anti-violence organizations, non-LGBTQ and HIV-affected anti-violence organizations, and other community based organizations should also support and prioritize the leadership the most marginalized LGBTQ and HIV-affected communities including transgender people, people of color, transgender people of color, and LGBTQ and HIV-affected youth to better serve the communities most impacted by severe hate violence and homicide. This includes programs such as speaker's bureaus, participatory action research projects, community advisory boards, and organizing campaigns that focus on increasing survivor leadership and participation in anti-violence advocacy and the day-to-day decisions of LGBTQ and anti-violence organizations. LGBTQ and HIV-affected survivors and victims of violence possess lived experiences that provide invaluable perspectives for prevention efforts and innovative strategies to support survivors and victims. Many of the communities that experience the most severe forms of violence also are often underserved within LGBTQ, anti-violence, and LGBTQ anti-violence organizations. Survivor development and cultivation at service providing organizations and as organizers and administrators can help to ensure organizational accountability and expertise to the communities most directly affected by violence. One such model exists at NCAVP member Community United Against Violence (CUAV) in San Francisco, which works to continue to engage survivors and victims and support them to have leadership roles within the organization. Another model is the New York City Anti-Violence Project's community action committees focused on hate violence and intimate partner violence. Participants work with the New York City Anti-Violence Project's community organizers to identify specific issues and action steps to addressing hate violence and intimate partner violence in their communities through developing campaigns, conducting outreach, and organizing community forums to increase safety for LGBTQ and HIV-affected community members.

Increase LGBTQ and HIV-affected cultural competency for direct service providers and first responders.

Many LGBTQ and HIV-affected survivors and victims do not have access to LGBTQ-specific anti-violence support. Therefore it is critical to train service providers and first responders on how to best serve all LGBTQ and HIV-affected survivors and victims. These trainings should include appropriate terminology for LGBTQ and HIV-affected communities, specific needs for LGBTQ and HIV-affected survivors and victims, common barriers that LGBTQ and HIV-affected survivors and victims face when accessing services, and address strategies to remedy these barriers. Public and private anti-violence grantees should receive incentives to revise their policies in order to increase the amount of LGBTQ and HIV-affected

survivors and victims that they serve. Federal, state, and local governments should also fund health care institutions to work with LGBTQ and HIV-affected health and anti-violence organizations to ensure that health care providers can meet the needs of LGBTQ and HIV-affected survivors and victims of violence. In particular, paramedics, emergency department staff, and sexual assault examiners should receive specialized trainings on the needs of LGBTQ and HIV-affected survivors and victims. Programs such as the OVW-funded National LGBTQ Training and Technical Assistance Center currently run by NCAVP, the OVC-funded LGBTQ anti-violence training for OVC grantees, and the OVC-funded national demonstration initiative to test and evaluate methods of increasing LGBTQ accessibility within non-LGBTQ victim service organizations are models that other federal and government agencies can utilize to increase LGBTQ cultural competency among direct service providers.

Increase resources and funding for LGBTQ and HIV-affected and anti-violence organizations that utilize community accountability or transformative justice models.

As previously discussed, many LGBTQ and HIV-affected survivors and victims of violence do not report incidents of violence to the police. This can be due to negative experiences with law enforcement, having a criminal record, having regular engagement with illegal activities, being undocumented, or having other immigration concerns. A small but growing number of organizations are developing skills and best practices on anti-violence work separate from the criminal legal system. These strategies are variably called community accountability or transformative justice. LGBTQ and HIV-affected anti-violence programs and non-LGBTQ and HIV-affected service providers should collaborate with community based anti-violence groups to receive training and technical assistance on these models for programming and support. Some promising strategies aim to strengthen local community ties between neighbors, local businesses, and community organizations such as the Safe OUTside the System Collective of the Audre Lorde Project in Brooklyn, New York. Another program is CUAV in San Francisco which supports participants in building peer based support to connect their personal experience of violence to the larger social, economic, and political conditions they face as LGBTQ and HIV-affected survivors and victims of violence. These strategies involve training participants in how to prevent, identify, and de-escalate violence, and support survivors and victims without relying on law enforcement.

Increase access for underserved communities

Anti-violence organizations should prioritize outreach to LGBTQ and HIV-affected elders, HIV-affected communities, Immigrants, transgender men, Native American, Arab/Middle Eastern and Asian Pacific-Islander communities to reach and meet the needs of under-represented LGBTQ and HIV-affected survivors and victims of hate violence. NCAVP's 2012 data lacks representation from LGBTQ and HIV-affected elders, HIV-positive survivors and victims, immigrants, transgender men, LGBTQ and HIV-affected Native American, Arab/Middle Eastern and Asian Pacific-Islander survivors and victims, and other communities that may be underserved or under-reporting. NCAVP members do not feel this is due to lower rates of hate violence against these communities, but rather barriers for these communities to report and access services, as well as a gap in outreach and collaboration with these communities. Anti-

violence organizations should prioritize reaching out to LGBTQ and HIV-affected elders, HIV-affected communities, LGBTQ and HIV-affected immigrants, transgender men and LGBTQ and HIV-affected Asian and Native American communities and collaborating with organizations within these communities to develop specific and targeted initiatives to best meet the needs of these underserved communities.

FOR DATA COLLECTION AND DOCUMENTATION

Schools, universities, and community-based organizations, including anti-violence programs, service organizations, and faith organizations, should collect data on violence against LGBTQ and HIV-affected people.

Educational institutions and community-based organizations are in regular contact with community members and have opportunities to collect data and document experiences of LGBTQ and HIV-affected survivors and victims. Organizations that do not collect information on sexual orientation and gender identity should implement new protocols to collect this information, and should seek technical assistance and training to do so safely and respectfully. In order to fully understand and end hate violence against LGBTQ and HIV-affected people, comprehensive national data must be collected from non-governmental sources in addition to governmental sources. In recent years non-governmental organizations and governmental agencies have started collecting data that is LGB focused. While this work is ground breaking, it still leaves out critical communities including transgender and HIV affected communities. All data collection must be inclusive of LGBTQ and HIV-affected communities to create an accurate picture of the issues affecting the community.

CONCLUSION

2012 was a year of increased visibility for LGBTQ and HIV-affected communities, marked by a historic expansion of rights for LGBTQ and HIV-affected people and unprecedented efforts by the federal government to include LGBTQ and HIV-affected communities in its work to address violence. Amidst this progress, NCAVP continues to document the disproportionate impact of homicide on transgender women of color, the continued pervasive impact of hate violence on gay men, and an increase of police violence against LGBTQ and HIV-affected communities. Media and policymakers have finally begun to recognize that anti-LGBTQ and HIV-affected violence is a critical issue, but must continue increase reporting that addresses the alarmingly high rates in which LGBTQ and HIV-affected people of color experience higher rates of more severe violence. Similar to our findings in 2011 and 2010, NCAVP once again finds that transgender people, LGBTQ and HIV-affected people of color, and transgender people of color continued to be disproportionately impacted by violence and homicide. Simultaneously, these communities have the least access to resources and support services. NCAVP continues its commitment to understanding and implementing an analysis of anti-LGBTQ and HIV-affected hate violence that integrates an understanding of intersectional identities including how racism, classism, anti-immigrant bias, homophobia, transphobia, and heterosexism create can impact various LGBTQ and HIV-affected people differently.

LOCAL SUMMARIES

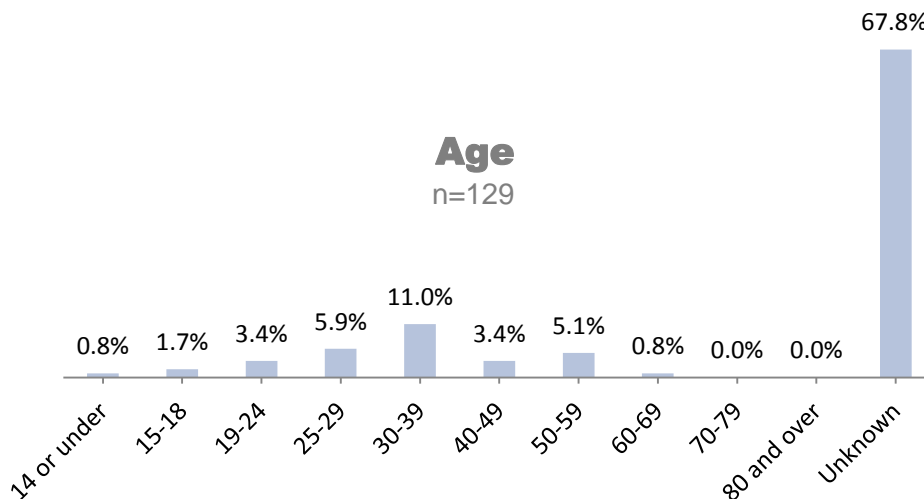
BUCKEYE REGION ANTI-VIOLENCE ORGANIZATION (BRAVO)

Ohio

BRAVO works to eliminate violence perpetrated on the basis of sexual orientation and/or gender identification, domestic violence, and sexual assault through prevention, education, advocacy, violence documentation, and survivor services, both within and on behalf of the Lesbian, Gay, Bisexual, and Transgender communities. BRAVO’s services include anonymous confidential crisis support and information via a helpline with trained staff and volunteers, documentation of hate crimes and intimate partner violence, hospital and legal advocacy, public education to increase awareness of hate crimes and same sex domestic violence and to increase knowledge about BRAVO’s support services, and education of public safety workers and service and health care providers to increase their competency to serve LGBTQ victims.

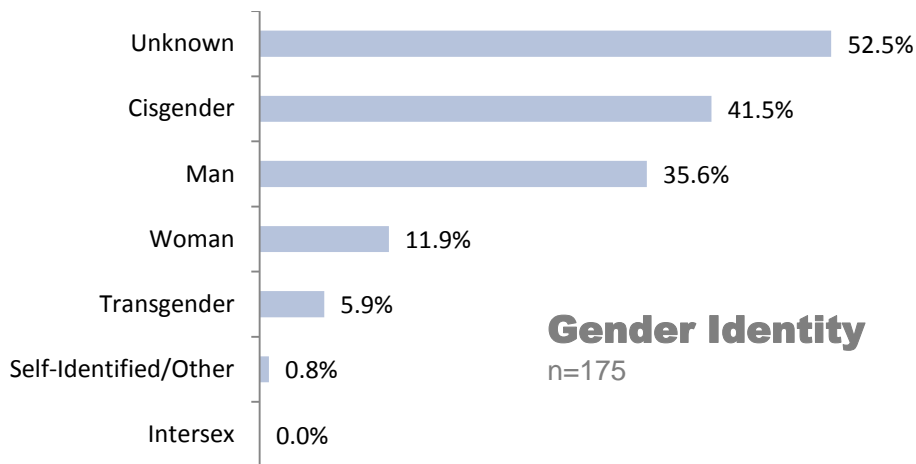
BRAVO is committed to our belief that the best way to reduce violence is to foster acceptance. Only by making people and institutions aware of these issues and “demystifying” LGBTQ people and the issues that LGBTQ people face can we assure quality services to victims and ultimately reduce the incidence of violence. Our work focuses on both bias crimes against LGBTQ people, intimate partner violence, and sexual violence.

2012 marks the twenty-third year that BRAVO and NCAVP have documented hate violence statistics in Ohio. There was a slight increase (6%) in the number of reports taken in 2012. In addition, we documented two hate violence incidents that were directed towards a larger group of survivors and victims. These incidents occurred in such a manner that we felt it critical to report the effects of the violence on each individual in the group. Therefore, many of our 2012 statistics and proportions are reflective of this inclusion and we report a large number of unknown demographics.



Due to the large number of unknown demographics resulting from the two large group reports, there was a decrease in the proportion of young people (under age 49; from 47% to 24%) and white people (60% to 26%) reporting violence. However, we received a report from an individual under 14 years old, and there was an

increase in reports from individuals aged 19-29 (0 to 11). There was a substantial decrease in the number of female-identified survivors and victims (70%) and an 85% decrease in the number of lesbians reporting hate violence in 2012. This fluctuation is consistent with trends in past years and is likely related to differences in where outreach was conducted across the state. We received a similar number of reports from transgender individuals in 2012 compared to 2011 (7 and 8, respectively). However, the number of transgender survivors and victims comprise a smaller proportion of the total incidents from 2011 due to the inclusion of the two large group incidents this year.



We continue to see shifts in the location of hate/bias violence over the years. The majority of hate/bias violence in 2012 was reported as occurring on streets, a 30% increase from 2011. However, this increase is likely influenced by the reporting of the two large group incidents, and is likely not reflective of an increasing trend of violence occurring on the streets. While there was a decrease in reports occurring at a private residence, there was an increase in bias/hate violence occurring in the workplace, which combined comprises over a quarter of all incidents reported (27%). Additionally, there was a rise in the number of hate/bias incidents occurring at or nearby LGBTQI specific venues.

Although we documented a 64.1% decrease from 24 to 13 individuals experiencing physical violence in the context of hate/bias violence, and a 55.6% decrease in individuals requiring medical attention (from 18 to 8), there was 250% increase in the involvement of a weapon in hate/bias incidents reported. Alarmingly, we documented 3 murders in 2012, one of which was anti-transgender and two were anti-LGBTQ motivated.

Anti-transgender motivated hate violence increased by 100% (from 3 to 6) in 2012, as did anti HIV/AIDS motivated hate violence (from 0 to 2). Although there was a decrease in the number of thefts and vandalism from 2011 to 2012 (6 to 2), there were 2 arsons reported in 2012. There was an alarming spike in the number of hate/bias incidents that involved stalking, with 9 reports in 2012, a 350% increase from 2011. There continues to be a concerning trend of increasing discrimination (from 15% in 2011 to 68% in 2012) and threats and intimidation related offenses (24% to 35%) within the context of hate/bias violence. Reports of bullying (4 to 7; 75%) and harassment (0 to 79) also increased from 2011 to 2012.

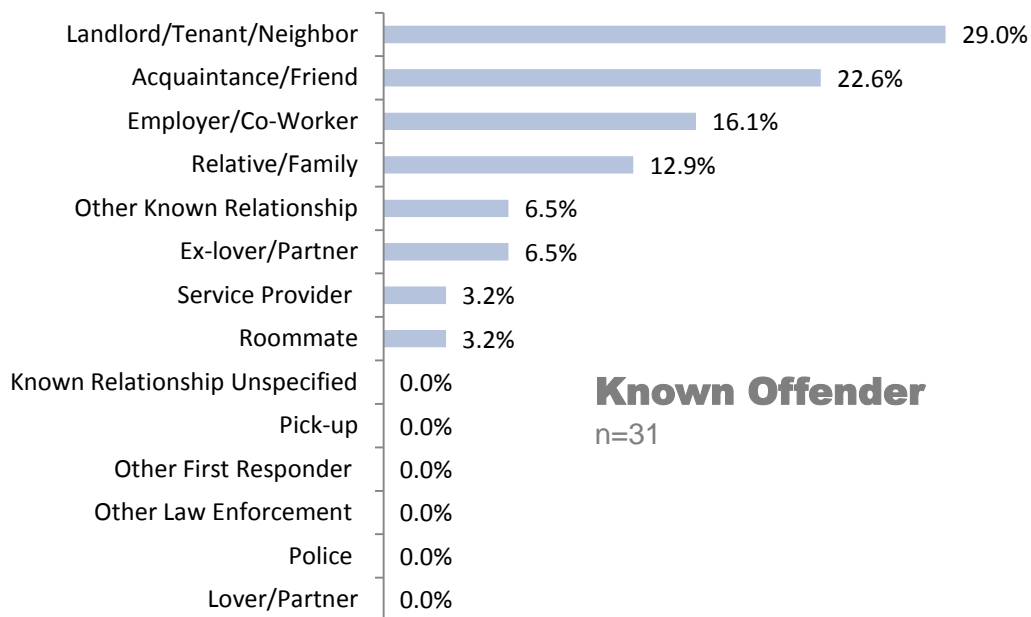
Of the 23 reports made to police in 2012, 16 of the complaints were heard; police classified none as hate/bias violence. While almost half of survivors/victims (43%) reported courteous treatment, approximately 10% reported indifferent police interaction, and 24% experienced hostile interactions with police, including verbal abuse, slurs, and the arrest of a survivor. There was an increase in police and landlord/tenant/neighbors as known offenders of the reported hate/bias violence, which was influenced by both of the documented group incidents.

COLORADO ANTI-VIOLENCE PROGRAM (CAVP)

Denver, Colorado

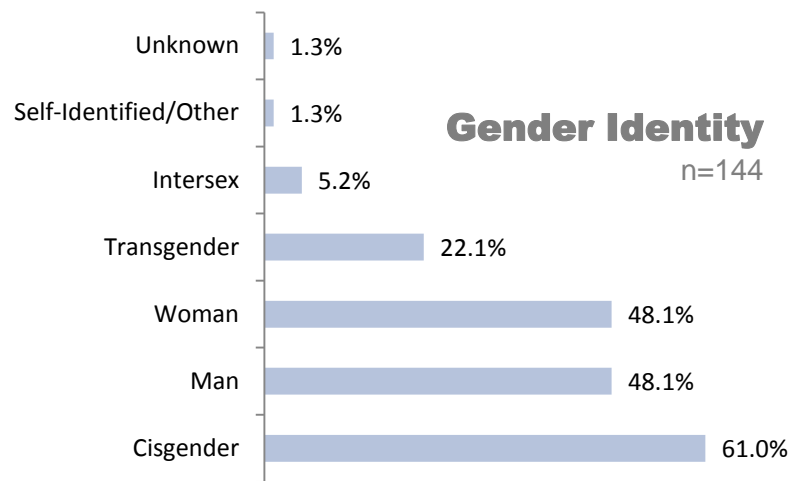
Since 1986 the Colorado Anti-Violence Program has been dedicated to eliminating violence within and against the lesbian, gay, bisexual, transgender and queer (LGBTQ) communities in Colorado, and providing the highest quality services to survivors. CAVP runs a 24-hour statewide hotline that is run by trained volunteer advocates, that provides information, crisis intervention, referrals, support and advocacy for survivors and families, partners, and friends of victims. Most of the reports that CAVP receives are through the hotline. CAVP also provides technical assistance, training and education with other agencies including, but not limited to, service providers, homeless shelters, community organizations, law enforcement and other community members. Branching Seedz of Resistance is CAVP’s youth project that is youth-led and works to build community power to break cycles of violence affecting LGBTQ young people.

We noted a decrease in numbers of hate violence reports from the previous year, down 14.4% from 90 in 2011 to 77 in 2012. We strongly feel that this decline in reported numbers is, in fact, an indication that our outreach and data collection efforts need to be further strengthened. CAVP encourages survivors and victims to call to report incidents of hate violence that they experience or witness so that we can get a truer picture of ground realities. We believe that people hesitate to call a hotline just to report a hate violence they experienced if they don’t also need resources or support.

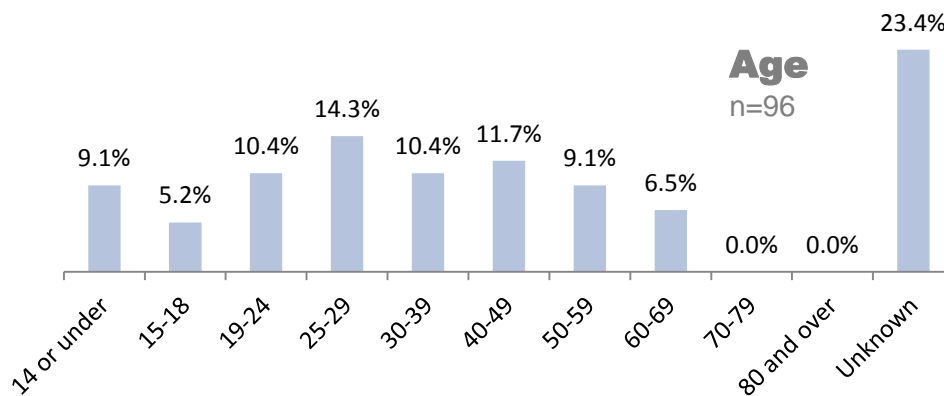


In 2012, 29% of known offenders were reported to be landlords, tenants and neighbors. As in previous years, CAVP continues to express serious concern about police violence. In 2012, we received reports of 10 incidents of police violence or harassment from around the state: this is a 100% increase from 5 cases in 2011 to 10 in 2012.

Within site-type incidents, those that occurred on the street and/or public places were 39% of total reports. Private residences were 25% of total reports, a 46% increase from 2011.



Transgender survivors and victims were 22% of total reports, a 143% increase from 2011 (7 in 2011 and 17 in 2012). This points to a continued trend of increasing violence and reports of anti-transgender hate violence as noted in previous years. We strongly feel that anti-transgender violence is not as frequently reported and resources should focus on reaching those communities.



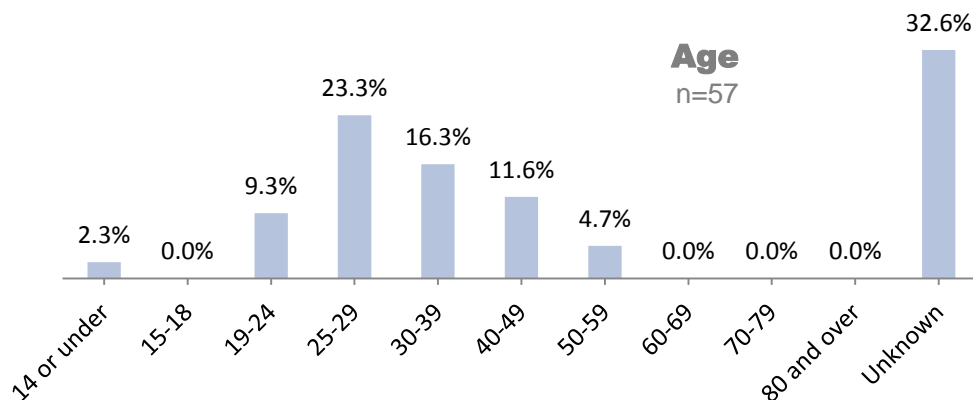
Finally, the number of survivors of hate violence between the ages 30-39 decreased 53% representing 10.4% of survivors, while we had an increase in reports from those between the ages 60-69 (from 1 report in 2011 to 5 in 2012, which is a 400% increase) representing 6.5% of survivors. It is important to note that age is a category that is underrepresented in our total reports from survivors and victims.

CENTER ON HALSTED ANTI-VIOLENCE PROJECT (COH AVP)

Chicago, Illinois

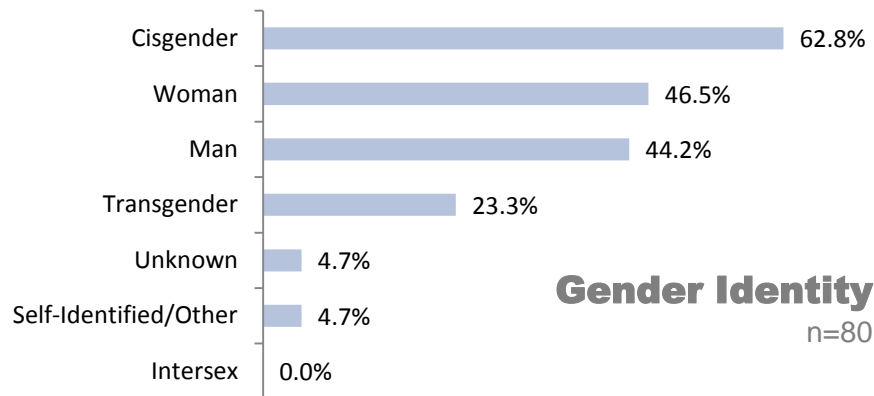
Center on Halsted advances community and secures the health and well-being of the LGBTQ people of Chicagoland. Center on Halsted is the Midwest's most comprehensive community center designed to meet the needs and enrich the lives of LGBTQ individuals. It began in 1973 as an information clearinghouse and meeting space for gays and lesbians, named Gay Horizons. Over the years, in response to the emerging needs of the community, Center on Halsted established programs for persons living with HIV/AIDS, survivors of violence, young people, and older adults. In 2007, following the successful completion of a \$20 million capital campaign, we opened the doors to our current community center, bringing together the rich history of social services we provide for lesbian, gay, bisexual, transgender, and queer (LGBTQ) people with an opportunity to broaden our work and increase our programs. Center on Halsted Anti-Violence Project responds to hate, domestic, sexual, police, and HIV-related violence across our region, providing support and services to survivors, their significant others, and witnesses, through trauma-informed counseling and LGBTQ-specific information and referrals.

During 2012, we systematically gathered more demographic data from those who contacted COH AVP for assistance. Data collection was enhanced by improving outreach efforts to impacted communities specifically following reported incidents and intentionally cultivating longer-term relationships of follow-up support and safety re-assessments with survivors who connected with COH AVP. As expected, gathering demographic information proved to be better accomplished during later contacts rather than during initial, most often crisis situations. Improving data collection is important in order to address hate violence targeting our communities. It requires improved financial and community support in order to access additional resources including increased staffing, volunteers, and materials to grow capacities to provide ethical and meaningful support for survivors.



Our improved 2012 data provides a clearer picture of who is being targeted and victimized by hate violence in our area. For example, the age group about which we have the most data is 25 – 29 year olds, representing 23% of victims/survivors. Additionally, Black/African-American and White victims/survivors were both represented in 30% of COH AVP reports. 23% of reported victims/survivors of hate violence identified as Transgender, including the only homicides reported to COH AVP in 2012.

Reported incidents of harassment and discrimination increased dramatically when compared to the previous year. Reports of anti-LGBTQH violence in 2012 indicated that “harassment” (via email, phone, or mail) occurred in 30% of incidents (3 in 2011 and 26 in 2012), “discrimination” occurred in 22% of incidents (0 in 2011 and 19 in 2012), and “verbal harassment” occurred in 24% of incidents (28 in 2011 and 21 in 2012), making them the most common types of hate and bias tactics reported to COH AVP during the past year.



The total number of survivors and victims of hate violence reported to COH AVP decreased from 2011 to 2012, the second year in a row with a significant decrease, continuing a pattern of fluctuation noted for several years. (During the past five years, the numbers of victims/survivors of incidents of anti-LGBTQH violence reported to COH AVP are as follows: 2008 = 108; 2009 = 79; 2010 = 124; 2011 = 73; and 2012 = 43.) We are uncertain if these numbers represent decreases or increases in actual incidents or numbers of victims of hate violence. We suspect attention to incidents of hate violence shifted as a large part of the LGBTQ population and organizations in Chicago turned their attention to winning same-sex marriage rights in Illinois during the past year. We believe this focus may have impacted community recognition and action regarding hate violence, despite the murders of two young Transgender women reported in Chicago during the summer of 2012.

COMMUNITY UNITED AGAINST VIOLENCE (CUAV)

San Francisco, CA

Founded in 1979, CUAV works to build the power of LGBTQQ (lesbian, gay, bisexual, transgender, queer, and questioning) communities to transform violence and oppression. We support the healing and leadership of those impacted by abuse and mobilize our broader communities to replace cycles of trauma with cycles of safety and liberation. As part of the larger social justice movement, CUAV works to create truly safe communities where everyone can thrive.

CUAV works primarily with Black and Latinx, extremely low-income, LGBTQ survivors of violence. A typical LGBTQ hate violence survivor who comes to CUAV seeking services also navigates surviving through working criminalized jobs or relying on disability support, struggling to find housing that meets their needs around affordability and emotional safety, and surviving multiple forms of relationship abuse. Many also live in fear of deportation or face barriers to support because they have cycled in and out of the county jail and state prison systems. A lot of the hate violence these survivors report is in direct response to the conditions they face as people living below the federal poverty line in one of the most expensive cities in the nation.

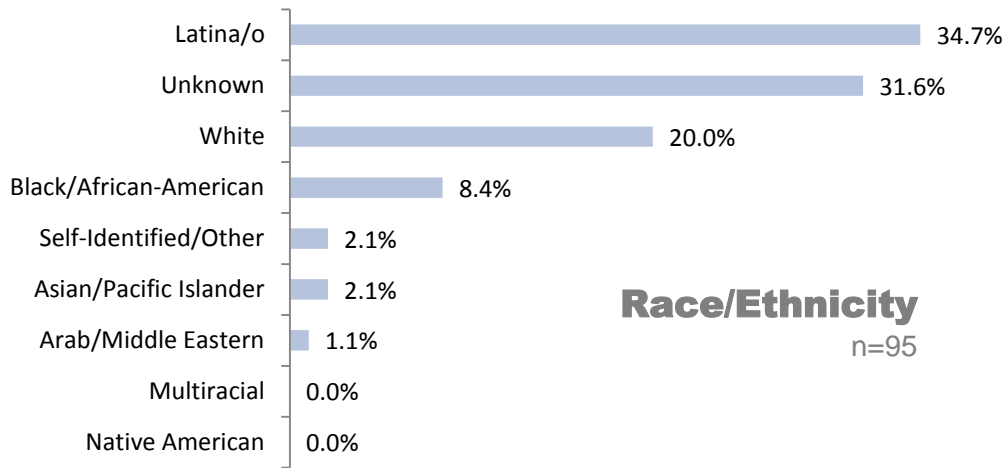
To address the needs of the most vulnerable San Francisco-based LGBTQ hate violence survivors, CUAV provides free bilingual advocacy-based counseling services and arts-based group support to help survivors build the skills necessary to support their own self-determination. We encourage all current and former participants to become members of the organization. CUAV members receive additional emotional support and opportunities to develop leadership skills around political education, facilitation, outreach, and community organizing. As part of a larger local coalition, CUAV members take action on local policy initiatives and cultural campaigns to impact the root causes of violence in their lives – policing, immigration, housing, employment, and health care.

In 2012, CUAV documented 95 reports of anti-LGBTQ violence through our Safety Line call box and through media reports, a 33% decrease from 2011. While this decrease may indicate an overall decrease in the number of incidents in San Francisco, this decrease may also be attributed to a continued organizational shift in focusing attention on deepening relationships with individual survivors. Of the 95 incidents of reported violence, people who identify as men and/or transgender made up a significant portion of survivors (54% and 29%, respectively). Reports from transgender survivors increased 42% from 2011 (19 in 2011 and 27 in 2012), indicating stronger outreach and relationship building within transgender communities in San Francisco.

Of the survivors who reported information about their race/ethnicity, Latinx⁷⁷ survivors comprised nearly 35% of reports, with Black survivors accounting for 8% of reports, Asian/Pacific Islander survivors accounting for 2% of reports, and Arab/Middle Eastern survivors accounting for 1% of reports. High frequency of reporting from Latinx survivors may be related to CUAV's location in a historically Latinx neighborhood and may point to the need for increased presence in more historically Black neighborhoods in San Francisco. However, the lack of

⁷⁷ Latinx is a gender neutral term used to identify people who are Latino and Latina.

reports from Black survivors may also be a result of gentrification pushing Black families and individuals out of San Francisco and into other surrounding Bay Area counties, resulting in fewer Black LGBTQ community members seeking services in San Francisco.

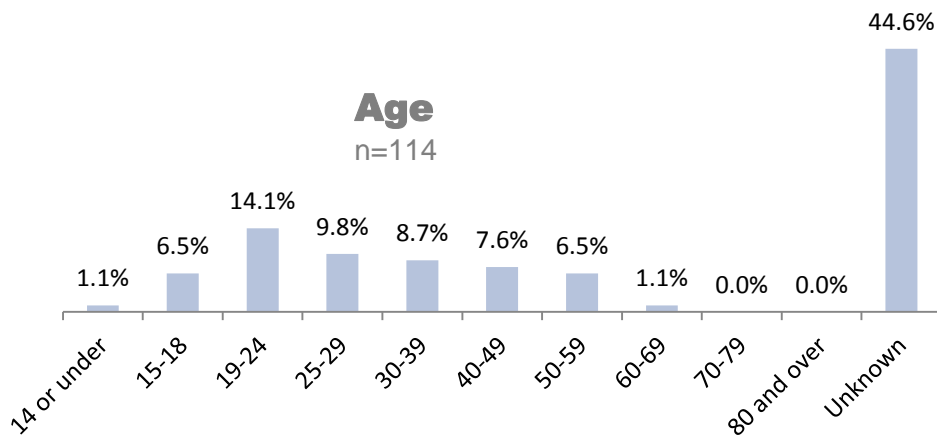


Physical violence and harassment, including verbal harassment, accounted for the highest percentages of types of violence reported in 2012 (17% and 32% respectively). This is likely due to broad acceptance of physical violence and harassment as legitimate forms of reportable anti-LGBTQ violence. Whereas media images and the criminal legal system popularize stories about responses to hate crimes and assaults within the LGBTQ community, fewer examples exist that demonstrate LGBTQ people successfully standing up against issues such as employment discrimination or police harassment. The areas in and around private residences continue to be a popular site for anti-LGBTQ violence (34% of known reported sites), with reports of harassment from landlords, tenants, and neighbors far too common (54% of reported known relationships between the survivor and aggressor in 2012). This statistic may be related to current and historical attacks on tenants' rights in San Francisco. Anecdotal reports of trends captured by CUAUV and local affordable housing organizations in San Francisco indicate that harassment based on a person's sexual orientation, gender identity, disability, and/or immigration status in San Francisco may be a common tactic landlords employ to get around unlawfully evicting residents living in rent controlled properties.

EQUALITY MICHIGAN

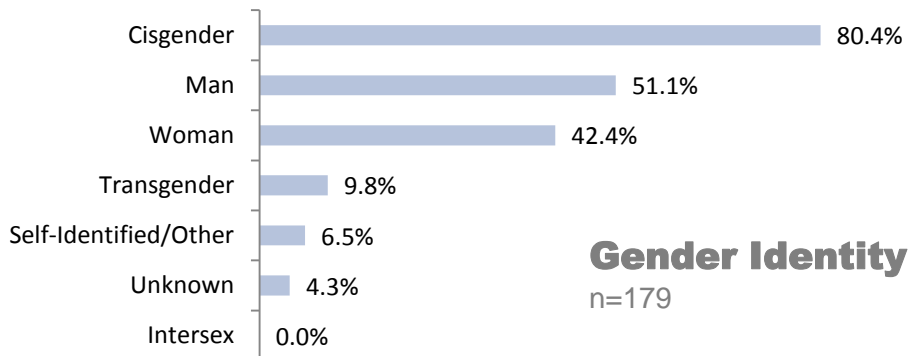
Detroit, Michigan

For more than 20 years, Equality Michigan has worked toward the realization of full equality and respect for all people regardless of sexual orientation, gender identity, or gender expression. Our Department of Victim Services is committed to ending all violence and discrimination affecting the gay, lesbian, bisexual, transgender, and HIV-positive communities. Based in Detroit, Equality Michigan is the only statewide organization dedicated to providing personal support and advocacy to those who have endured anti-LGBTQ and anti-HIV positive violence and discrimination. Equality Michigan was a founding member of the NCAVP, and in 2012, our Department of Victim Services was instrumental in securing the first ever prosecution in Michigan, and only the second nationally, for a hate crime committed against an individual based on their sexual orientation under the Shepard/Byrd Hate Crimes Prevention Act. Our Department of Victim Services responds to reports of harassment, violence, and discrimination and offers post-crisis support, criminal justice advocacy, and facilitated referrals to LGBTQ-affirming resources among other services. We work with community partners to ensure the diverse facets of Michigan’s communities are reached and supported by our work. LGBTQ and HIV+ Michiganders affected by violence and discrimination may reach us through a toll-free helpline, e-mail, our website, and via Facebook.



The number of reporting survivors to Equality Michigan decreased 18.6% from 2011 (140 to 114). The types of victimization reported also decreased from 2011 by 44.2% (425 to 237). These decreases may be an indication of less hate violence directed at our LGBTQ and HIV+ communities, but is more likely due to a decrease in staff in the final quarter of 2012, thus a decrease in outreach and intake capabilities. Still, our increased outreach efforts, throughout 2011, to communities facing particular distress, including LGBTQ youth of color, proved successful as we saw a distinct increase in reporting among younger populations (ages 19-29 went from 0 to 22). However, reporting among older populations decreased (ages 30-39 decreased from 18 to 8; ages 40-49 decreased from 23 to 7). Native American survivors tripled (1 to 3) and Latin@ survivors doubled from 2011 (2 to 4), while Black survivors remained about the same (26 to 22) and white survivors decreased 56.8% (74 to 32). We expect an increase in both the number of reporting survivors and reported incidents to rise in 2013 due to both internal and

external factors. Internally, we have filled the staff vacancy that will allow for increased outreach capabilities and we have implemented improved reporting procedures. Externally, increased hostility toward the LGBTQ communities at the state legislative level has meant an increase in legislation aimed at legalizing discrimination against the LGBTQ communities.



The majority of survivors identified as gay representing 44.6% of survivors (41; down from 43 in 2011), men represented 51.1% of survivors (47; down from 64 in 2011), and cisgender 80.4% of survivors (74; down from 132 in 2011). Women represented 42.4% of survivors, a decrease from 2011 (68 to 39), and the number of anti-lesbian bias attacks increased by 11.7%. The number of transgender-identified survivors also decreased by 62.5% (24 to 9), however 2 of the 3 homicides discovered in 2012 were transgender women of color. Additionally, anti-transgender bias crimes increased 32.1% (28 to 37). Thus the trend, noted in 2011, of increased violence and brutality directed at women, specifically transgender women of color, continued in 2012. Finally, we note the increase in police officer representing 6.5% (1 to 4) of known offenders and other first responder representing 14.5% (0 to 9) of known offenders. (0 to 9) As with previous years, the larger part of reported incidents continued to be harassment and discrimination with workplace incidents up 16.7% (24 to 28) and an employer/co-worker increased (0 to 26) representing 41.9% of known offenders. These statistics, in conjunction with the increased hostility directed at the LGBTQ communities by government representatives, and the drastic increase in reports of violence perpetrated by first responders indicates deeply rooted institutional homophobia at all levels within the state of Michigan. Equality Michigan is committed to breaking down these institutional barriers through continued education of our lawmakers, first responders, and the general population. Additionally, we will continue to work with and build new relationships with community partners across Michigan to address the discrimination and violence directed at our LGBTQ and HIV-positive communities.

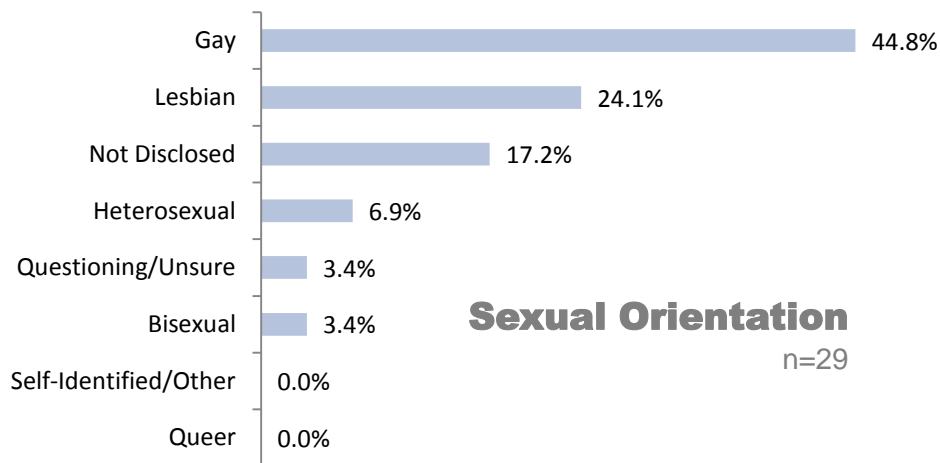
THE VIOLENCE RECOVERY PROGRAM (VRP) AT FENWAY COMMUNITY HEALTH Boston, MA

The Violence Recovery Program (VRP) at Fenway Health was founded in 1986 and provides counseling, support groups, advocacy, and referral services to lesbian, gay, bisexual, and transgender (LGBT) victims of bias crime, domestic violence, sexual assault, and police misconduct. The VRP mission is to provide services to LGBT victims who have experienced interpersonal violence as well as information and support to friends, family, and partners of survivors, raise awareness of how LGBT hate crime and domestic violence affects our communities through compiling statistics about these crimes, and ensure that LGBTQ victims of violence are treated with sensitivity and respect by providing trainings and consultations with service providers and community agencies across the state.

The VRP is a program within the larger, multi-disciplinary community health center at Fenway where LGBT people and neighborhood residents receive comprehensive behavioral health and medical care, regardless of ability to pay. The VRP currently serves 300 LGBT clients per year who are victims of recent violence in the forms of domestic violence, sexual assault, hate crimes and police misconduct. Direct services include individual counseling, groups, advocacy and case management. Counselors and advocates provide trauma-informed treatment to help clients to stabilize acute symptoms of posttraumatic stress and to empower clients through education about the impact of violence and the healing process. Violence Recovery Program staff assist survivors to access services and resources, including shelter and housing, public assistance and social services and provide survivors with education and assistance in accessing the criminal justice system. The staff of the VRP assists survivors to file reports and restraining orders; connects survivors to LGBT-sensitive medical and legal services; and advocates on behalf of survivors with police departments, District Attorneys' offices and the Attorney General's Civil Rights and Victim Compensation divisions. Clients of the VRP also participate in psychoeducational, support and activity-based groups. Groups offered to VRP clients in 2012 included a trauma education group, trauma-informed yoga class, a nutritional workshop for trauma survivors and group counseling and support for male survivors of sexual violence. In addition to delivering services directly to LGBT survivors, VRP staff provides training and education to healthcare providers, legal and law enforcement personnel and community groups.

In 2012, Violence Recovery Program documented 29 new cases of anti-LGBT bias/hate violence, which is an 11% increase in reports from 2011. Massachusetts incidents included were reported to the VRP by individuals seeking services, by individuals aware of VRP documentation efforts, and by police departments and other victim-service agencies with whom the VRP collaborates. The increase is a continuation from increased reports in the previous year and is likely a result of continued collaboration with the police, communities of color and other community-based anti-violence groups over the past two years.

The increase in documented anti-LGBT hate crimes may also be related to this year’s increase in collaboration with and referrals from legal and social service providers who serve immigrant and refugee communities in the Boston area. These providers have contacted the VRP about work with asylum-seeking clients who have fled their countries of origin due to anti-LGBT violence and persecution. Asylum-seekers being served at the VRP often present following victimization across areas of the program’s specialization, as many have not only experienced discrimination and harassment based on anti-LGBT bias, but they have also often experienced physical and/or sexual violence, as well as domestic violence at the hands of their partners, spouses or family members. The staff of the VRP serve asylum-seekers by providing counseling to stabilize acute trauma-reactive symptoms, while assisting clients to navigate complex legal, social service and healthcare systems in a new country and culture when they have minimal to no personal supports or financial resources.



Of the hate crimes documented by the VRP in 2012, the sexual orientation of hate crime survivors remained relatively consistent from the prior year, with 13 survivors (44.8%) identifying as gay, seven as lesbian (24.1%) and one as bisexual (3.5%). During the past year, the VRP began tracking the specific types of bias associated with reported hate crimes, a factor that was previously unknown. Out of the hate crimes documented, over 61% were clearly identified as involving anti-LGBT bias with 19.1 % identified as specifically anti-transgender (there may be overlap in these categories). Also of note was the increase in proportion of reporting survivors in the 40-49 (24.1%) and 50-59 (17.2%) year-old age ranges, with 12 hate crime survivors in this age range in 2012, an increase of almost 10% since the previous reporting period. In the coming year, the VRP will pay particular attention to changes or patterns related to types of bias and ages of reporting survivors in order to be able to report in the future about trends and contributing factors.

KANSAS CITY ANTI-VIOLENCE PROJECT (KCAVP)

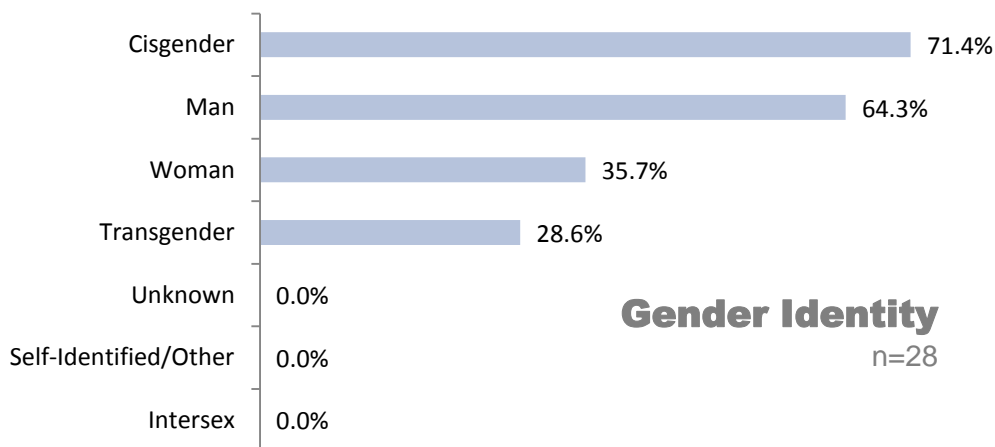
Kansas City, MO

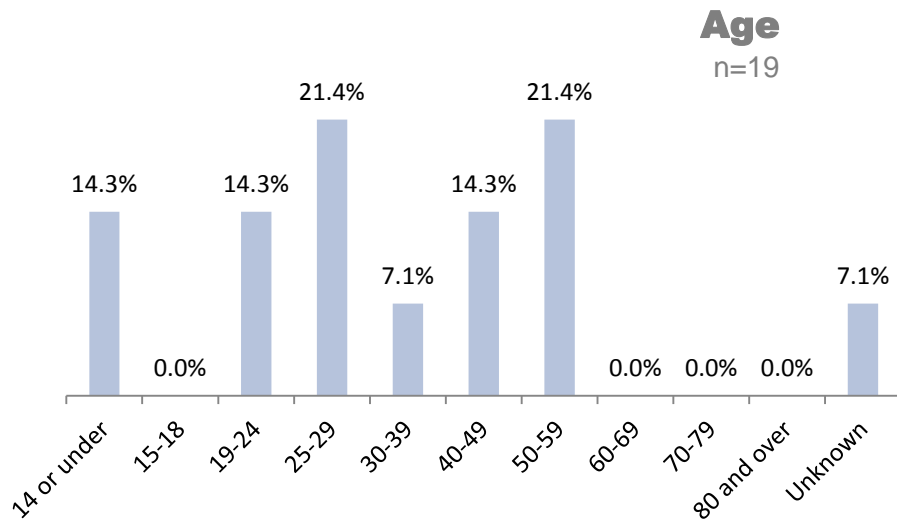
The Kansas City Anti-Violence Project provides information, support, referrals, advocacy and other services to lesbian, gay, bisexual, and transgender (LGBT) victims of violence including domestic violence, sexual assault, and hate crimes, focusing these services within the Kansas City Metropolitan area. KCAVP also educates the community at large through training and outreach programs.

In 2012, there was a 44% decrease in the number of survivors contacting KCAVP to report hate violence incidents compared to 2011 (25 to 14). This may be due to a drop in overall incidents, but is likely related to a decrease in funding for KCAVP outreach services in Missouri.

Though there was a drop in overall incidents in 2012, there was a 60% increase (5 to 8) in the number of survivors that sought medical attention. Based on these statistics, although the number of hate violence incidents decreased, the severity of violence increased from 2011 to 2012. This can possibly be attributed to either an increase in physical violence associated with hate violence incidents or the improved collaboration between local hospital social workers and KCAVP staff in 2012.

There was a 25% increase (4 to 5) of cisgender female survivors of hate violence, this may be due to the increased physical violence that occurred which may have prompted survivors to reach out to KCAVP for advocacy and support services. Overall, the majority of hate violence survivors were men (64%). This percentage remains consistent with the demographic statistics of survivors from 2011.





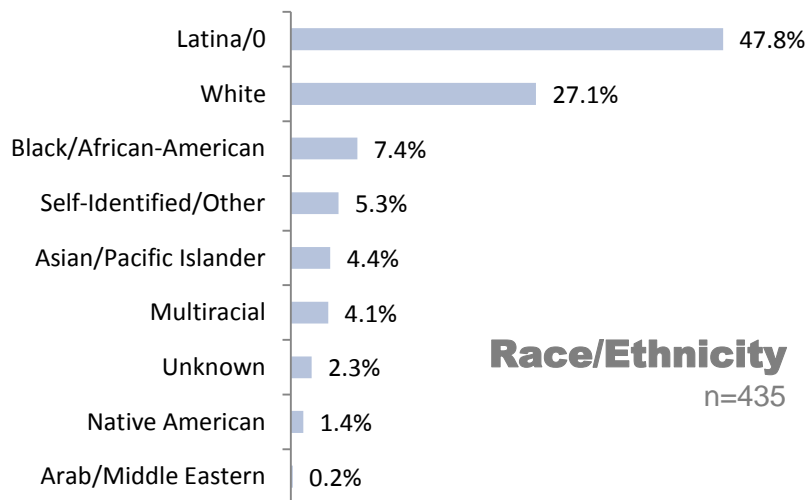
In 2012, there was a 71% decrease in the number of hate violence survivors ages 40-49 (14%) and an increase in hate violence survivors ages 25-29 (21%). Ages 25-29 and 50-59 each represent 21% of total survivors and victims'. Ages 14 or under, 19-24, and 40-49 each represent 14% of total survivors and victims'.

LOS ANGELES GAY & LESBIAN CENTER’S LEGAL SERVICES DEPARTMENT, THE ANTI-VIOLENCE PROJECT

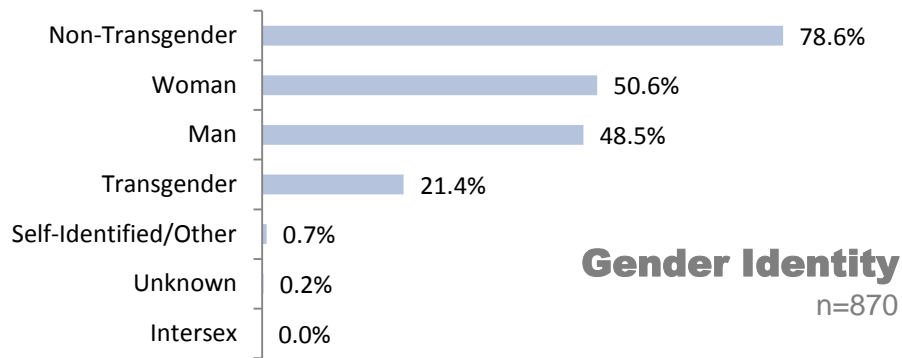
Los Angeles, CA

Established in 1988 by L.A. Gay & Lesbian Center’s Legal Services Department, the Anti-Violence Project (AVP) has become the largest and most comprehensive victim services program in Southern California specifically assisting victims of anti-LGBTQ hate violence. Through State-certified Victim Advocate staff, trained crisis counselors, and outreach volunteers, AVP provides a wide array of victim recovery and empowerment services including crisis counseling, advocacy with law enforcement, attorney consultations and referrals, and referrals to long-term counseling and other social services.

The AVP includes a specific focus on serving the transgender community, which experiences disproportionate levels of hate violence. Historically, the transgender community is the most underserved population within the LGBTQ communities. In order to raise awareness and sensitivity to transgender issues, AVP has aggressively provided transgender cultural competency trainings to law enforcement, as well as to a wide array of service providers and community organizations.



In 2012, a total of 435 survivors contacted the AVP for services, constituting a 15.5% decrease from 2011. Latin@ survivors made up 47.8% of total survivors and victims, the largest race/ethnicity to report hate violence, which is consistent with the overall demographics of Los Angeles County’s population. White survivors and victims made up 27.1% of total reports, consistent with 2011. Black and African American survivors and victims made up 7.4% of total reports, a 52.9% decrease from 2011. Self-identified /other survivors and victims’ made up 5.3% of total reports, a 5.3% increase from 2011. Asian and Pacific Islanders, Multiracial, Unknown, Native American and Arab and Middle Eastern each made up 4.4% or less of total survivors and victims. Through our services and high percentage of transgender women of color clients we continued to see a disproportionate impact of violence similar to previous years.



Within gender identity, cisgender survivors and victims made up 78.6% of total reports. Women made up 50.6% of survivors and victims', and men made up 48.5% of survivors and victims. Approximately 21.4% victims and survivors identified as transgender. Self-identified/other, Unknown and Intersex combined made up less than 1% of total reports. The increase of women identified survivors and victims and a high percentage of transgender clients is likely connected to AVP providing services to a large population of transgender women.

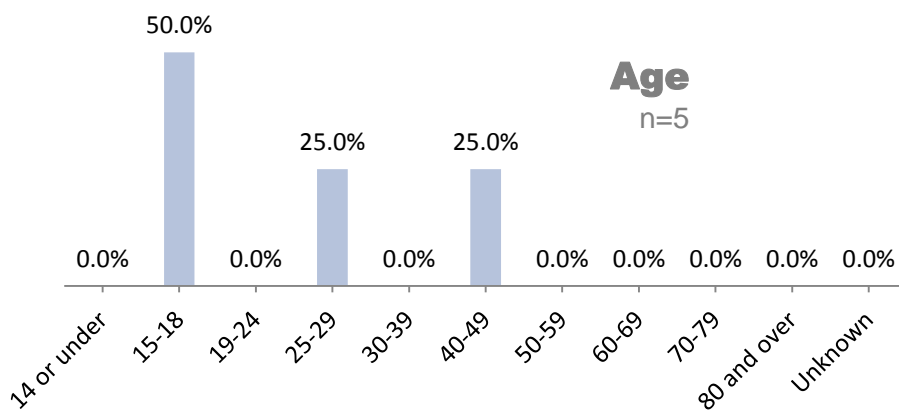
MONTROSE COUNSELING CENTER

Houston, Texas

The Montrose Center empowers our community, primarily gay, lesbian, bisexual, and transgender individuals and their families to enjoy healthier and more fulfilling lives by providing culturally affirming and affordable behavioral health and preventative services.

The Montrose Center works with clients who have dealt with hate/bias crimes by providing counseling, case-management, advocacy, and hospital/police/court accompaniment. We have also partnered with Houston’s FBI Hate Crimes Unit to create a meeting for advocates and law enforcement to discuss Hate Crime trends in Houston as well as how to meet community needs. We have also started going into two of Houston’s high schools to work on bullying and other bias crimes. While the focus was to deal with GLBTQ issues, we have found that we are also dealing with racial issues, gender identity issues, gender issues, and other issues based on bias.

The Montrose Center serves a target population of LGBTQ clients. In 2012 we saw four new clients under hate/bias crimes. Of those clients 50% were African American and 25% were white and 25% were Latin@. Of those 100% identified as Gay males. 100% identified the hate/bias incidents as being related to anti-LGBTQ issues.



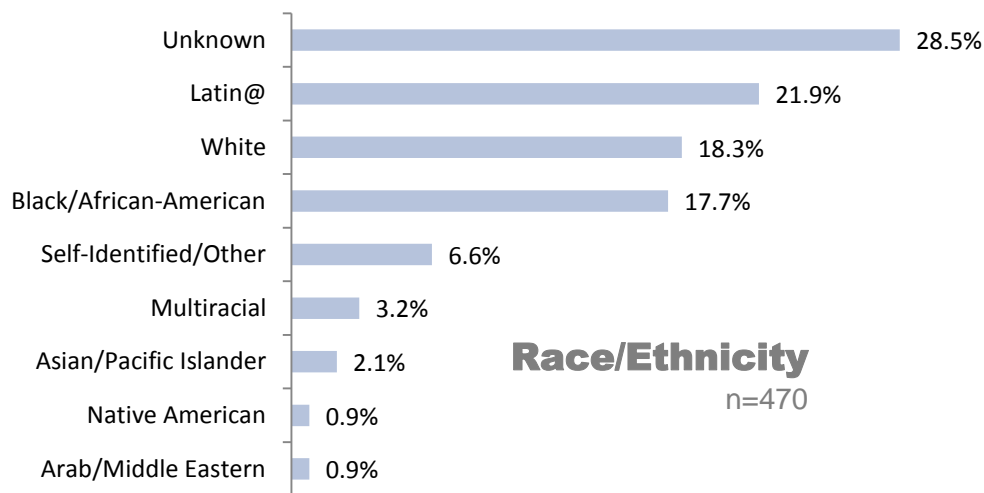
Two clients fell into the 15 to 18 age group, one into the 25 to 29 age group and one into the 40 to 49 age group. While The Montrose Center offers services under its hate crimes grant to survivors of any hate/bias crime we feel the clients come in due to issues of sexual preference and gender identity. This may be caused by The Montrose Center being know as a primarily LGBT agency. We are now working to expand these services and continue working with the Houston Police Department, the FBI, and are reaching out to other minority groups to offer services. We have also starting groups within the Houston Independent School District to work with high school students who are being victimized under hate/bias crimes. In 2013 Montrose has already documented hate/bias crimes for race, gender, gender identity, sexual orientation, and weight issues. We are presently in two schools and are being asked to start groups in other schools as well and are in the planning stages of that.

NEW YORK CITY ANTI-VIOLENCE PROJECT

New York, New York

The New York City Anti-Violence Project (NYC AVP) envisions a world in which all lesbian, gay, bisexual, transgender, queer (LGBTQ), and HIV-affected people are safe, respected, and live free from violence. AVP’s mission is to empower LGBTQ and HIV-affected communities and allies to end all forms of violence through organizing and education, and support survivors through counseling and advocacy. NYC AVP provides free and confidential assistance to thousands of survivors of violence each year in all five boroughs of New York City, as the largest LGBTQ and HIV-affected anti-violence program in the country. NYC AVP is a social change, non-profit organization that provides both immediate interventions when violence occurs, and helps survivors of violence become advocates of safety.

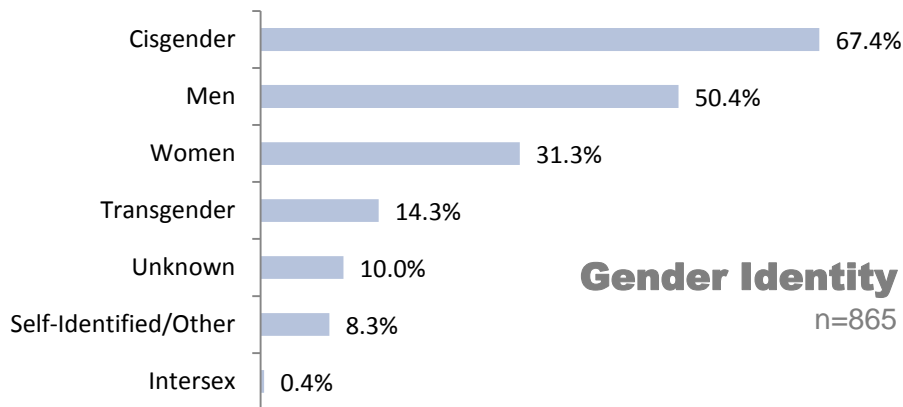
In 2012, the NYC AVP supported a total of 470 new LGBTQ and HIV-affected hate violence survivors, which represents about a 4% increase from the number of new hate violence survivors served in 2011 (451). NYC AVP’s data supports the overall national trends presented in this report, including increased reports of violence from transgender and gender non-conforming (TGNC) communities and communities of color and increased reports of violence from the police.



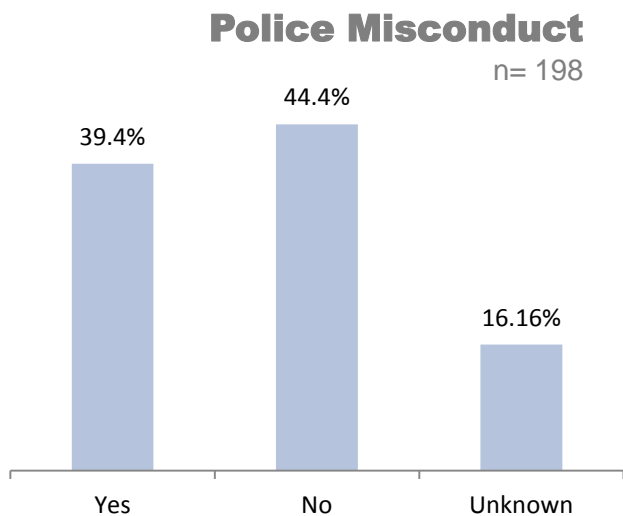
28.5% of survivors did not report their race; 53% identified as people of color. Consistent with 2011, the majority of hate violence survivors (21.9%) identified as Latin@ in 2012 (103), possibly connected to the extensive NYC AVP programming available in Spanish through the 24-7 Spanish and English Hotline.

67.4% of survivors and victims were non-transgender (cisgender), a decrease from 2011 (75%). 50.4% of survivors and victims were men, a decrease from 2011 (55%). 31.3% of survivors and victims were women, an increase from 2011 (20%). 14.3% of survivors and victims were transgender, a decrease from 2011 (18%). 10% of survivors and victims gender identity was unknown, an increase from 2011 (6%). 8.3% of survivors and victims were self-identified/other, an increase from 2011 (1%). 0.4% of survivors and victims were intersex, a very slight

increase from 2011 (0 in 2011 to 2 in 2012). The increase in women and self-identified/other is likely a result of NYC AVP’s growing community-based work throughout the five boroughs of New York City (NYC), including programming that focuses on engaging transgender and gender non-conforming (TGNC) people of color, who are disproportionately impacted by violence, but also less likely to have access to culturally competent services. NYC AVP currently provides on-site intake and direct services at nine sites across all five boroughs of NYC, and conducts outreach and organizing in marginalized LGBTQH communities in every borough, every month.



In addition to serving survivors and victims who increasingly identify outside the gender binary and are self-identified around race/ethnicity, in 2012, NYC AVP saw a corresponding increase in the number of new hate violence survivors who reported their sexual orientation as heterosexual (64), as compared to 2011 (53), representing about a 13% increase. NYC AVP believes this increase can also be attributed to the more focused work with TGNC people who identify as heterosexual. Some of this increase may also be due to an increase in reports from heterosexual non-transgender (cisgender) people who experienced hate violence based on an offender’s misperception that they were LGBTQ or HIV-affected. Additionally, consistent with 2011, about 50% of new hate violence survivors in 2012 identified as cisgender men and about 45% of hate violence survivors identified as gay.



Nearly 40% of survivors reported police misconduct. The number of people reporting police misconduct generally jumped from 8 in 2011 to 78 in 2012. Reports of hostile police attitudes doubled in 2012, with 43 reports, up from 21 in 2011. These increases reflect NYC AVP’s enhanced work with marginalized LGBTQ and HIV-affected people, particularly from TGNC people and people of color, who tell us stories every day about being profiled by police and subjected to harassment, misarrest, and even violence, based on their perceived gender identity, sexual orientation, and immigration status.

Many of the survivors affected by profiling and police violence were also immigrants without current status. Reports of hate violence motivated by anti-immigrant bias increased substantially from 24 incidents reported in 2011 to 90 incidents reported in 2012.

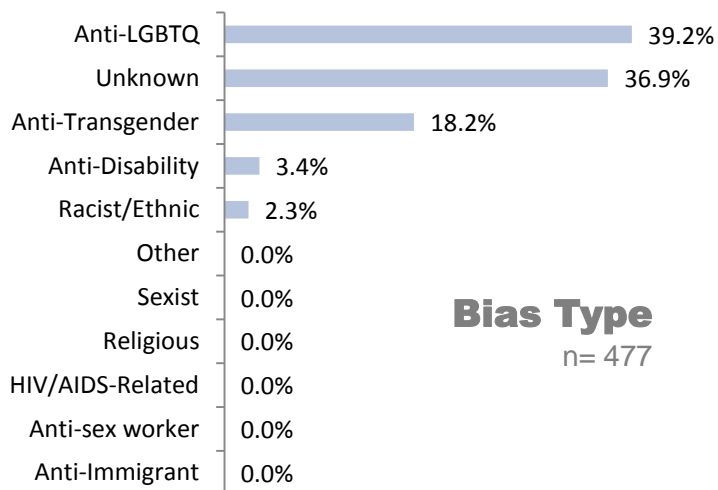
In response to this emerging serious issue of abuse of power by police, NYC AVP has further developed its focus on police violence in 2012, taking a lead role in Communities United for Police Reform (CPR), which addresses the “stop and frisk” policies of the New York Police Department (NYPD), which disproportionately impacts marginalized communities, including those who identify as LGBTQ. NYC AVP has worked with CPR in advocacy efforts to support the passage of the Community Safety Act (CSA), which addresses the NYPD’s “stop and frisk” practices and would increase the level of police accountability. In addition to CPR, NYC AVP is a part of the No Condoms as Evidence Coalition, which addresses the New York State law that allows for condoms to be used as evidence in prostitution-related arrests, which increase profiling of LGBTQ communities.

Both the stop and frisk policies of the NYPD and the use of condoms as evidence in prostitution arrests has significantly impacted immigrant transgender women in New York City, particularly in the outer boroughs of Queens and the Bronx. As anti-immigrant bias sweeps the country, resulting in draconian laws legalizing profiling of immigrants, this rise is hardly surprising, but it remains concerning, particularly for LGBTQ and HIV-affected immigrants, for whom deportation to their countries of origin can mean subjecting them to sometimes deadly hate violence. NYC AVP has established itself as a crucial organization in New York City for direct services support, community organizing, and public advocacy for LGBTQ and HIV-affected survivors of police violence, including for the most vulnerable in our communities: TGNC survivors, people of color, and immigrants.

OUTFRONT MINNESOTA

Minneapolis, Minnesota

OutFront Minnesota is the state’s leading advocacy organization working with lesbian, gay, bisexual, transgender, queer and allied people. Our mission is to make Minnesota place where LGBTQA individuals have the freedom, power and confidence to make the best choices for their own lives. Our Anti-Violence Program is committed to honoring the unique needs of LGBTQ crime victims and their friends/families throughout Minnesota. We work to build the safety and power of survivors and community members and to create opportunities for support and healing through the provision of crisis intervention, advocacy, counseling, community education and outreach. To attain equity for LGBTQ survivors, we approach this through an intersectional lens that locates and honors our many layered identities at the heart of our work.



Overall, the numbers of survivors accessing services through our Anti-Violence Program increased by 45% (328 to 477) in 2012. We believe that much of this increase in survivor numbers directly relates to the constitutional amendment battle to define marriage as between one man and one woman facing Minnesotans throughout 2012. For example, while gay and lesbian survivors continued to represent the largest number of survivors (approximately 60%), our estimates reflect a sharp increase in reports from heterosexual identified clients who identify as allies (14 to 95).

While working with the Minnesota United for All Families (MNU) campaign to defeat the amendment, our anti-violence program received reports from every sector of the state. The majority of these reports came to the program during the four months immediately prior to the November elections and reflected an statewide increase in property damage, theft and vandalism, particularly of lawn signs and rainbow flags or other LGBT-related displays. Other reports of violence tied to the campaign included physical assaults of parade goers displaying MNU t-shirts, property damage to campaign offices, property damage to vehicles bearing the MNU bumper sticker, and other threats of violence directed toward volunteers and community members supporting the efforts to defeat the amendment. As an organization, OutFront Minnesota received several threatening or harassing telephone calls and

letters. We believe that these are excellent examples of what often occurs when the harsh spotlight of widespread political division is focused so heavily on LGBTQ people.

While the majority of our reports continue to come from non-transgender identified survivors, 14% of our clients who specified a gender identity (43 of 315) self-described themselves as being part of the transgender spectrum. We believe that this increased program access by trans-identified community members is due in part to in-depth and extended outreach work that we have been doing within these communities as well as the presence of several high-profile transphobic incidents that occurred during 2012. For example, one incident that received international attention was the conviction of CeCe McDonald, a young transgender woman of color who was attacked during a bias incident that resulted in one of her attackers being killed. Additionally, anti-transgender bias was indicated in at least 87 cases (18.2%) in 2012.

While much work has been completed with criminal justice systems and law enforcement professionals, we recognize that we definitely have opportunities for growth in this area in Minnesota. While 62% of survivors reported either courteous or indifferent treatment when reporting their victimization, 4% of clients reported a hostile response with 6 of the 8 reported incidents including verbally abusive language, slurs or bias language used by law enforcement. We recognize that this area is one of tremendous growth potential for our anti-violence work to create safer systems access for LGBTQ survivors. We also remain concerned at the underlying general lack of broad-based knowledge about accurately identifying and investigating hate and bias related activity in some departments.

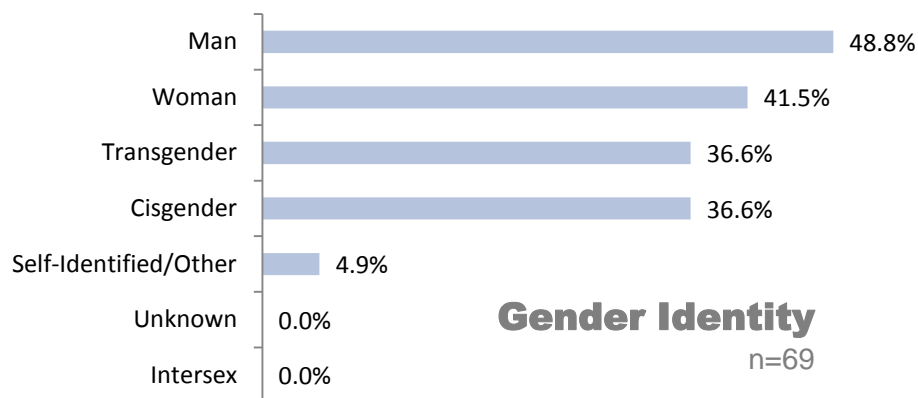
Finally, one alarming trend throughout Minnesota has been the continued increase in youth suicides related to bullying and bias in schools. As an organization, we have been and continue to be deeply committed to creating safer school environments for all students as well as to help school personnel and educators increase their skills in recognizing and responding to these issues. However, we continue to receive reports from students and parents that schools have much work to do in this area. Examples of our work include participation in the Minnesota School Outreach Coalition and the development of the Safe Schools for All Coalition in collaboration with state and national organizations to pass a comprehensive statewide anti-bullying policy.

SAFESPACE PROGRAM @ RU12? COMMUNITY CENTER

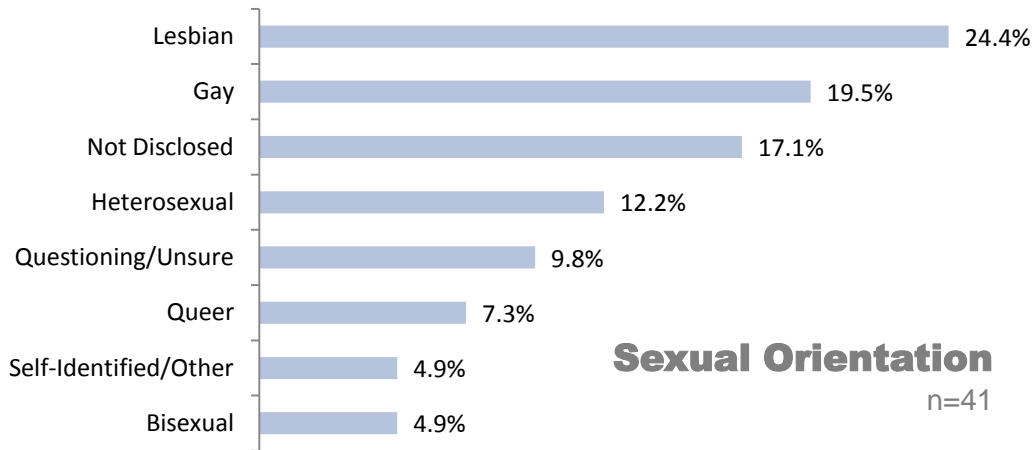
Winooski, Vermont

SafeSpace is a social change and social service program working to end physical, sexual, and emotional violence in the lives of lesbian, gay, bisexual, transgender, queer, and HIV affected (LGBTQH) people. SafeSpace, a program of the RU12? Community Center, is a statewide program and the only program in Vermont that provides anti-violence services specifically for the LGBTQH community. We provide information, support, referrals, and advocacy to LGBTQH survivors of violence and offer education and outreach programs in the wider community. SafeSpace provides direct services including and not limited to; a support line for crisis intervention, information and referrals, support groups for survivors of violence, one on one support, and victim advocacy in court, medical settings, law enforcement and other agencies to assist survivors in obtaining the services they need.

The number of bias/hate violence incidents reported to SafeSpace in 2012 increased by 78%, totaling 41 in 2012 compared to 23 in 2011. This is most likely due to a number of factors, SafeSpace has taken a more strategic approach to the work, shifting a philosophy from reliance on referrals to one that is much more linked into the community. SafeSpace has increased collaborative processes with various larger mainstream agencies such as the Department of Corrections, police departments and social service agencies. Additionally, SafeSpace developed and introduced a training contract system in 2012 to provide staff and administrators at agencies throughout the state of Vermont with cultural competency training working with the LGBTQH population. Increased outreach efforts also may play a role in more people reporting violence which include the introduction of a new on line reporting option in February 2012 allowing individuals to report violence anonymously and interns dedicated to strategic statewide community based outreach.



Transgender survivors reporting bias motivated violence from 4 in 2011 to 15 in 2012 with 41% reporting anti-transgender bias. RU12? has seen an increase in the number of transgender related contacts for referrals and information from 40 to 90 a month. Most likely these increased numbers are the result of new transgender specific programming which began in 2012 with a Transgender Town Hall series. This series has a component of bringing awareness, speakers, education and anti violence work to the broader community.



Lesbian's represented 24% of total survivors and victims, an increase from 2011 (3 in 2011, 10 in 2012). In response to community feedback RU12? created social events specific to the lesbian community increasing visibility of the SafeSpace program to that particular segment of the population. Programming at RU12? evolved in 2012 to become more integrated, which may also be a factor for the increased number of total survivors reporting hate violence incidents to SafeSpace. In 2012 RU12? was awarded a grant from the Unitarian Universalist Association (UUA), to do a community mobilization project. Increased funding has also allowed SafeSpace to expand outreach statewide and increase collaborative efforts. The 2012 SafeSpace hate violence report shows an increase in the number of incidents however we do not believe there has been an increase of bias motivated violence against LGBTQ Vermonters or the transgender community, we believe the numbers reflect ongoing implementation of a statewide strategic plan.

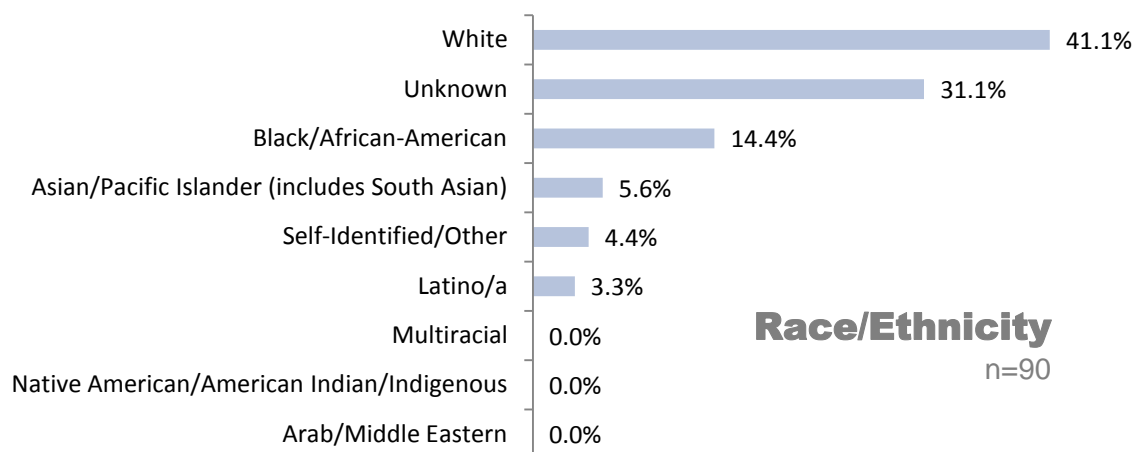
SEAN’S LAST WISH

Greenville, South

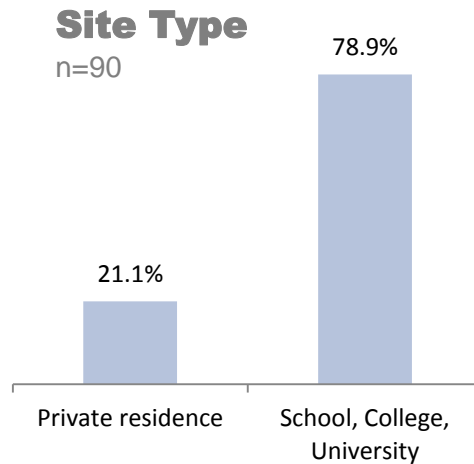
Founded by Elke Kennedy in 2007 after the anti-gay murder of her son Sean Kennedy, Sean’s Last Wish aims to change hearts and minds through educating people about how bullying, hatred, violence, prejudice, and religious beliefs leads to senseless crimes. Sean’s Last Wish was established to support and educate the public. The mission of Sean’s Last Wish is to empower the community through educational diversity programs, nonviolent conflict resolution, and community involvement.

In 2012 Sean’s Last Wish administered a survey at community events, colleges, and universities in Georgia, North Carolina, and South Carolina. The survey asked LGBTQ youth (primarily ages 13-29) community members about their experiences with bullying, hate violence, domestic violence, violence at school, and suicidal ideation. Some respondents also filled out the survey online.

A total of 90 people reported cases of hate violence in Georgia, North Carolina, and South Carolina in 2012. The largest age range of respondents was 19-24, with 47% of respondents who were 19-24 at the time of the survey. 16% of respondents were 15-18 at the time of the survey, and 16% of respondents were 30-39. 11% were 40-49, 4% of respondents were 50-59, and 1% were 60-69. Regarding gender identity, 56% of respondents identified as men, 28% identified as women, and 16% of respondents did not disclose their gender identity. Regarding sexual orientation, 32% of respondents identified as gay, 31% identified as heterosexual, 19% identified as lesbian, 7% identified as bisexual, 2% identified as queer, 1% identified as questioning, and 1% were self-identified. The highest racial category of survey respondents were white, at 41.11%, followed by unknown or undisclosed at 31.11%, Black and African Descent at 14.44%, Asian/Pacific Islander at 5.56%, and Latin@ at 3.33%.



The majority of hate violence cases reported to Sean’s Last Wish were physical violence consisting of 26.87% of reports, followed by verbal harassment in person at 21.89% of reports, threats at 15.42% of reports, cyber and phone harassment at 13.93% of reports, isolation at 11.94% of reports, sexual violence at 6.97% of reports, and robbery at 1.49%. A majority of violence occurred at school, with 78.89% of reports of violence at school, and the rest of the incidents occurred in a private residence (21.11%).



In speaking to community members, Sean’s Last Wish found that a recurring theme expressed was pervasive anti-LGBTQ bullying and violence based on intolerant religious beliefs common in the South. Many of the youth surveyed also expressed that there were few resources or places to go for LGBTQ young people experiencing bullying or violence.

Given these high reports of anti-LGBTQ bullying and violence against LGBTQ youth in Georgia, North Carolina, and South Carolina, Sean’s Last Wish continues to educate community members about the root causes and impacts of anti-LGBTQ violence, share the story of losing Sean Kennedy to anti-gay hate violence, and advocate for systemic policy change to address anti-LGBTQ violence and bullying.

**HATE VIOLENCE HOMICIDE MAP &
STORIES OF LOSS
2012**

**This report was written by the
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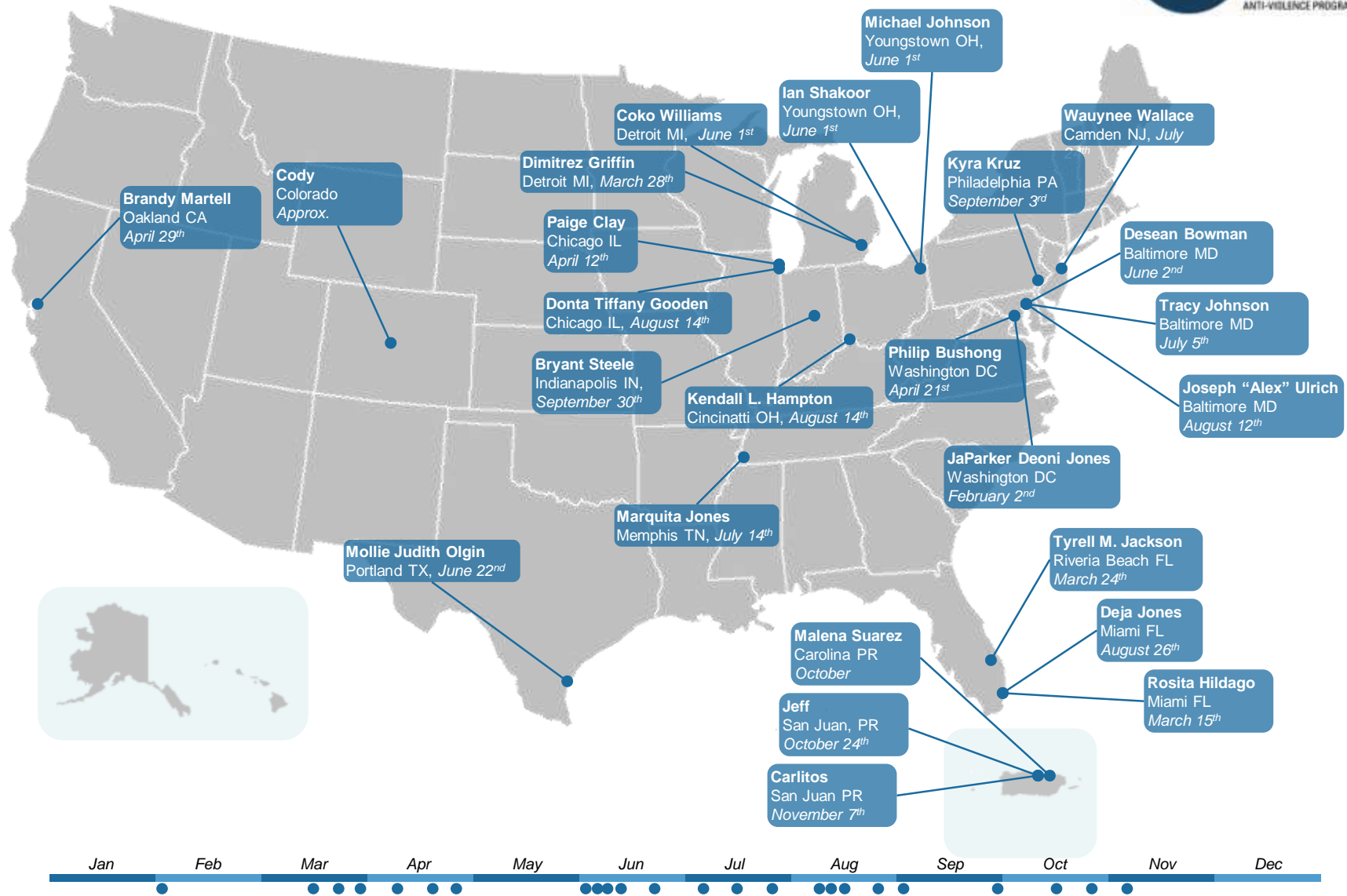
INTRODUCTION

The National Coalition of Anti-Violence Programs (NCAVP) presents this collection of stories of lesbian, gay, bisexual, transgender, queer (LGBTQ), and HIV-affected homicide victims in 2012 as a supplement to the annual hate violence report. The purpose of this document is to provide a snapshot of the individual victims' experiences, and to commemorate the lives of the victims.

In 2012, the National Coalition of Anti-Violence Programs (NCAVP) saw the fourth highest ever reported number of homicides against LGBTQ and HIV-affected communities since NCAVP began documenting this violence. NCAVP documented 25 homicides in 2012, and these homicides continue multi-year trends demonstrating the disproportionate impact of severe violence against LGBTQ and HIV-affected communities of color, transgender communities, and transgender communities of color. This supplemental report brings to light the severity of hate violence against LGBTQ and HIV-affected communities, in the hopes of allowing the reader to examine themes in anti-LGBTQ and HIV-affected homicides and to see the diversity of 2012's homicide victims. The report highlights the narratives of 25 known LGBTQ and HIV-affected hate motivated homicides in 2012. **The majority of these narratives are not anonymous, because this information is public and critical to understanding which identities are most vulnerable to anti-LGBTQ and HIV-affected homicide.** Some of these incidents have not been classified as hate crimes. However, NCAVP member programs have carefully selected these homicides because they include evidence of actual or suggested hate violence motivates. NCAVP wrote these narratives using information from media outlets, victim's family and friends, and local NCAVP members. NCAVP is not responsible for the complete accuracy of these narratives and the specific details pertinent to allegations, police investigations, and criminal trials.

These stories illustrate the need for the existence and the expansion of LGBTQ and HIV-affected anti-violence programs. If you are interested in starting an anti-violence program, becoming a member of the National Coalition of Anti-Violence Programs, or if you would like more information, contact NCAVP at info@ncavp.org or 212.714.1184.

HATE VIOLENCE HOMICIDES IN 2012



2012 HATE VIOLENCE HOMICIDE NARRATIVES

ALPHABETICAL BY STATE

BRANDY MARTELL, 37, Black, transgender woman, sexual orientation unknown

Oakland, CA, April 29, 2012

According to news sources one or two unidentified men approached Brandy Martell (37) in a parked car with several other friends who were also transgender women. A witness mentioned that after a cordial conversation through the window, the two men returned back hours later and shot Martell in her side. Media sources state that after attempting to drive off, Martell eventually succumbed to her wounds. Her shooters continued to shoot at the car until eventually fleeing. Martell's assailant reportedly shot her in the genitals before he shot her twice more in the torso. Friends and at least one woman inside of the vehicle stated publicly that they believed that Martell's homicide was hate motivated. Martell formerly worked as an outreach worker for a health center that serves the local transgender community in California. As of publication no arrests have been made.

CODY, Native American, transgender woman, age unknown, sexual orientation unknown

Colorado

A cousin of the homicide victim called CAVP to report the homicide some months earlier of her cousin "Cody", who she stated was a Native American transgender woman. According to her cousin, she had struggled economically for a long time. When her body was found, her mother did not want to be involved in the investigation, and according to the cousin, Cody's mother had rejected Cody's transgender identity. Cody was buried quietly, and the immediate family did not want to discuss details with anyone. Cody's cousin, who was close to her, believes that this incident was anti-transgender hate violence.

PHILIP BUSHONG, 23, White, cisgender man, heterosexual

Washington, D.C., April 21, 2012

Marine Lance Corporal Philip Bushong (23) was stabbed and killed by a fellow Marine, Joseph Poth (20). According to media sources, Bushong, who was not gay, was standing outside of a local bar with a gay male friend. Poth is accused of shouting anti-gay epithets at Bushong and his friend. An altercation ensued between the three men. News sources state that Poth stabbed Bushong, who was pronounced dead on the scene by paramedics. Poth was arrested and charged with second-degree murder. In May 2012 Poth claimed self-defense and plead not guilty to the charges. Poth was offered a plea bargain and did not accept it. The case went to a jury trial in January 2013. In May 2013 Poth was served with papers from the U.S. Marines formally discharging him from duty. In July 2013 Poth was indicted by the grand jury and charged with one count of second-degree murder while armed.

JAPARKER DEONI JONES, 23, Black, transgender woman, sexual orientation unknown

Washington, D.C., February 3, 2012

On February 2, 2013 JaParker Deoni Jones (23) was allegedly stabbed in the face by Gary Niles Montgomery (55) at a bus stop in the D.C. metro area. According to news reports, she died a few hours later. Montgomery was charged with first-degree murder while armed, but Jones's family is calling for law enforcement to classify the

homicide as a hate crime. Montgomery plead not guilty in his arraignment on a charge of first-degree murder in November 2012 and he was held waiting trial. In January 2013 Montgomery's attorney ordered a psychological evaluation for him, and as of May 2013 Montgomery has been determined fit for trial. No further updates exist.

ROSITA HIDALGO, 54, Latina, transgender woman, sexual orientation unknown

Miami, FL, March 15, 2012

On March 15, 2012 Rosita Hildago (54) was found by two friends, Javier Cuesta and Hector Serna, in her home, gagged and stabbed 23 times in the neck, back, chest and hand. Media sources state that friends said she had been missing for several days prior to her discovery. Hidalgo was a sex worker who entertained in her home, and lived fairly quietly after moving from Cuba to escape homophobic persecution. She had been beaten only a year before by a male client who discovered she was transgender. Serna publicly complained that he felt the police department wasn't doing all they could to find her assailant. After Serna's claim the Miami Beach Police Department issued a press release incorrectly describing Hidalgo's gender identity and the type of sex work that Hidalgo performed. This caused further concern among Hidalgo's friends. Miguel Angel Pavon (31), a prime suspect in the death of another sex worker, was eventually charged with first-degree murder in November 2012.

DEJA JONES, 33, Black, transgender woman, sexual orientation unknown

Miami, FL August 26, 2012

Deja (Dewayne) Jones (33), was shot multiple times by an unknown assailant near her apartment. Miami homicide police stated they believe Deja was killed because she was transgender. According to media sources, one resident overheard the attack heard the shooter say "give me your purse." Another resident who overheard the shooting said they heard Deja scream for help each time she was shot. A suspect has yet to be arrested in the murder of Deja Jones.

TYRELL M. JACKSON, 23, Black, transgender woman, sexual orientation unknown

Riviera Beach, FL, March 24, 2012

Luis Rijo De Los Santos allegedly shot and killed Tyrell M. Jackson (23) and shot and injured Michael B. Hunter (20) early in the morning while Jackson and Hunter were walking home. Media sources identify Tyrell as a sex worker. News sources report that the De Los Santos was an armed robber who frequently targeted transgender sex workers. De Los Santos was arrested for the homicide in April 2012 when he was pulled over for a routine traffic stop and his vehicle matched the description of the vehicle in question. According to the Palm Beach County News, De Los Santos was charged with aggravated battery with a firearm. Riviera Beach law enforcement stated that, "when someone has put it in their mind to perhaps target individuals because of the way that they live their lifestyle, not only is that interfering with their safety, that's interfering with their personal freedoms."

PAIGE CLAY, 23, Black, transgender woman, sexual orientation unknown

Chicago, IL, April 12, 2012

Paige Clay (23) was found shot in the head in an alley in the West Garfield Park neighborhood of Chicago. Clay was known as a rising star in the Chicago "ball scene" and a known sex worker. Friends stated that Clay had

multiple experiences of violence and discrimination preceding the homicide. Chicago's Taskforce for Prevention and Community Services held a community event focused on racism, homophobia, and transphobia, following the homicide. Local community organizations have called for the Chicago police department to investigate Clay's homicide as a hate crime. To date no suspects have been arrested in Clay's homicide.

DONTA TIFFANY GOODEN, 19, Black, transgender woman, sexual orientation unknown

Chicago, IL, August 14, 2012

Donta "Tiffany" Gooden (19) was found stabbed and murdered inside an abandoned building in the South Austin Chicago neighborhood. She was identified as a sex worker in many media reports, but motive for the homicide has not been determined. Gooden's body was found three blocks from where another homicide of a transgender woman named Paige Clay was found months earlier in 2012. Local residents say the neighborhood is a known area where transgender women engage in sex work. Local LGBTQ organizations reached out to local law enforcement to begin formulating prevention strategies to increase the safety of transgender women in the area. No suspect has been charged to date for the murder.

BRYANT STEELE, 27, Black, gay, cisgender man

Indianapolis, IN, September 30, 2012

Bryant Steele (27) was found dead inside his home due to a house fire. Media sources state that Steele's family believes that the homicide could potentially be a hate crime, as Steele was openly gay. The police investigation noted that there could be foul play involved in Steele's death. Police sought and questioned one suspect, but he was released. No further updates are currently available.

DESEAN BOWMAN, 18, Black, cisgender, gay man

Baltimore, MD, June 2, 2012

Media sources state that an unidentified Black man shot and killed DeSean Bowman (18). Bowman was openly gay and was dressed in women's clothing at the time of the shooting. The shooting allegedly occurred after the gunmen unsuccessfully tried to start a conversation with Bowman's friend and a verbal argument ensued. Bowman, in an effort to de-escalate the situation, told his friend, "Why even argue with this guy? Just get in the car." As Bowman's friend attempted to enter the car his assailant took out a gun and shot Bowman in the head. The Baltimore Police department continues to investigate the murder and have yet to apprehend a suspect. While the police are yet to declare Bowman's death a hate crime, numerous activists, specifically representatives from the Guardian Angels as well as local journalists, consider Bowman's death to be motivated by hate violence. Given that the shooter had no financial motive, local residents suspect that Bowman's attire may have increased his vulnerability to violence.

TRACEY JOHNSON, 40, Black, transgender woman, sexual orientation unknown

Baltimore, MD, July 5, 2012

Tracey Johnson (40) died of multiple gunshot wounds in Baltimore. According to news sources, she and a friend ran from the assailant into a nearby home, where Johnson's assailant followed and shot her to death. In August

2012 police released a sketch of the suspected killer, who so far has eluded arrest. They claim that as of now, there is no evidence this was a hate crime, and they believe the suspect knew her victim.

JOSEPH “ALEX” ULRICH, 40, White, gay, cisgender man

Baltimore, MD August 12, 2012

Quinton Bass allegedly shot both Joseph “Alex” Ulrich (40) and Larry Peterson (56). Ulrich was killed and Peterson was critically injured, but survived. According to media sources, Ulrich’s family members stated that police informed them that his assailant was attempting to rob him and his friend Peterson, who owned the home where the shooting happened. Ulrich had moved to Baltimore to launch his career as a photographer, and his photos had recently been featured for the first time in a Pennsylvania art gallery. Several days after the shootings local Baltimore organizations organized a vigil for both Ulrich and Peterson. In April 2013 Baltimore police identified that robbery was the motive for the homicide and did not identify it as a hate crime. The trial is scheduled to start in June 2013.

DIMITREZ GRIFFIN, 37, Black, gay, cisgender man

Detroit, MI, March 28, 2012

On March 28, 2012 Dimitrez Griffin was found fatally beaten in his room at Leland Hotel. Richard Watson and Micah Denson allegedly attacked and killed Dimetrez Griffin, 37, after attempting to rob him in his Leland Hotel home in Detroit, Michigan. During the course of the robbery, the two men strangled Griffin and stepped on his neck, killing him. Watson and Denson were arrested and are being charged with first-degree murder. Griffin was a well-known local LGBTQ activist. Detroit police and prosecutors have connected these two men to a string of robberies that target gay men through chat sites. Griffin’s friends and family organized a memorial service on Saturday, April 7th to commemorate his life.

COKO WILLIAMS, 35, Black, transgender woman, sexual orientation unknown

Detroit, MI, April 3, 2012

On April 3, 2012 police found Coko Williams (35) shot with her throat slashed in a Detroit neighborhood known for sex work, yet it was unclear whether Williams had engaged in sex work at the time. Equality Michigan released a statement mentioning that both sex workers and transgender women are often targets of severe violence. According to news reports witnesses stated the suspect fled the scene in a gold-colored vehicle, but no arrests have been made. Multiple news sources speculate whether Williams’ homicide was a hate crime.

WAUYNEE WALLACE, 17, Black, gay cisgender man

Camden, NJ, July 24, 2012

An unknown assailant fatally shot Waynee Wallace (17), when Wallace was with two friends. News reports state that when Wallace’s friends heard shots they scattered. Media sources state that “friends described Waynee Wallace as a selfless, outgoing, and charismatic gay teenager, comfortable with his sexuality despite living in a city where gay youth said they were verbally harassed constantly and warned to stay off certain blocks.” Law enforcement has yet to identify the killer. Additional media sources suggest that despite the heightened violence in

Camden over the past year, Wallace's death was exceptional because of the hate surrounding his sexual identity and the general homophobia that is so characteristic of his community. These same sources state that terms like "faggot," "sissy" or "punk" are frequently used to harass queer individuals in Camden. Family and friends have also insinuated that Wallace's sexual identity made him a target of this homicide.

KENDALL L. HAMPTON, 26, Black, gender non-conforming, sexual orientation unknown

Cincinnati, OH, August 18, 2012

Eugene Carlos Dukes (19) allegedly shot and killed Kendall L. Hampton (26) in a parking lot in Cincinnati, Ohio. Police state that Hampton was a sex worker, but the police have not released any additional details on the motive for the murder. Dukes was indicted of murder charges by the Hamilton County Grand Jury in September, in connection with the homicide of Kendall Hampton in August. BRAVO and Dukes' family called for this homicide to be classified as a hate crime. No further information is known at this time.

IBN SHAKOOR, 20, Black cisgender man, sexual orientation unknown

MICHAEL JOHNSON, 20, Black cisgender man, sexual orientation unknown

Youngstown, OH June 1, 2012

In the early morning hours of June, 1, 2012, an unknown assailant(s) shot at Ibn Shakoor (20), Michael Johnson (20), and a third anonymous individual, while the three were parked in their car. Public sources state that the third individual told police they were listening to music when he heard between 6 and 12 shots. After the shots were fired, Johnson attempted to jump out of the passenger side of the vehicle when he was shot and killed. Shakoor was shot and killed while inside the car. The third victim survived the incident. Media reports question whether the case was anti-LGBTQ hate bias or was a case of mistaken identity by a local gang. NCAVP member program BRAVO believes the case should be classified as a hate crime. To date no suspects have been arrested in this double homicide.

KYRA KRUZ, 27, Latina, transgender woman, sexual orientation unknown

Philadelphia, PA, September 3, 2012

Kyra Kruz (27), a well-known transgender-rights activist was found fatally shot in the head in the Frankford area of Philadelphia. Kruz was active in the LGBTQ community, having worked in HIV/AIDS outreach at the Gay and Lesbian Latino AIDS Initiative. Kruz had also designed costumes and choreographed dances in Philadelphia Pride events. The Philadelphia police are actively investigating the case, but there are no suspects. Multiple media sources have insinuated that Kruz' death was a hate crime, specifically because of the public location where her body was retrieved.

JEFF, gay cisgender man, age unknown

San Juan, Puerto Rico October 24, 2012

LGBTQ anti-violence advocates in Puerto Rico reported this homicide to NCAVP. These advocates stated that the victim was known by local acquaintances as Jeff with little additional information. Jeff's body was in San Juan, PR on October 24th in an area known for anti-LGBTQ homicides had occurred in the past.

MALENA SUAREZ, 23, Latina, transgender woman, sexual orientation unknown

Carolina, Puerto Rico, October 2012

Malena, a volunteer for the transgender advocacy group Transexuales y Transgeneros en Marcha (TTM), was found dead in her home, the victim of multiple stabbings to the back. She had been missing for several days, and the exact date of her death was unknown. She was Puerto Rico's 30th victim of anti-LGBTQ violence in the past decade, and the tenth between 2010 and 2012. Similar to many other homicides, her death had not been classified a hate crime, although her friends at TTM believe she was targeted because she was transgender. No suspects have been arrested.

CARLITOS, gay cisgender man, age unknown

San Juan, Puerto Rico, November 7th, 2012

Carlitos was found bound with multiple gunshot wounds to his face on November 7th, 2012. According to LGBTQ advocates in Puerto Rico, Carlitos' death occurred in an area known for violence against LGBTQ people in San Juan.

MARQUITA JONES, 20, Black, lesbian, cisgender, woman

Memphis, TN, July 14, 2012

According to news sources an unknown assailant shot and killed Marquita Jones (20) in Hickory Hill, a neighborhood in Memphis while she was inside her vehicle. Jones's family identified her as a 'stud' in media reports. Family and friends say that several men in the area had an issue were her sexual orientation and felt threatened by her. Memphis police stated at the time they were investigating the shooting as a homicide and would inform the US Attorney's Office if there were evidence that met the guidelines of a federal hate crime, but there have been no updates to that case. Family and friends strongly suspect that Jones' death was in fact a hate crime. No suspect has been identified in the case to date.

MOLLIE JUDITH OLGIN, 19, White, lesbian, cisgender, woman

Portland, TX, June 22, 2012

An unknown assailant shot both Mollie Judith Olgin (19) and her girlfriend Mary Kristene Chapa (18), in the head. Olgin died at the scene, and media sources state that Chapa made a limited recovery (she is able to speak normally and can get around, though she has a noticeable limp, and very limited motion in her left hand and arm). The two teens were discovered shot by a couple visiting the Violet Andrews Park in Portland, Texas, on June 22, 2012 where the incident occurred. A witness came forward and described the suspect as a white male in his 20's with dark hair. Although a sketch and description of the shooter was released, no arrests have been made presently. The police suspect that the crime was not a random act of violence, although they have not yet classified the crime as a hate crime. The local LGBTQ community as well as local journalists were quick to identify the crime as a hate crime.

NCAVP MEMBER AND AFFILIATE LIST

(ALPHABETICAL BY STATE OR PROVINCE)

The following NCAVP member and affiliate list is current as of February 2012. If you have corrections, want to learn more about our work, or know of an organization that may be interested in joining NCAVP, please contact the NCAVP Coordinator, at extension 50, or info@ncavp.org.

PROGRAM INFORMATION BELOW IS LISTED AS FOLLOWS:

STATE

CITY

ORGANIZATION NAME

FOCUS AREAS:

- **HV (HATE VIOLENCE)**
- **IPV (INTIMATE PARTNER VIOLENCE)**
- **PM (POLICE MISCONDUCT)**
- **SV (SEXUAL VIOLENCE)**

PHONE NUMBERS

WEB



NATIONAL OFFICE

New York City Anti-Violence Project
240 West 35th Street, Suite 200
New York, NY 10001
Phone: 212-714-1184
Fax: 212-714-2627

ARIZONA

TUCSON

WINGSPAN ANTI-VIOLENCE PROGRAMS

HV, IPV, PM, SV

CLIENT: (800) 553-9387

OFFICE: (800) 624-0348

WEB: WWW.WINGSPAN.ORG

CALIFORNIA

LOS ANGELES

LA GAY & LESBIAN CENTER (LAGLC) ANTI-VIOLENCE PROJECT

HV, PM, SV

CLIENT (ENGLISH): (800) 373-2227

CLIENT (SPANISH): (877) 963-4666

WEB: WWW.LAGAYCENTER.ORG

LOS ANGELES

LAGLC DOMESTIC VIOLENCE LEGAL ADVOCACY PROJECT

IPV, SV

OFFICE: (323) 993-7649

TOLL-FREE: (888) 928-7233

WEB: WWW.LAGAYCENTER.ORG

LOS ANGELES

LAGLC STOP DOMESTIC VIOLENCE PROGRAM

IPV, SV

OFFICE: (323) 860-5806

WEB: WWW.LAGAYCENTER.ORG

SAN DIEGO

SAN DIEGO LGBT CENTER

HV, IPV, PM, SV

CLIENT: (619) 692-2077 X208

WEB: WWW.THECENTERSD.ORG

SAN FRANCISCO

COMMUNITY UNITED AGAINST VIOLENCE

HV, IPV, PM, SV

24 HOUR HOTLINE: (415) 333-HELP

WEB: WWW.CUAV.ORG

COLORADO

DENVER

COLORADO ANTI-VIOLENCE PROGRAM

HV, IPV, PM, SV

CLIENT: (888) 557-4441

OFFICE: (303) 839-5204

WEB: WWW.COAVP.ORG

FLORIDA

BROWARD COUNTY

BROWARD LGBT DOMESTIC VIOLENCE COALITION (NCAVP AFFILIATE)

IPV, SV

OFFICE: (954)7645150 X.111

MIAMI

THE LODGE/VICTIM RESPONSE, INC.

IPV, SV

CRISIS LINE: (305) 693-0232

WEB: WWW.THELODGE MIAMI.ORG

GEORGIA

ATLANTA

SPEAKOUT GEORGIA

HV, IPV, SV

HOTLINE: (678) 861-7867

WEB: WWW.SPEAKOUTGEORGIA.ORG

ATLANTA

UNITED4SAFETY

IPV, SV

HELPLINE: (404) 200-5957

WEB: WWW.UNITED4SAFETY.ORG

ILLINOIS

CHICAGO

CENTER ON HALSTED ANTI-VIOLENCE PROJECT

HV, IPV, PM, SV

24 HR CRISIS LINE: (773) 871-CARE

WEB: WWW.CENTERONHALSTED.ORG

KENTUCKY

LOUISVILLE

CENTER FOR WOMEN AND FAMILIES
IPV, SV
24 HR CRISIS LINE: (877) 803-7577
WEB: WWW.THECENTERONLINE.ORG

LOUISIANA

NEW ORLEANS

BREAKOUT!
HV, PM
OFFICE: (504) 522-5435
WEB: WWW.YOUTHBREAKOUT.ORG

NEW ORLEANS

HIV/AIDS PROGRAM, LOUISIANA OFFICE OF PUBLIC HEALTH
HV, IPV, SV
OFFICE: (504) 568-7474

NEW ORLEANS

LGBT COMMUNITY CENTER OF NEW ORLEANS
HV, IPV, PM, SV
OFFICE: (404) 945-1103

MASSACHUSETTS

BOSTON

FENWAY COMMUNITY HEALTH VIOLENCE RECOVERY PROGRAM
HV, IPV, PM, SV
INTAKE: (800) 834-3242
OFFICE: (617) 927-6250
WEB: WWW.FENWAYHEALTH.ORG

BOSTON

THE NETWORK/LA RED
IPV, SV
ENGLISH/SPANISH HOTLINE: (617) 423-7233
WEB: WWW.TNLR.ORG

MICHIGAN

DETROIT

EQUALITY MICHIGAN
HV, IPV, PM
CLIENT: (866) 926-1147
WEB: WWW.EQUALITYMI.ORG

MINNESOTA

MINNEAPOLIS

OUTFRONT MINNESOTA

HV, IPV, PM, SV

HOTLINE: (612) 824-8434

WEB: WWW.OUTFRONT.ORG

MISSOURI

KANSAS CITY

KANSAS CITY ANTI-VIOLENCE PROJECT

HV, IPV, PM, SV

CLIENT: (816) 561-0550

WEB: WWW.KCAVP.ORG

ST. LOUIS

ANTI-VIOLENCE ADVOCACY PROJECT OF ALIVE

HV, IPV, SV

24 HR CRISIS LINE: (314) 993-2777

WEB: WWW.ALIVESTL.ORG

NEW YORK

ALBANY

IN OUR OWN VOICES

HV, IPV, SV

HOTLINE: (518) 432-4341

OFFICE: (518) 432-4341

WEB: WWW.INOUROWNVOICES.ORG

BAYSHORE

LONG ISLAND GLBT SERVICES NETWORK

HV, IPV, SV

OFFICE: (631) 665-2300

LONG ISLAND GAY AND LESBIAN YOUTH, INC.

WEB: WWW.LIGALY.ORG

LONG ISLAND GLBT COMMUNITY CENTER

WEB: WWW.LIGLBTCENTER.ORG

NEW YORK CITY

NEW YORK CITY ANTI-VIOLENCE PROJECT

HV, IPV, PM, SV

24 HR ENGLISH/SPANISH HOTLINE: (212) 714-1141

OFFICE: (212) 714-1184

WEB: WWW.AVP.ORG

ROCHESTER

GAY ALLIANCE OF THE GENESEE VALLEY

HV, IPV, PM, SV

OFFICE: (585) 244-8640

WEB: WWW.GAYALLIANCE.ORG

NORTH CAROLINA

CARY

RAINBOW COMMUNITY CARES, INC.

HV, IPV, PM, SV

OFFICE: (919)342-0897

WEB: WWW.RCCARES.ORG

OHIO

STATEWIDE, COLUMBUS OFFICE

BRAVO (BUCKEYE REGION ANTI-VIOLENCE ORGANIZATION)

HV, IPV, PM, SV

CLIENT: (866) 86 BRAVO

WWW.BRAVO-OHIO.ORG

ONTARIO

TORONTO

THE 519 ANTI-VIOLENCE PROGRAMME

HV, IPV, PM, SV

CLIENT: (416) 392-6877

WEB: WWW.THE519.ORG

QUEBEC

MONTREAL

CENTRE DE SOLIDARITY LESBIENNE

IPV, SV

CLIENT: (514) 526-2452

WEB: WWW.SOLIDARITELESBIENNE.QC.CA

RHODE ISLAND

PROVIDENCE

SOJOURNER HOUSE

HV, IPV, PM, SV

CLIENT: (401) 658-4334

WEB: WWW.SOJOURNERRI.ORG

SOUTH CAROLINA

GREENVILLE

SEAN'S LAST WISH

HV, IPV, PM, SV

OFFICE: 864-884-5003

WEB: WWW.SEANSLASTWISH.ORG

TEXAS

DALLAS

RESOURCE CENTER DALLAS

IPV

OFFICE: (214) 540-4455

WEB: WWW.RCDALLAS.ORG

HOUSTON

MONTROSE COUNSELING CENTER

HV, IPV, SV

OFFICE: (713) 529-0037

WWW.MONTROSECOUNSELINGCENTER.ORG

VERMONT

WINOOSKI

SAFESPACE AT THE R U 1 2? COMMUNITY CENTER

HV, IPV, PM, SV

CLIENT: (866) 869-7341

WEB: WWW.RU12.ORG

VIRGINIA

ALEXANDRIA

ALEXANDRIA SEXUAL AND DOMESTIC VIOLENCE PROGRAMS

IPV, SV

IPV HOTLINE: (703) 746-4911

SV HOTLINE: (703) 683-7273

OFFICE: (703) 746-5030

RICHMOND

VIRGINIA ANTI-VIOLENCE PROJECT

HV, IPV, PM, SV

OFFICE: (804) 925-8287

WEB: WWW.VIRGINIAAVP.ORG

WASHINGTON, D.C.

DC TRANS COALITION

HV, IPV, PM, SV

OFFICE: (202) 681-DCTC

WEB: WWW.DCTRANSCOALITION.ORG

GLOV (GAYS AND LESBIANS OPPOSING VIOLENCE)

HV, IPV, PM, SV

OFFICE: (202) 682-2245

WEB: WWW.GLOVDC.ORG

RAINBOW RESPONSE COALITION

IPV, SV

OFFICE: (202) 299-1181

WEB: WWW.RAINBOWRESPONSE.ORG

WISCONSIN

APPLETON

FOX VALLEY/OSHKOSH LGBTQ ANTI-VIOLENCE PROJECT

HV, IPV, PM, SV

E-MAIL: FOXOAVP@GMAIL.COM

MILWAUKEE

MILWAUKEE LGBT CENTER ANTI-VIOLENCE PROJECT

HV, IPV, SV

OFFICE: (414) 271-2656

WEB: WWW.MKELGBT.ORG

NATIONAL

MILWAUKEE, WI

FORGE SEXUAL VIOLENCE PROJECT

SV

OFFICE: (414) 559-2123

WEB: WWW.FORGE-FORWARD.ORG

BLACKLICK, OH

NATIONAL LEATHER ASSOCIATION

IPV

WEB: WWW.NLAIDVPROJECT.US/WEB

National Coalition of Anti-Violence Programs Case Intake/ Incident Reporting Form	Your Name: _____		1
	Date: ____/____/____	Time of Intake: ____ AM/PM	
		Staff Volunteer Intern	
CALLER INFORMATION		Intake Type: Hotline/Phone Email Mail Ofc/Walk-in Media Website	Entered Into Database ____/____/____ Call Back Needed Yes No
Case Type(s) <i>(select all that apply):</i>		H: Hate Violence I: Intimate Partner Violence NA: Other P: Police Violence S: Sexual Violence Z: Pick-up	
Caller's Name: _____ Caller's Address: _____ _____ Phone: (____) _____ Ok to call? Alt Phone: (____) _____ Ok to call? Caller's E-mail: _____ Ok to email?		Caller presents as (check one): Family Friend Lover/Partner Offender Organizational Survivor/Victim Service provider Survivor/Victim Witness Other (specify): _____	
		Caller assessed as (For IPV cases, complete after using IPV Assessment Form): Family Friend Lover/Partner Offender Organizational Survivor/Victim Service provider Survivor/Victim Witness Other (specify): _____	
Caller Was Referred By (Check one)			
AVP Publicity _____ Court Family Friend Hospital _____ Internet LGBTQ Org _____ Media _____ Phone Book Police Other (specify): _____			
SURVIVOR/VICTIM #1		SURVIVOR/VICTIM INFORMATION	
Number of Survivors/Victims: _____ Survivor/Victim is: Person Organization Name: _____ Address: _____ _____ Phone: _____ Email: _____ Prefers contact via: Phone Email OK to say 'AVP?' Yes No OK to leave message? Yes No OK to email 'AVP?' Yes No		AGE: 14 or under 15-18 19-24 25-29 30-39 40-49 50-59 60-69 70-79 80 or over Not disclosed Age (if known): _____	GENDER ID (check all that apply): Man Woman Non-Transgender Transgender Self-Identified/Other (specify): _____ _____ Not disclosed
RACE/ETHNICITY (check all that apply): Arab/Middle Eastern Asian/Pacific Islander Black/African American/ African Descent Indigenous/First People/ Native American/ American Indian Latina/o White Self-Identified/Other (specify): _____ _____ Not disclosed		SEXUAL ORIENTATION: Bisexual Gay Heterosexual Lesbian Queer Questioning/ Unsure Self-Identified/ Other (specify): _____ _____ Not disclosed	IMMIGRATION STATUS: U.S. citizen Permanent resident Undocumented Other Not disclosed
		HIV STATUS: Survivor/victim is HIV+? Yes No Not disclosed DISABILITY: Survivor/victim has a disability? Yes No Not disclosed If yes, check all that apply and specify: Blind/Visually impaired: _____ Deaf/Hard of hearing: _____ Learning disability: _____ Mental health: _____ Physical: _____	

SURVIVOR/VICTIM USE OF ALCOHOL/DRUGS			
Alcohol involved?	Yes	No	Not disclosed
Drugs involved?	Yes	No	Not disclosed
If yes, describe: _____			

CASE/INCIDENT INFORMATION	2
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Date of Incident: ___/___/___ Time of Incident: ___:___am/pm	Location/ Address of Incident: _____
Precinct where incident occurred: _____	_____ ZIP _____

TYPE(S) OF VIOLENCE <i>(check all that apply):</i>	SITE TYPE <i>(check one):</i>											
<p style="text-align: center;">VIOLENCE AGAINST PERSON <i>(check all that apply):</i></p> <table border="0"> <tr> <td style="vertical-align: top;"> <p>Physical violence against person <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Forced use of alcohol/drugs Murder Attempted murder Physical violence Attempted physical violence Robbery Attempted robbery Sexual violence Attempted sexual violence Self-injury <ul style="list-style-type: none"> Suicide Attempted suicide Other self-harming behavior <i>(cutting, etc.)</i> <p><i>Was a weapon involved?</i> Yes No Unknown</p> <p>List weapon: _____</p> <p><i>Did the person die?</i> Yes No Unknown</p> <p><i>Was the person injured?</i> Yes No Unknown</p> <p><i>If yes, severity of injury:</i></p> <ul style="list-style-type: none"> No injuries requiring medical attention Injuries requiring medical attention (specify): <ul style="list-style-type: none"> Needed but not received Outpatient (Clinic/MD/ER) Hospitalization/Inpatient Not disclosed <p>Type of injury (specify): _____</p> </td> <td style="vertical-align: top;"> <p>Other violence against person <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Blackmail Bullying Discrimination Eviction Financial Harassment (NOT in person: mail, email, tel. etc) Isolation Medical Sexual harassment Stalking Threats/Intimidation Use of children <i>(threats, outing, etc.)</i> Verbal harassment in person Violence against pet <ul style="list-style-type: none"> Pet injured Pet killed Other (specify): _____ <p style="text-align: center;">Police violence/misconduct <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Excessive force Police entrapment Police harassment Police raid Unjustified arrest <p style="text-align: center;">Reported to internal/external police monitor?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> <td>Will Report</td> </tr> <tr> <td colspan="2">Attempted, complaint not taken</td> <td>Unknown</td> </tr> <tr> <td colspan="2">Not available</td> <td>Unknown</td> </tr> </table> <p>Other (specify): _____</p> </td> </tr> </table>	<p>Physical violence against person <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Forced use of alcohol/drugs Murder Attempted murder Physical violence Attempted physical violence Robbery Attempted robbery Sexual violence Attempted sexual violence Self-injury <ul style="list-style-type: none"> Suicide Attempted suicide Other self-harming behavior <i>(cutting, etc.)</i> <p><i>Was a weapon involved?</i> Yes No Unknown</p> <p>List weapon: _____</p> <p><i>Did the person die?</i> Yes No Unknown</p> <p><i>Was the person injured?</i> Yes No Unknown</p> <p><i>If yes, severity of injury:</i></p> <ul style="list-style-type: none"> No injuries requiring medical attention Injuries requiring medical attention (specify): <ul style="list-style-type: none"> Needed but not received Outpatient (Clinic/MD/ER) Hospitalization/Inpatient Not disclosed <p>Type of injury (specify): _____</p>	<p>Other violence against person <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Blackmail Bullying Discrimination Eviction Financial Harassment (NOT in person: mail, email, tel. etc) Isolation Medical Sexual harassment Stalking Threats/Intimidation Use of children <i>(threats, outing, etc.)</i> Verbal harassment in person Violence against pet <ul style="list-style-type: none"> Pet injured Pet killed Other (specify): _____ <p style="text-align: center;">Police violence/misconduct <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Excessive force Police entrapment Police harassment Police raid Unjustified arrest <p style="text-align: center;">Reported to internal/external police monitor?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> <td>Will Report</td> </tr> <tr> <td colspan="2">Attempted, complaint not taken</td> <td>Unknown</td> </tr> <tr> <td colspan="2">Not available</td> <td>Unknown</td> </tr> </table> <p>Other (specify): _____</p>	Yes	No	Will Report	Attempted, complaint not taken		Unknown	Not available		Unknown	<p style="text-align: center;">SITE TYPE <i>(check one):</i></p> <ul style="list-style-type: none"> Cruising area In or near LGBTQ-identified venue Non-LGBTQ-identified venue (bar, restaurant, public transportation, etc.) Police precinct/ jail/ vehicle Private residence School/college/university Shelter <ul style="list-style-type: none"> DV/IPV Non-DV/IPV Street/public area Other (specify): _____ Workplace <i>(place where survivor or abusive partner is employed)</i> Not disclosed <p><i>Was this incident related to pick-up violence?</i> Yes No Unknown</p> <p>If yes, did survivor/victim & offender meet through cruising website or phone app? Yes No Unknown</p> <p>If yes, specify website/app: Adam4adam Craigslist Eros Grindr Manhunt Rentboy</p> <p>Other website/app (specify): _____</p> <hr/> <p style="text-align: center;">MOTIVE <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Intimate partner violence Pick-up violence Police violence Sexual violence Bias violence <ul style="list-style-type: none"> Anti-Immigrant Anti-LGBQ/Homophobia/Biphobia Anti-Sex worker Anti-Transgender/Transphobia Disability HIV/AIDS-related Racist/Anti-ethnic Religious (specify perceived religion): _____ Sexist Other (specify): _____
<p>Physical violence against person <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Forced use of alcohol/drugs Murder Attempted murder Physical violence Attempted physical violence Robbery Attempted robbery Sexual violence Attempted sexual violence Self-injury <ul style="list-style-type: none"> Suicide Attempted suicide Other self-harming behavior <i>(cutting, etc.)</i> <p><i>Was a weapon involved?</i> Yes No Unknown</p> <p>List weapon: _____</p> <p><i>Did the person die?</i> Yes No Unknown</p> <p><i>Was the person injured?</i> Yes No Unknown</p> <p><i>If yes, severity of injury:</i></p> <ul style="list-style-type: none"> No injuries requiring medical attention Injuries requiring medical attention (specify): <ul style="list-style-type: none"> Needed but not received Outpatient (Clinic/MD/ER) Hospitalization/Inpatient Not disclosed <p>Type of injury (specify): _____</p>	<p>Other violence against person <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Blackmail Bullying Discrimination Eviction Financial Harassment (NOT in person: mail, email, tel. etc) Isolation Medical Sexual harassment Stalking Threats/Intimidation Use of children <i>(threats, outing, etc.)</i> Verbal harassment in person Violence against pet <ul style="list-style-type: none"> Pet injured Pet killed Other (specify): _____ <p style="text-align: center;">Police violence/misconduct <i>(check all that apply):</i></p> <ul style="list-style-type: none"> Excessive force Police entrapment Police harassment Police raid Unjustified arrest <p style="text-align: center;">Reported to internal/external police monitor?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> <td>Will Report</td> </tr> <tr> <td colspan="2">Attempted, complaint not taken</td> <td>Unknown</td> </tr> <tr> <td colspan="2">Not available</td> <td>Unknown</td> </tr> </table> <p>Other (specify): _____</p>	Yes	No	Will Report	Attempted, complaint not taken		Unknown	Not available		Unknown		
Yes	No	Will Report										
Attempted, complaint not taken		Unknown										
Not available		Unknown										

VIOLENCE AGAINST PROPERTY (check all that apply):
Arson Theft Vandalism Other (specify): _____ _____ _____
*Est. stolen/damaged property value: \$ _____

OFFENDER INFORMATION	3
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Total Number of Offenders:	Is offender a member of identifiable hate group? Yes No Unk.	Hate group's name(s): _____
-----------------------------------	--	-----------------------------

Vehicle used in case/incident? Yes No If yes, describe vehicle: _____ License #: _____

Note: If there is more than one offender, CREATE A DESIGNATION FOR EACH OFFENDER for use in the blank following each demographic category below (A, B, C, etc.)

Offender A Name: _____ Offender B Name: _____ Offender C Name: _____

OFFENDER(S) KNOWN TO SURVIVOR? Yes No If YES, fill out 1), below. If NO, fill out 2).

1) KNOWN OFFENDER(S): RELATIONSHIP TO SURVIVOR/VICTIM:

Acquaintance/ Friend Employer/Co-Worker Ex-Lover/Partner Landlord/Tenant/Neighbor
 Lover/Partner (Live-in Non Live-In) Pick-Up Police Other law enforcement (FBI, ICE, etc.)
 Other first responder (EMT, Court personnel, etc.) Relative/Family Roommate Service provider
 Other (specify): _____ Unknown

2) UNKNOWN OFFENDER: RELATIONSHIP TO SURVIVOR/VICTIM:
--

Police Other law enforcement (FBI, ICE, etc.) Other first responder (EMT, Court personnel, etc.)
 Pick-Up Stranger Other (specify): _____ Unknown

AGE:	GENDER ID (check all that apply):	RACE/ETHNICITY (check all that apply):	SEXUAL ORIENTATION:
14 or under ____	Man ____	Arab/Middle Eastern	Bisexual ____ Gay ____
15-18 ____	Woman ____	____	Heterosexual ____ Lesbian ____
19-24 ____	Transgender ____	Asian/Pacific Islander ____	Queer ____ Questioning/Unsure ____
25-29 ____	Non-Transgender ____	Black/African American/ African Descent ____	Self-Identified/Other ____ (specify): _____
30-39 ____	Self-Identified /Other ____ (specify): _____	Indigenous/First People/ Native American/ American Indian ____	Not disclosed ____ Unknown ____
40-49 ____	Not Disclosed ____	Latina/o ____	OFFENDER USE OF ALCOHOL/DRUGS
50-59 ____	Unknown ____	White ____	Alcohol involved? Yes No Not disclosed Unk.
60-69 ____		Self-Identified /Other ____ (specify): _____	Drugs involved? Yes No Not disclosed Unk.
70-79 ____		Not disclosed ____	If yes, describe: _____ _____
80 or over ____		Unknown ____	
Not disclosed ____	INTERSEX:		
Unknown ____	Yes No		
Age (if known) ____	Not disclosed Unknown		

POLICE/COURT RESPONSE

Did survivor/victim interact with police in any way? Yes No Unknown

POLICE RESPONSE	POLICE REPORTING
<p><i>What was police attitude toward survivor/victim?</i> Courteous Indifferent Hostile Unk.</p> <p><i>Did police do any of following to survivor/victim?</i> (check all that apply): Arrest survivor/victim Verbal abuse Use slurs or bias language Physical violence Sexual violence Other negative behaviors (specify): _____</p> <hr/> <p><i>If police violence/misconduct, reported to internal/external police monitor?</i> Yes No Will Report Attempted, complaint not taken Not available Unknown</p>	<p><i>Did survivor/victim report incident to police?</i> Yes No Unknown</p> <p>Did the police take a complaint? Yes No Complaint # _____</p> <p>Did the police arrest the offender(s)? Yes No Unknown</p> <p>Police involved (check all that apply): City/Muni. County State Federal (specify): _____ Other (please specify): _____ Police Badge # _____</p>
PROTECTIVE ORDERS	
<p><i>Was a protective order sought by survivor/victim?</i> Yes No Unknown</p> <p><i>Was the protective order granted?</i> Yes No Unknown</p> <p>Protective order obtained (check all that apply): By survivor/victim By offender Both survivor/victim & offender</p> <p>Civil Criminal DV Non-DV Temporary Permanent Unknown</p>	

POLICE/COURT RESPONSE <i>(continued)</i>	4
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DOMESTIC VIOLENCE CLASSIFICATION	BIAS INCIDENT CLASSIFICATION
N/A	N/A
<p>Did the survivor/victim identify the case/incident as domestic violence? Yes No Unknown</p> <p>Did the police classify the case/incident as domestic violence? Yes No Unknown</p> <p>If criminal case, was the case/incident classified as domestic violence by prosecutors? Yes No In process Unknown</p>	<p>Did the survivor/victim describe the incident as hate-motivated? Yes No Unknown</p> <p>Did the police classify the incident as hate-motivated? Yes No Unknown</p> <p>Was the incident classified as a hate crime by prosecutors? Yes No In process Unknown</p>

Violence/misconduct by other first responder?

<p>Yes No Unknown</p> <p><i>First responder was:</i> EMT/Paramedic Court personnel Service provider</p> <p>Other (specify): _____</p> <p><i>Type of violence/misconduct</i> (check all that apply): Verbal abuse Use of slurs or bias language Physical violence Sexual violence Other negative behaviors (specify): _____</p>
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SERVICES PROVIDED

REFERRALS <i>(check all that apply):</i>	ADVOCACY <i>(check all types that apply):</i>	FOLLOW-UP NEEDED?	OTHER SERVICES <i>(check all that apply):</i>
Counseling Housing Legal Shelter DV Homeless Medical Police Other (specify): _____	Housing Legal Medical Mental health Police Public benefits Disability/SSD Medicaid/Medicare Public Assistance/Food Stamps Shelter/Housing Unemployment Other (specify): _____	Agency follow-up Caller follow-up <div style="background-color: #e0e0e0; font-weight: bold; padding: 2px;">ACCOMPANIMENT</div> Court Hospital Police Other (specify): _____	Safety planning Court monitoring Next court date: _____ _____ Emergency funds Other (specify): _____ _____

LOCAL INFORMATION & REFERRALS
